



Regional Housing Authority of Sutter and Nevada Counties
1455 Butte House Road, Yuba City, CA 95993
Phone: (530) 671-0220, Toll Free: (888) 671-0220
TTY: (866) 735-2929, Fax: (530) 673-0775

FRAUD ALLEGATION REPORT

Please provide the following information regarding the unit/tenant in question: (Use the reverse side if needed.)

Name of Family _____

Unit Address _____

TYPE OF REORT

Unreported Income: Write the first and last names of the person(s) who receive the income; the source of income; the amount per week; the name and address of employers, how long the income has been received and any other information regarding the income received:

Drug-related or violent activity: Contact the police IMMEDIATELY to provide them with information on criminal activity. Also indicate who uses/sells drugs; and related activities observed. If violent activity has been observed, report what has happened and by whom. **If there is already police involvement or an arrest**, provide dates of police activity, names of persons involved and dates of arrest:

Extra people in unit: Write the first and last names, how long they have lived there; if they are related to the household; if they pay rent and how much they pay.

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The Housing Authority is an equal opportunity employer and housing provider.

Household members are noise and/or cause a disturbance: If reporting for a Housing Choice Voucher Tenant (Section 8), contact the landlord or property manager. For all Housing Authority Properties, write details of the disturbance here and contact the police when necessary:

Landlord is accepting extra money, living in unit or breaking other rules (Housing Choice Voucher Tenant): Write the name of the landlord; how much extra money the landlord collects; for how long; receipts (if any), how long the landlord has lived in the unit, and any other details:

Source of information:

STRICTLY CONFIDENTIAL: Your name and address and/or telephone number: **(ONLY authorized Housing Authority Staff will have access to this information.) This information is required. If you fail to provide contact information, this allegation will not be investigated.**

Name: _____ Address/Phone Number: _____