

Waltham Housing Authority

110 Pond Street

Waltham, Massachusetts 02451-4505

Tel:(781)-894-3357;TDD:(781)894-3357;FAX:(781)894-7595

Walhouse.org

REQUEST FOR SECTION 8 ANNUAL REVIEW

Date:

Landlord:	Name Of Family (Head of Household)
Address:	Address:

The Section 8 Contract for the above property is due for review on _____. The Contract will be continued for one year at the rent of \$ _____. The increased rent is requested due to the following:

Amount of rent receive, for similar units not on a Section 8 lease \$ _____

COMPLIANCE OF SMOKE ALARM OPERATIONS

The inspection of smoke alarms and Carbon Monoxide detectors must be done at least yearly, and all alarms must be in working order. You hereby certify below that the smoke alarms for this property have been inspected and are following the current City of Waltham Smoke Alarm Ordinance. Current Rent \$ _____

Bedroom

Size: _____

**PLEASE REPLY 60 DAYS
PRIOR THE RENEWAL DATE**

SIGNED _____

DATE _____

TELEPHONE# _____

EMAIL _____

The Section 8 Contract for the above property WILL NOT BE continued for the following reasons:

SIGNED _____ DATE _____

Return via mail or e-mail:andier@walhouse.org