



Date _____

LANDLORD APPROVAL FOR HOUSEHOLD CHANGE

The Family listed below has requested a change in their housing assistance status. Specifically, they are requesting a household change. The family has been notified that prior to our agency approving a change they must have written permission from their Landlord that the change is approved and within the Landlord's policies and practices. Please use this form to document that you approve or do not approve the family's request.

Please be advised that our agency's screening practice for a new family member does not include rental history. Such screening is the Landlord's prerogative and must fall under Oregon Landlord Tenant Law. If the Landlord does not approve the change, our agency will not approve the change so long as the family continues the current rental contract.

FAMILY HEAD OF HOUSEHOLD: _____

_____ I am requesting approval to add the following person or people to my household.

NAME: _____ NAME: _____ NAME: _____
SSN: _____ SSN: _____ SSN: _____
DOB: _____ DOB: _____ DOB: _____

_____ I am notifying you that I am removing the following person or people from my household.

NAME: _____ NAME: _____ NAME: _____
SSN: _____ SSN: _____ SSN: _____
DOB: _____ DOB: _____ DOB: _____

_____ This action by the family is approved by the landlord.
_____ This action by the family **is not** approved by the Landlord.

LANDLORD SIGNATURE

DATE

Main Office:
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Hours: Mon to Thurs, **8am to 5pm**
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