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Cliffside Park Housing Authority

SECTION 8 HOUSING CHOICE VOUCHER OWNER INFORMATION

In an effort to update our records and ensure you receive your rent checks, please complete this form with your contact information and return the completed form to the Cliffside Park Housing Authority with the Request for Tenancy Approval.

You may return this form via email to marias.cpha@verizon.net, via fax to (201) 941-4038 or via mail to 500 Gorge Road Suite 1, Cliffside Park, NJ 07010

Owner/Agent/LLC Name: _____

Owner/Agent/LLC Address: _____

City: _____ State: _____ Zip: _____

Primary Contact Person: _____

Telephone Number :() _____

Fax Number :() _____

Email: _____

Secondary Contact Person: _____

Telephone Number :() _____

Fax Number :() _____

Email: _____