

# LAGRANGE HOUSING AUTHORITY

201 CHATHAM STREET  
LAGRANGE, GA 30240  
(706) 882-6416 FAX (706) 882-0781



## APPLICANT/TENANT CERTIFICATION

### APPLICANT'S/TENANT'S STATEMENT

I /We certify that the information given to the Housing Authority of the City of Lagrange Housing Agency on household composition, income, net family assets, allowances, and deductions are accurate and complete to the best of my/our knowledge or belief. I/We understand that false statements or information are punishable under Federal law. I/We also understand that false statements or information are grounds for termination of housing assistance and or termination of tenancy.

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**Signature of Head of Household**

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**Date**

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**Signature of Spouse**

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**Date**

If you believe you have been discriminated against, you may call the Fair Housing and Equal Opportunity Nation a, toll-free Hot Line at (800) 424-8590 (Within the Washington D.C. Metropolitan Area, call (800) 347-3735).