

**LANDLORD CHANGE OF MAILING ADDRESS  
(LANDLORD ONLY)**

Landlord Name: \_\_\_\_\_

Landlord Social Security Number: \_\_\_\_\_

Or: \_\_\_\_\_

Landlord FEIN Number: \_\_\_\_\_

OLD ADDRESS:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

NEW ADDRESS:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Phone Number: \_\_\_\_\_

Fax Number: \_\_\_\_\_

Email Address: \_\_\_\_\_

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

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

Tenant /s Name/s: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Warning:** Section 1001 of Title 18 of the U.S. code makes it a criminal offence to make willfull false statements of misrepresentation to any Department or Agency of U.S. as to any matter within its jurisdiction

**Please submit completed Change of Landlords Mailing Address Form to:**  
**Broward County Housing Authority**  
**Attention: Finance Department**  
**4780 North State Road 7**  
**Lauderdale Lakes, Florida 33319**  
**Fax: 954-497-3733, Email: tthompson@bchaf1.org or wayton@bchaf1.org**