

CITY OF TALLULAH SECTION 8 HOUSING

**204 NORTH CEDAR STREET
TALLULAH, LOUISIANA 71282
PHONE (318) 574-0051 FAX (318) 574-2773**

Landlord Data Form

DATE _____

NAME _____ SS# _____

ADDRESS _____

CITY, STATE, ZIP _____

PHONE# _____ CELL# _____

LANDLORD'S AUTHORIZED REPRESENTATIVE, ADDRESS & PHONE (REQUIRED)

ADDRESS OF THE UNIT _____ YEAR BUILT _____

How many units do you have under the Section 8 Program? _____

How many other available units do you now have? _____

What is the requested contract rent amount? \$ _____

of bedrooms _____ # of bathrooms _____ # of half bathrooms _____

Stove: Y/N Refrigerator: Y/N Heating: Y/N A/C: Y/N Handicapped Access: Y/N

CHECK THE OPTION YOU CHOOSE TO RECEIVE YOUR HAP CHECK EACH MONTH...

_____ **MAIL/ADDRESS** _____

_____ **PICK-UP BY OWNER/AUTHORIZED REPRESENTATIVE**