



# Common Housing Application for Massachusetts Public Housing (CHAMP)

## Application Update/Change Form

### Housing Situation, Employment, Veteran Status

In order to make changes or updates to the Housing Situation, Employment, and/or Veteran Status section of your application for state-aided public housing, **please fill out the form below** and mail or hand deliver it to any local housing authority (LHA). The information will be entered online by the LHA.

If you would prefer to update your application online, please use the Common Housing Application for Massachusetts Public Housing (CHAMP) website: <https://www.mass.gov/applyforpublichousing>.

Even if you originally submitted a paper application, you can still use the website to make changes or updates to your application instead of going to an LHA in person.

If you have a disability, you have a right to request a reasonable accommodation with the application process. Contact your local housing authority to make arrangements.

#### PLEASE PROVIDE YOUR: Applicant ID Number

Please provide the Applicant ID number associated with your application for state-aided public housing.

Contact Information\*\*\*(Must be provided for your update to be processed)

#### Name of Applicant/Head of Household

\_\_\_\_\_

First Name

Middle Initial

Last Name

Suffix

Date of Birth: \_\_\_\_\_

#### 1. Current Housing Situation

**Has your housing situation changed? If so, please complete the following:**

Are you now homeless or in imminent danger of becoming homeless?

Yes       No





**Have you added a member to your household who is a Veteran of the United States Armed Forces? If so, check the appropriate box below.**

- I am a Veteran, or a member of my household is a Veteran.
- I, or a member of my household, is the spouse, surviving spouse, dependent parent, or a child or divorced spouse with a dependent child of a Veteran.

Please enter the dates of service of the Veteran in your household.

Start Date: \_\_\_\_\_ End Date: \_\_\_\_\_  
Day/Month/Year Day/Month/Year

Please check all that apply

- A U.S. Veteran in my household has a service-connected disability.
- A former member of my household is a deceased U.S. Veteran whose death has been determined by the Veteran’s Administration to be service connected.

### Applicant’s Certification

- I understand that it is my responsibility to inform a Housing Authority in writing of any change of address, income, or household composition or any other information regarding my application.
- I authorize housing authorities where I have applied to make inquiries to verify the information I have provided in this application.
- I certify that the information I have given in this application is true and correct. I understand that any false statement or misrepresentation may result in the denial of my application.
- I understand that if I have made any intentionally false or misleading statements when applying for public housing, my application will be disqualified and there may be additional consequences.
- I understand that my application information will be transferred to the **Common Housing Application for Massachusetts Public Housing (CHAMP)**. When more than one application I have submitted has conflicting information, for example different addresses, the application information with the newer date will be used. I understand that I may update all information either at one housing authority or online: <https://www.mass.gov/applyforpublichousing>.
- I understand that the online application may be subject to data transmission errors that may make the application incomplete. I understand that DHCD is not responsible for these errors.
- By using this application, I agree to all of these conditions.

Signed under the pains and penalties of perjury,

Print name: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

