

City of Tyler  
Housing Choice Voucher Program  
900 W. Gentry Parkway, Tyler, Texas 75702  
Phone: 903-531-1303 Fax: 903-531-1333

**OWNERSHIP/MANAGEMENT CHANGE**

Please print clearly to ensure timely/accurate disbursement of Housing Assistance Payments

From: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_

Phone: \_\_\_\_\_

**Make Housing Assistance Payment Check payable to:**

Owner Name: \_\_\_\_\_

Business Name/Management Company: \_\_\_\_\_

Tax ID: \_\_\_\_\_

Social Security No.: \_\_\_\_\_

(Tax Id # needs to be for the property owner or management company the check is payable to as indicated above). **IMPORTANT: Use this number on the W9 Form.**

Street Address: \_\_\_\_\_

City: \_\_\_\_\_

Zip: \_\_\_\_\_

Phone(s): \_\_\_\_\_

Name of Contact Person: \_\_\_\_\_

Phone #: \_\_\_\_\_

**List the names and addresses of ALL Section 8 tenant(s) residing in your unit affected by the change. (Attach a separate sheet if necessary)**

**Tenant Name**

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**Unit Address**

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**Please provide:**

- A letter agreeing to comply with the Housing Assistance Payment (HAP) contract
- A Recorded Deed to show proof of ownership or a Management Agreement verifying the arrangement with a professional management firm
- Completed W9

**NO SUBSIDY PAYMENTS WILL BE MAKE PRIOR TO OUR RECEIVING THIS FORM AND THESE IMPORTANT DOCUMENTS.**

**OFFICE USE ONLY**

Vendor Number: \_\_\_\_\_

Effective Date: \_\_\_\_\_