

CLIENT APARTMENT REJECTION FORM

Facility Name: _____	Code: _____	Date: ____/____/____
Case #: _____	SSN: _____-_____-_____	
Last Name: _____	First Name: _____	MI: _____
DOB: ____/____/____	Family Composition: # Adults ____ # Children ____	

I, _____, am rejecting the following permanent housing unit for my family:

Address: _____ Apt. #: _____

Borough: _____ Zip: _____ # Bedrooms: _____

I am rejecting this apartment for the following reason(s):

Since shelter is temporary housing, you must look for permanent housing and accept any suitable housing that is found. Failure to look for and/or accept suitable housing may cause you to lose temporary housing assistance (THA).

CLIENT:

I have read and/or have had the notice explained to me and understand what it means. I may still be subject to sanction for non-compliance, even if I refuse to sign.

1. _____	_____	_____
Signature	Print Name	Date

2. _____	_____	_____
Signature	Print Name	Date

STAFF:

I have explained this form to the client:

_____	_____	_____
Signature	Print Name	Date

Original: File
CC: Family