



Admissions Office
174 South Common Street
Lynn, MA 01905

WAITING LIST CHANGE OF ADDRESS FORM

Re: _____

Control #:

Please complete the form below to submit a change of address.

It is your responsibility to make sure that the Lynn Housing Authority & Neighborhood Development (LHAND) has your up to date contact information. If you are contacted regarding our Waiting List and the letter is returned, you will be removed from the Waiting List.

NAME OF PERSON ON WAITING LIST: _____

Social Security Number: _____

Date of Birth: Month _____ Day _____ Year _____

OLD ADDRESS: _____ Apt. #: _____

City: _____ State: _____ Zip Code: _____

Print Your NEW Address & Phone # Below:

ADDRESS: _____ Apt. #: _____

City: _____ State: _____ Zip Code: _____

Phone #: Home (_____) _____ Work (_____) _____

Signature of Person on Waiting List

Date

