

*Housing Authority  
of the City of Loveland*

375 W. 37th Street, Suite 200, Loveland, CO 80538  
Phone (970) 667-3232 TDD (970) 667-3288 Fax (970) 667-2860

**RESIDENT REQUEST FOR A UNIT MODIFICATION**

**Date of Request:** \_\_\_\_\_

**Resident Name:** \_\_\_\_\_

**Address:** \_\_\_\_\_  
\_\_\_\_\_

Living at what Property? \_\_\_\_\_

During the daytime, what is the best time to reach you? \_\_\_\_\_

Daytime Phone Number: \_\_\_\_\_ Evening Phone Number: \_\_\_\_\_

1. Please tell us what you need (please be specific).

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

2. I need this because (please explain):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Applicant's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Once you have completed filling out this form, please return it to your Housing Coordinator, Housing Authority of the City of Loveland, 375 W. 37<sup>th</sup> Street, Suite 200, Loveland, CO 80538.

**\*Completion of this form does not constitute approval, until the request has been approved in writing.**