



*Housing Authority*  
OF THE CITY OF PRICHARD, ALABAMA  
P.O. Box 10307 • Prichard, Alabama 36610  
Tel: (251) 283-0111 • Fax: (251) 283-0592

## Interim Re-examination

Thank you for your request for an Interim Reexamination Packet due to changes in your family circumstances. All interim requests are made through the tenant portal. Please log in to your portal at <https://portals.prichardhousing.com> to report:

- Income, increase or decrease
- Household composition, add or remove a member
- Assets, increase or decrease
- Expenses: increase or decreases for medical, childcare or disability assistance
- Student status, for persons ages 18 or older who attend or no longer attend school full-time

Changes must be reported within 10 days. Please review the checklist for documents needed to process your request. **Note:** failure to submit required documentation will result in your request being denied or delayed.

Head of Household must complete and sign *all forms* where required. Household members age 18 or older are required to sign each form pertaining to their requested change. Please see below for additional instructions:

1. Complete only the sections that pertain to the change you are reporting.
2. All adults 18 and older must sign the Authorization for the Release of Information Privacy Act Notice-HUD form 9886 and the Third - Party Consent form.
3. If there is a household member with no income, the Zero Income Statement must be completed and signed by the member 18 years of age or older.
4. Attach documentation only for the change you are reporting. For example, if you are no longer employed, please submit a copy of the separation notice from your employer.

It is our goal to process your changes as quickly as possible. It is important that you provide us with complete information in order to expedite your request. **Failure to supply documents will delay processing your request.**

## **VERIFICATION CHECKLIST**

**Please attach required verifications prior to submitting your request.**

### **Adding Income/Reducing Income**

- Provide a minimum of 2 consecutive paycheck stubs
- Provide an offer letter on company letterhead that includes rate of pay and number of hours per week
- Provide Social Security or SSI benefit award letter(s), TANF, unemployment, adoption subsidy, etc.
- Provide verification of all other income, self-employment, child support, pensions, contributions, worker's compensation, etc.

### **Removing Income**

- Provide a separation letter on company letterhead
- Termination letter of benefits, i.e. child support, Social Security, SSI, unemployment, TANF, etc.
- If a household member has zero income as a result of the change, the Zero Income Statement must be completed and signed by the member

### **Adding New Household Member(s) – Family Composition**

- If adding a minor as a result of birth, adoption, or court-awarded custody, provide birth certificate, verification of adoption or verification of court-awarded custody within 30 calendar days
- Provide birth certificate for any new member being added
- Provide social security card for any new member being added
- Provide State issued Driver's License or identification card for any adult being added
- Adult being added must sign the Debts Owed to Public Housing Agencies and Terminations form, the Privacy Act form, the Third Party Consent Form and the Criminal Background form
- Complete Declaration of Citizenship Status for minors being added. If an adult is being added, adult must complete and sign for themselves
- Provide marriage certificate (if applicable)

### **Removing Household Member(s) – Family composition**

- Complete the Statement of Family Member Move-Out form: Proof of residency is required in the form of a lease/utility bill in the removed member name.

### **Adding or Removing Assets**

- Provide bank statements, verification of stocks, bonds, certificates of deposits, life insurance policy, etc.

### **Change in Expenses – Medical, Disability Assistance Expense, Childcare**

- Provide a print-out from medical provider showing amount paid out of pocket for the past 12 months, or a copy of a new monthly premium, amount for apparatus, attendant care, etc. (must qualify)
- Provide a written statement from the childcare provider indicating child's name, amount received and frequency (weekly, bi-weekly, or monthly). Statement must include provider's contact information (must qualify)

### **Change in Student Status**

- High school student (most recent report card or school schedule)
- College student (verification of full-time student status)