



City of Phoenix
HOUSING DEPARTMENT

Fields in red are required

Section 8 Participant Request for Assistance

Date _____ Time _____

First Name _____ Last Name _____

Social Security# (last 4 digits) _____

Unit Address _____

Phone Number _____

Email _____

I am requesting: Phone call In-person meeting Email contact

Preferred method of communication: Email Phone

Please select from the following list:

Briefly describe your reason for this request.

Send completed form to: By Fax: 602-534-4243
By Mail: 830 E. Jefferson St., Phoenix, AZ 85034

You will be contacted within one business day by your assigned Housing Program Representative.

If you do not receive a call back after one business day, please call receptionist and state you did not get a return call. Receptionist will notify supervisor and assigned HPR to ensure a call is returned promptly. When calling staff please leave a clear message with name and phone number to ensure the call is returned.

Receptionist Number: (602) 534-1974