

HOUSING CATALYST
Wait List Change Form



BE SURE TO SIGN REVERSE SIDE

Current Information

Name: _____
Head of Household

Did your last name change? Yes No

If yes, please provide your former last name: _____

Did your mailing address change? Yes No If yes, provide new address below:

Street or Box # Apartment# City State Zip Code

Phone: _____ Email: _____

Please Remove Me from this Wait List: _____
Name of Wait List

Family Member Changes

How many people will occupy the household you have applied for? _____

Is someone **entering** your household? Yes No **IF YES, list member(s) you are adding:**

First Name _____ Last Name _____

Male Female Date of Birth _____ Relationship to Head of Household _____

First Name _____ Last Name _____

Male Female Date of Birth _____ Relationship to Head of Household _____

First Name _____ Last Name _____

Male Female Date of Birth _____ Relationship to Head of Household _____

Is someone **leaving** your household? Yes No **IF YES, list First and Last Names below:**

1. _____ 3. _____

2. _____ 4. _____

Income Changes

Is there a change in your household's annual income? Yes No

IF YES, provide new income amount (yearly, before taxes) \$ _____

Change of Head of Household: *Only the current Head of Household may change this.*

Do you want to change the Head of Household? Yes No IF YES, complete below:

Please change the Head of Household to: _____

Signature of Former Head of Household

Date

To protect all parties, if former head of household does not appear in person showing photo ID and sign this form, we may be unable to make this requested change. A notarized statement from the former head of household stating their consent to this change is acceptable.

Preferences

Are there any changes in the Preferences previously chosen? Yes No

If **ADDING** preferences, please check all that **CURRENTLY APPLY**:

- | | |
|---|--|
| <input type="checkbox"/> I was required to move because of government action, (City, State, or Federal).
<i>(Verifying documentation required)</i> | <input type="checkbox"/> I currently live in Wellington, Colorado. |
| <input type="checkbox"/> My living area was extensively damaged by a recognized Federal Disaster and I have not found adequate, permanent housing since.
<i>(Verifying documentation required)</i> | <input type="checkbox"/> I currently live Wellington Public Housing and: <ul style="list-style-type: none">○ Our unit is too large for our family size.○ We need a special unit due to a disability.○ We have outgrown our unit. |

If **REMOVING** preferences, please check the preferences that **NO LONGER APPLY**:

- | | |
|--|---|
| <input type="checkbox"/> I was required to move because of government action, (City, State, or Federal). | <input type="checkbox"/> I currently live in Wellington, Colorado. |
| <input type="checkbox"/> My living area was extensively damaged by a recognized Federal Disaster and I have not found adequate, permanent housing since. | <input type="checkbox"/> I currently live Wellington Public Housing and: <ul style="list-style-type: none">○ Our unit is too large for our family size.○ We need a special unit due to a disability. |

Read and sign below

WARNING! Title 18, Section 1001 of the United States Code, states that a person is guilty of a felony for knowingly and willingly making false or fraudulent statements to any department or agency of the United States. I do hereby swear and attest that all the information above about my household is true and correct.

Signature of Head of Household

Date