

Walk-in/Drop-off Form

TO BE COMPLETED BY CLIENT/APPLICANT

Your Name: _____ Head of Household: _____

Address: _____ Telephone No: _____

Who are you here to see (Case Worker)? _____

Briefly describe reason for visit:

Items dropping off:

- Request for Tenancy Approval (RFTA)
- Dwelling Lease, HAP Contract, Landlord Application
- Personal Documents:
 - Birth Certificate, Voter's Registration, SS Card(s), Picture ID, etc.
- Income/Asset Verification:
 - Employment, SSI/Social Security, Child Support, Bank Statements, etc.
- Other Documents

Signature: _____ Date: _____

TO BE COMPLETED BY LHA STAFF

Client/Applicant Name	Client No.	Date Received	LHA Staff	Case Worker