

LAGRANGE HOUSING AUTHORITY

P.O. BOX 626

LAGRANGE, GEORGIA 30241

BENJAMIN HARVEY HILL PHONE # (706) 882-6416 FAX # (706) 882-0781

LUCY MORGAN PHONE# (706) 884-9856 Fax# (706) 407-2261

EMAIL ADDRESS: HACOL@Phalagrange.net



TRANSFER REQUEST

Date Request Was Made	
Name of Resident	
Current Address	
Telephone #	
Current BR size	
BR size Requesting	

REASON FOR TRANSFER:

I UNDERSTAND THAT MY TRANSFER MUST BE APPROVED.

Signature of resident _____ Date _____

Completed form received by _____ Date _____