



JACKSON HOUSING AUTHORITY
2747 LIVINGSTON ROAD JACKSON, MS 39213
P.O. BOX 11327 JACKSON, MS 39283
PHONE: 601-362-0885 FAX: 601-982-4733

HOUSING CHOICE VOUCHER UPDATE FORM-WAITING LIST

This form MUST be completed and returned to the Housing Authority if changes occur while you remain on the HCV waiting list. This form is for applicants that are currently on the HCV waiting list ONLY. If you are not currently on the waiting list the Housing Authority will not accept this form. IF YOU NEED TO CONFIRM YOUR WAITING LIST STATUS PLEASE CONTACT (601) 362-0885 EXT. 100.

To be completed by the family:

Name: _____ SSN: _____

Address: _____

City/State _____ Zip Code: _____

Telephone: _____ Alternate #: _____

Form may be delivered to the Housing Authority by mail or in person.

Mailing Address

P.O. Box 11327
Jackson, MS 39283

Jackson Housing Authority

2747 Livingston Road
Jackson, MS 39213

Signature Head of Household

Date

It is the applicants responsibility to notify the Housing Authority of changes. While the family is on the waiting list, the family must immediately inform JHA of changes in contact information, including current residence, mailing address, and phone number. All changes must be submitted in writing.