WCHA

WHITE COUNTY HOUSING AUTHORITY

Pamela Deig, Executive Director 500 Fourth Street, Crossville, IL 62827 Phone: 618-966-3868 Fax: 618-966-2303

TENANT REQUEST REGARDING RENT

This cir welfare	I request that my rent be reduced due to a change in circumstances. This circumstance is not a result of a TANF grant being reduced because I committed welfare fraud, or because I failed to comply with a welfare department economic self-sufficiency requirement.				
REASON:					
☐ Informin	ng PHA of nev	w employment.			
☐ Other.					
Request made by	y (print name)	:			
Apartment #:					
Location (please	circle):	CROSSVILLE	GRAYVILLE	NORRIS CITY	
Signature:			Date:		