

**Topeka Housing Authority
2010 SE California
Topeka, KS 66607
Phone: (785) 357-8842
Fax: (785) 357-2648**

Landlord Address Change Form

Landlord Name: _____

Former Name (if changing): _____

Social Security Number: ____-____-_____

Email Address: _____

Tax ID Number: _____

Current Telephone Number: () _____ - _____

OLD ADDRESS

Street: _____

City: _____ State: _____ Zip: _____

NEW ADDRESS

Street: _____

City: _____ State: _____ Zip: _____

I do hereby attest that the above information is true.

Landlord's Signature: _____

Date: _____