

Housing Authority of the City of Austin

Established in 1937

1124 South IH 35, Austin, TX 78704 P.O. Box 41119, Austin, TX 78704 (512) 477-1314 Fax (512) 494-0686

TAX – IDENTIFICATION FORM

OWNER INFORMATION TO RECEIVE HOUSING ASSISTANCE PAYMENTS

In accordance with the Department of Housing and Urban Development (HUD), and the Internal Revenue Service (IRS), the Housing Authority is required to provide each Section 8 owner who receives more than six hundred dollars (\$600) during the course of a year with a Form 1099. In order to accurately provide you with a 1099, provide us with your Social Security Number or Federal Tax Identification Number.

Please print clearly to ensure timely/accurate disbursement of Housing Assistance Payments.

Type of Change Requested:			
Add a New Owner	Ownership Change	Management Change Only	Direct Deposit
Make Housing Assistance Pa	ayment Check payable to:		ase complete the attached t deposit authorization form.
Owner Name:			
Business Name / Managem	nent Company		_
Tax I.D.or Social Security N	lo.#		
(Tax I.D. # needs to be for the processing (IMPORTANT: USE this number		ompany the check is payable to	as indicated above.)
Street Address			
City	State		Zip
Name of Contact Person _			
Phone #			
Email (HAP Contracts can be em			
List the name and addresses (attach a separate sheet if ne	` ,	siding in your unit affected by	the change:
TENANT NAME	UNIT ADDRESS		
OFFICE USE ONLY			
VENDOR NUMBER	F	FFECTIVE DATE	

Form: Tax ID Form