

HOUSING AUTHORITY FOR THE CITY OF YUMA (HACY)

CHANGE OF BUSINESS NAME

PART I. PREVIOUS BUSINESS NAME

Previous name: _____

Address: _____

PART II. NEW BUSINESS NAME

Name: _____

Address: _____

Day Telephone: _____

(Please provide verification):

PART III. RENT PAYMENT INSTRUCTIONS

For purposes of IRS, we must ensure that the payee name on the Housing Assistance Payment Check agrees with the TAX ID number. Please make sure that the W-9 form that you complete for HACY corresponds with the information being provided on this Statement of Property of Ownership. **The 1099 Miscellaneous Income Form will be printed accordingly, if applicable.**

Payee: _____ Corporation _____ Owner _____ Broker _____

Address: _____

PART IV. SIGNATURES: I hereby declare that I am not the parent, child, grandparent, grandchild, sister or brother of any member of the family that will be receiving assistance under this contract.

Owner: _____

Date: _____

Owner: _____

Date: _____

Authorized Agent: _____

Date: _____

WARNING: SECTION 1001 OF TITLE 18 OF THE U.S. CODE MAKES IT A CRIMINAL OFFENSE TO MAKE WILLFUL FALSE STATEMENTS OR MISREPRESENTATIONS TO ANY DEPARTMENT OR AGENCY OF THE UNITED STATES AS TO ANY MATTER WITHIN ITS JURISDICTION.