NOTICE OF INTENT TO BE CONSIDERED FOR TOWN APPOINTED TENANT BOARD MEMBER SEAT

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

Dear Town Clerk:

Please accept this Notice as my intent to be considered for the Town Appointed Tenant Board Member seat of the \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Housing Authority.

I am providing you with the following information for your consideration:

 NAME: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 ADDRESS: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 TENANCY TYPE: (Circle One)

State-Aided Public Housing

 Federally Subsidized Public Housing

 Section 8 Housing Choice Voucher

 Massachusetts Rental Voucher Program

 Alternative Housing Voucher Program

Other

 PHONE NUMBER: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 EMAIL ADDRESS: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

If you need additional information, do not hesitate to contact me using the information provided above.

Sincerely,

Tenant, \_\_\_\_\_\_\_\_\_\_\_\_\_\_Housing Authority