



**HOUSING AUTHORITY of the  
COUNTY OF BUTTE  
2039 Forest Ave Suite #10, Chico, CA 95928**

TDD 530-895-4474  
FAX 530-895-4459  
TDD 800-564-2999

## **CHANGE OF ADDRESS FOR RENTAL OWNER/LANDLORD**

Name of Rental Owner/Landlord: \_\_\_\_\_

PRIOR Address:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

NEW Address:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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

I certify that the aforementioned statement is true to the best of my knowledge.

By (signature): \_\_\_\_\_

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

\_\_\_\_\_  
Printed Name and TITLE of Signatory

