## **Health and Human Services Commission Verification**

Health and Human Services Commission 3105 Executive Blvd. Beaumont, TX 77705 Fax: 1877-447-2839		RE:					
				determine eligib	to verify income date of applicants and reside bility and establish rents, we request your coop be kept in strict confidence.		
				BHA OFFICIA	AL:	Date:	
I authorize the r	elease of the information requested below.						
Signature of A	pplicant/Resident:	Date:					
	Office Use	Only					
<b>Head of House</b>	mily:hold:s in household:	_ _					
	s with Dependant Children (received monthly) eceived monthly):	s					
Other Income:	A.G.O. SS/SSI Earned Income:	\$ \$					
Is family being sanctioned? Reason:							
Signature of Po	erson Verifying:	Date:					

**Warning**: Section 1001 of Title 18 of the U.S. code makes it criminal offense to make willful false statements or misrepresentations to any department or agency of the United States as to matters within its jurisdiction.

1890 Laurel Street • Beaumont, TX 77701 • (409) 951-7200 • (409) 951-7270-fax

ADA/504 Coordinator Katherine Mitchell at 409-951-7222 phone, 409-951-7272 fax, or email counselor7@bmtha.org

A FAIR HOUSING AND EQUAL EMPLOYMENT OPPORTUNITY AGENCYThe Housing Authority offers accommodations for persons accessing its facilities, as required by the Americans with Disabilities Act. If you require special accommodations, please contact the Beaumont Housing Authority office for assistance. Hearing impaired may contact Relay Texas at 1-800-735-2989 or 7-1-1."si usted necesita este documento traducido por favor llame al 409-951-7200""nếu bạn cần tài liệu này xin vui lòng gọi 409-951-7200 dịch"