REQUEST FOR REFERRALS FORM

Date:			
(Contact Person)			
(Housing Authority Name)			
(Address)			
(City, State, ZIP)			
Dear: (Contact Person)			
The plans to develop Developer/Applicant	a	unit	
development in	n		
family/elderly		name of community	:
The development will serve tenants whose income range median income. We expect to place the development in			% of the county
We believe our development will meet the needs of mar those who have been on your waiting list for six months			s and request that you refe
Should you have any questions, please contact me at ()		
Sincerely,			
Contact Person			