



ENTITY ID#: _____

HOUSING ALLIANCE HTX

2640 Fountain View Drive ■ Houston, Texas 77057 ■ 713.260.0500 P ■ 711 TTY

Housing Choice Voucher Program

Inspection Request Form

Client Name: _____ Date: _____

Phone #: _____ SSN#: _____

Address: _____

Please list the problems(s) that you are currently having in your unit:

Signature