

**SUSPECTED FRAUD COMPLAINT FORM**

**POLICY STATEMENT**

The King County Housing Authority is dedicated to providing quality affordable housing opportunities and to build communities through partnerships. We encourage self-sufficiency and we protect the dignity of people with limited resources while safeguarding the public trust. The King County Housing Authority vigorously pursues fraud allegations within the Section 8 program and strongly encourages those with information regarding suspected fraud abuse to notify the King County Housing Authority by completing this form or calling the Fraud Hotline at (206) 214-1301. Confidentiality will be protected if requested.

Do you wish to remain anonymous?  Yes  No  Does not matter

**PLEASE PRINT INFORMATION LEGIBLY**

Date: \_\_\_\_\_ Name of Subject: \_\_\_\_\_

Address of Subject: \_\_\_\_\_

Your Name: \_\_\_\_\_ Your Telephone #: \_\_\_\_\_

Your Relationship to Subject: \_\_\_\_\_

Would you be willing to testify at an Informal Administrative Hearing? ( ) Yes ( ) No

**Narrative-What do you believe is happening inside the unit?**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Is the Subject Employed?  Yes  No If Yes, What Type of Work? \_\_\_\_\_

If Yes, Name of Company of Business: \_\_\_\_\_ City: \_\_\_\_\_

What are the Full Names of Each of the Persons living in the Household?

Adults: \_\_\_\_\_

Minors (Under 18 years old): \_\_\_\_\_

What is the Full Name(s) of any "Unauthorized Live-in's": \_\_\_\_\_

Is the "Live-in" related to the Section 8 Tenant?  Yes  No If Yes, What relationship? \_\_\_\_\_

Is the "Live-in" Employed?  Yes  No If yes, Where? \_\_\_\_\_

Other Income of "Live-In(s)": \_\_\_\_\_  
(How much income/Salary, and where are they working/employed/obtaining it from?)

Does the "Live-In" have vehicles?  Yes  No If Yes, \_\_\_\_\_  
YEAR MAKE MODEL LICENSE PLATE #

Have the Police been to the Unit regarding the "Live-In"  Yes  No If Yes, please explain why: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Is the "Live-In" or the Tenant involves in any Criminal Activity?  Yes  No If Yes, please explain: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Does the "Live-In" receive mail at the Tenant's residence?  Yes  No  Unknown

Is there any other information you believe would be helpful regarding the "Live-in(s)"? (Example: Probation Officer Information, Bank Accounts, Store/Charge Accounts, School Records, Court Documents, Child Protective Services Involvement, Property Owned, Vehicles Owned, Etc.):  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Is there anyone else you know who might have information regarding the suspected housing fraud and would be willing to write a statement or give testimony at an information Administrative Hearing?  Yes  No

\_\_\_\_\_  
Name Address/City ( ) Best Contact Phone #

\_\_\_\_\_  
Name Address/City ( ) Best Contact Phone #

Is there anything else you would like to add to this statement?  Yes  No If Yes, please specify blow.  
\_\_\_\_\_  
\_\_\_\_\_

**Mail or FAX Form To:**

**Dave Weiner**  
***Fraud Investigator***  
**King County Housing Authority – Section 8**  
**15455 65<sup>th</sup> Avenue South**  
**Tukwila, WA 98188-2583**

**CONFIDENTIAL FAX: (206) 357-2432**

( ) Fraud Hot-line Call
( ) Complaint Form mailed/dropped or faxed in to KCHA offices
( ) Other _____
Date Received: _____
OK to release reporting person's name?
( ) Yes ( ) No ( ) Did not Specify
Housing Specialist: _____
Date Assigned: _____