



Chesapeake Redevelopment & Housing Authority  
 Occupancy Department  
 1468 S. Military Highway Chesapeake, VA 23320  
 Phone: (757) 470-5860 Fax: (757) 233-6417 TDD: 7.1.1.



## Change in Information (HCV applicants only)

Name: \_\_\_\_\_ Email Address: \_\_\_\_\_

Social Security Number: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Please check waiting list you are currently on:  Public Housing  Section 8

I would like to update my application with the following information:  
 (Please check all that apply)

Mailing Address: \_\_\_\_\_  
Street Address/P.O. Box City/State/Zip Code

Declaration of Preference  
 (Please attach documentation to support preference claim. i.e.: check stub, school enrollment, protective order, etc.)  
**Explanation of each Preference is attached**

- Residents who live and/or work in the Jurisdiction (City of Chesapeake) ..... **75 points**
- Involuntary displacement (Disaster, Government Action, Action of Housing Owner, Inaccessibility, Property Disposition) ..... **50 points**
- Victims of domestic violence ..... **50 points**
- Victims of Reprisals or hate crimes ..... **50 points**
- Working families and those unable to work because of age or disability ..... **20 points**
- Those currently enrolled in educational, training or upward mobility programs ..... **15 points**
- Involuntary displacement due to Public Housing disposition demolition, renovation, or substantial modernization within the City of Chesapeake, Virginia ..... **190 points**
- Non-Elderly Person with Disabilities----- **80 points**

Add Household Member (Please provide Birth Certificate, Social Security card, and any income received.)

Full Name	Social Security #	Relation to Head	Sex	Race/Ethnicity	Birth Date	Age	Disabled		Student	
							Yes	No	Yes	No
							Y	N	Y	N
							Y	N	Y	N
							Y	N	Y	N

Remove Household Member

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

In order to process your change, you must attach documents to verify this information.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_