

## FREEDOM OF INFORMATION LAW REQUEST FORM

To: Records Access Officer New York City Housing Authority 90 Church Street, 11th Floor New York, New York 10007 Phone: (212) 306-8680 FOIL@NYCHA.NYC.GOV	Date	://.		
I,	, request copies of N	lew York City H	lousing Authorit	y records.
The records pertain to:				
☐ Section 8 ☐ Public Housing ☐ Contracts/ Pr☐ Other:		nt/ Human Res	sources	
Please specify the records you are requesting, inc	cluding tenant name, date	s, contract num	nber, voucher no	umber,
vendor number, case number, development names and addresses:				
If you are requesting your own records, please su this form.	bmit a legible copy of you	r government-i	ssued identifica	tion with
If you are requesting someone else's records, that person must complete and submit a notarized consent form authorizing NYCHA to release his/her/their records to you. A sample consent form is available on NYCHA's website.				
If you choose to request physical copies of record reproduction, payable in advance, and the cost of fulfillment by mail.				request
Requester's Name:	Signature:			
Requester's Organization:				· · · · · · · · · · · · · · · · · · ·
Requester's Address:				
Street	Ci	ty	State	Zip
Telephone Number: ()	Email:			