



# City of Parma, Ohio

TIM DeGEETER  
MAYOR



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PUBLIC HOUSING

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## CHANGES OF MEMBERS TO LEASE

DATE: \_\_\_\_\_

HEAD OF HOUSEHOLD NAME: \_\_\_\_\_

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

CITY, STATE, ZIP CODE: \_\_\_\_\_

TELEPHONE #: \_\_\_\_\_

**Effective immediately the above Head of Household member would like to:**

**ADD** \_\_\_\_\_, to my lease. I am aware that the above named person cannot **move into** my subsidized unit until the PPHA has received all necessary background checks and income verifications to determine eligibility. I understand and am fully aware that if I allow the above named person to move into my unit prior to the approval by the PPHA, I can be terminated from the program.

RELATIONSHIP TO HEAD OF HOUSEHOLD: \_\_\_\_\_

**REMOVE** \_\_\_\_\_  
from my lease.

\_\_\_\_\_  
SIGNATURE

\_\_\_\_\_  
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 MATTERS IN ITS JURISDICTION.**