

**HOUSING AUTHORITY OF THE CITY OF PASCO & FRANKLIN COUNTY  
HEARING REQUEST**

Do you require an interpreter?  yes  no  
What language? \_\_\_\_\_  
Would you like to receive written materials in Spanish?  yes  no

**Name:** \_\_\_\_\_ **Tenant Number:** \_\_\_\_\_

**Current Address:** \_\_\_\_\_ **Former Address (if relevant to the hearing):** \_\_\_\_\_

**Telephone Number:** \_\_\_\_\_

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**Program Type/Hearing Requested:**

**Public Housing** \_\_\_\_\_ **Informal Hearing Applicant** \_\_\_\_\_ **Tenant** \_\_\_\_\_  
(Attendees: Applicant or Tenant, Hearing Officer and witnesses/legal representation, if any.)

\_\_\_\_\_ **Formal Hearing** (A Formal Hearing is granted to **TENANTS** only if the Informal Hearing did not resolve the grievance to the tenant's satisfaction. Attendees: Tenant, Hearing Officer not present at the Informal Hearing and witnesses/legal representation, if any.)

**Section 8:** \_\_\_\_\_ Informal Review (**Applicant**) (Attendees: Applicant, Hearing Officer, witnesses/legal representation, if any.)  
\_\_\_\_\_ Informal Hearing (**Participant**) (Attendees: Participant, Hearing Officer, witnesses/legal representation, if any.)

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If you are represented by legal counsel, you must sign a release of information specifying that person to act on or receive correspondence and information about your application, tenancy or program participation. See front desk attendant for release information.

Legal Representative: \_\_\_\_\_ Address: \_\_\_\_\_  
Telephone Number: \_\_\_\_\_

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For the following questions, please feel free to use the back of this page or additional sheets if necessary.

- 1) Why are you requesting a hearing? \_\_\_\_\_  
\_\_\_\_\_
- 2) Why do you believe HACPFC's action(s) was improper or incorrect? \_\_\_\_\_  
\_\_\_\_\_
- 3) What corrective action do you request? \_\_\_\_\_  
\_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

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**FOR OFFICE USE ONLY** Submitted to Administrative Assistant on: \_\_\_\_\_ by: \_\_\_\_\_  
Date Staff Initials

Notes: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_