



Section 8 Office

700 Andover Park W • Tukwila, WA 98188-3326 • www.kcha.org
 Phone 206-214-1300 • Fax 206-243-5927

OFFICE USE ONLY	
FORM #:	815L
HH ID #:	
UNIT #:	
EFFECTIVE DATE:	

CHANGE IN FAMILY COMPOSITION – ADD/CHANGE/REMOVE LIVE-IN CAREGIVER

THINGS TO KNOW BEFORE REPORTING A CHANGE

- **Before the Change Is Processed:**
 - KCHA must receive all documentation and complete all verification before a change is processed.
 - Reasonable Accommodation must be approved.
 - New Live-In Caregiver cannot be added to the lease until approved by **KCHA and landlord. It may take more than 30 days to add/change/remove a live-in caregiver.**

- **Your Responsibility:**
 - As the Head of Household, you understand that you are required to report in writing any change in your family composition, or any change in your income, **within 30 days** of when the change occurred. Any misrepresentation of your family’s circumstance to the Housing Authority could result in termination of your housing assistance.

THE HOUSING AUTHORITY MAY TAKE UP TO 30 BUSINESS DAYS TO PROCESS AN INTERIM REVIEW

FAMILY CONTACT INFORMATION

Head of Household Name:		Date:
Address:	Unit:	Phone:
City/State/ZIP Code:		Email:

SUMMARY OF LIVE-IN CAREGIVER CHANGE

Race Codes: 1 Caucasian; 2 African American; 3 Native American; 4 Asian; 5 Pacific Islander; 6 Hispanic

ADD A CAREGIVER			Relation to Head of Household	Age	Sex	Race	Birth Date	Birth Place	Social Security
Last Name	First Name	MI							
REMOVE A CAREGIVER			Relation to Head of Household	Age	Sex	Race	Birth Date	Birth Place	Social Security
Last Name	First Name	MI							

CHECK AND PROVIDE DOCUMENTATION ADDING A LIVE-IN CAREGIVER	
REASONABLE ACCOMMODATION	ADDING A LIVE-IN CAREGIVER
<p>Provide all documents listed below:</p> <ul style="list-style-type: none"> • Have a medical professional complete the Reasonable Accommodation Request Form and return to the address below. <ul style="list-style-type: none"> ○ The approval process could take 30-45 days • Reasonable Accommodation approval letter from KCHA must be on file before adding a Live-in Caregiver. 	<p>Provide all documents listed below:</p> <ul style="list-style-type: none"> <input type="checkbox"/> There must be an approved Reasonable Accommodation on file (see Reasonable Accommodation box to left for instructions). <input type="checkbox"/> Copy of the caregiver's current ID and Social Security card. <input type="checkbox"/> Copy of USCIS card or I-94 (if applicable) – need a copy of front and back of card <input type="checkbox"/> Caregiver and Head of Household must sign the following forms: <ul style="list-style-type: none"> <input type="checkbox"/> KCHA 486 Authorization Form <input type="checkbox"/> KCHA 417 Criminal Questionnaire <input type="checkbox"/> KCHA 432 Declaration of Eligibility Status <input type="checkbox"/> KCHA 403 No Residual Rights Form <input type="checkbox"/> KCHA 814 Landlord Statement <input type="checkbox"/> 12003 Live-in Aide certification

I, (Head of Household's name) _____, hereby authorize King County Housing Authority to verify the information I have provided on this form. I understand that if this form is not completely filled out and/or supporting documentation is not attached, the review may be cancelled. I understand that such verification may include contacting any appropriate employers, governmental agencies, or individuals identified on this form.

King County Housing Authority will treat your digital signature on this document as it would treat a handwritten signature. By signing this document electronically, you agree that this document is as legally enforceable as a document signed with your handwritten signature. I certify that the information given above is true and complete.

Head of Household's signature: _____ Date _____

RETURN COMPLETED FORMS TO:

Please email/fax completed packet to your caseworker or mail to:

Section 8 ATTN: (Your Caseworker)
700 Andover Park W
Tukwila, WA 98188-3326