

TENANT REQUEST REGARDING DWELLING UNITS

- I am requesting special unit features in support of a documented disability. My documented disability is: _____
My disability is documented by: _____
The following features are requested: _____
24 CFR §966.4(c)(3)
- Request to Transfer: I am requesting a transfer to a different unit for the following reasons:

- Request to engage in legal profit making activities in the dwelling unit: I am requesting that _____, a member of my household, be able to engage in the legal profit making activity of _____ within the dwelling unit. 24 CFR §966.4(d)(1) & (2)
- Request to allow guests/visitors in my dwelling (not exceeding 14 days each year): I am requesting that the following people be allowed to stay at my dwelling: _____

I request that the above people be allowed to stay during the following dates:
From: _____ To: _____
- Request for extension of guests/visitors: I have allowed guests/visitors to stay at my dwelling for 14 days this year. I am now requesting an extension of my 14 day time period for the following people: _____

My reason for this request is as follows: _____

- Request to add household member: _____
- Request to delete household member: _____
- I, _____, tenant, have incurred a physical or mental impairment and am no longer able to comply with the material provisions of the lease. I [am able / am not able] to make arrangements for someone to aid me in complying with the lease.
- I will be leaving the dwelling unit unoccupied for a period exceeding one calendar week. The specific dates that I will not be in the unit are: _____

Request made by:

DATE

SIGNATURE