

Verification of Residence 2017

Name: _____
(Must be an Adult Tribal Member or HUD Lease Signer)

Contact Number: _____

Service Address: _____
(Name and Address will be verified with Tribal Clerk or Housing Department)

Mailing Address: _____
(If Different from Service Address)

Tribal Membership number: M00 _____ District #: _____
(SCIT Members Only)

Is this New Service or Address Change?

☐ New Service

☐ Address Change

If so, Previous Address: _____

(Adult Tribal Member or HUD Lease Signer Signature)

Do you currently have a Granger container at the above service address?

☐ Yes If Yes, how many: _____
☐ No

(Only 1 container per address, additional containers at resident's expense)

*****Service not provided in City of Mt. Pleasant, Village of Rosebush or Wise Township*****

For Office use Only

Address Verified By: ☐ Tribal Clerk's Office
☐ Housing Department

Date Verified: _____

Signed By: _____
(Signed by person verifying the above information)