

The Housing Authority of the City of Charleston
Housing Choice Voucher Program

INFORMAL HEARING REQUEST FORM

I, _____, would like to request an informal hearing for the following reasons:

-and-

I request the following action/ relief:

(attach additional sheet if necessary)

Sincerely,

Signature

Date

Phone#: _____ Secondary Contact #: _____

Email Address: _____

Reasonable Accommodations Provided Upon Request

