## **REQUEST FOR REFERRALS FORM**

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