

Lynchburg Redevelopment & Housing Authority  
918 Commerce Street Lynchburg, Virginia 24504  
Phone: (434) 485-7200  
Fax: (434) 845-9144  
TTY: (800) 828.1120 VA711



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## Landlord Application for Housing Choice Voucher Program 2022

- Change (check one)
- New

Date: \_\_\_\_\_

Owner(s) legal name, as it appears on record of deed: \_\_\_\_\_

Social Security# or Federal ID # for the above named person to appear on IRS Form 1099-Miscellaneous Income:

SSN: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ or FEIN# \_\_\_\_\_

Owner(s) Phone Number: Day: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ Mobile: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Email Address: \_\_\_\_\_

Owner(s) Mailing Address:

\_\_\_\_\_  
Number Street City State Zip Code

\_\_\_\_\_  
Number Street City State Zip Code

Make Checks Payable  
to: \_\_\_\_\_

Mailing Address (if different than above):

\_\_\_\_\_  
Number Street City State Zip Code

Will the Owner of the property manage the unit(s)?  Yes  No If no, please provide the following:

Manager or  
Management Firm: \_\_\_\_\_

Address:

\_\_\_\_\_  
Number Street City State Zip Code

Manager's Phone Number: Day: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ Evening: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Mobile: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ Fax: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

List units available for rent to Housing Choice Voucher assisted tenants:

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Address of Unit	Number of Bedrooms	Amenities
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Address of Unit	Number of Bedrooms	Amenities
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Address of Unit	Number of Bedrooms	Amenities
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Address of Unit	Number of Bedrooms	Amenities
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List names of Housing Choice Voucher assisted tenants already residing in units:

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Tenant Name	Phone Number	Tenant #
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Tenant Name	Phone Number	Tenant #
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Tenant Name	Phone Number	Tenant #
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Tenant Name	Phone Number	Tenant #
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Transfer of Ownership, previous Owner(s) name (if applicable)

Signature of Owner(s)

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Signature	Printer Name	Date
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Signature	Printer Name	Date
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Signature	Printer Name	Date
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**The following document must be attached or your application will be considered incomplete:**

**Owner(s) Picture Identification**

**Owner(s) Social Security Card**

**Direct Deposit Form**

**IRS W-9 Form**

**Recorded Deed**

**Proof of Valid Property Insurance**

**Management Agreement** (if property is managed by Someone other than the Owner)

Please return the completed application and ALL documents to the email or address below:

Email: [ccorner@lynchburghousing.org](mailto:ccorner@lynchburghousing.org)

In-person or USPS: 918 Commerce St, Lynchburg, VA 24504



**We do Business In Accordance With the Federal Fair Housing Law**