## Program Violations and/or Fraud Reporting Form Housing Authority of the City of Pawtucket, RI

Housing Authority of the City of Pawtucket, RI 214 Roosevelt Avenue Pawtucket, RI 02860 Phone: (401) 721-6000

## Please submit this form by mail to the address above or electronically by email.

Please give as much information and as many	y details as possible. If necessary, print and use	the back of this form.
Name of the person(s) committing violation a	and/or fraud:	
At what address?		
What appears to be a violation and/or fraud?	? (Check all that Apply)	
<b>Unreported Income.</b> How much and from whe	ere:	
$\Box$ Additional People Living in the Home.		
Name(s):		
Age(s):	Since When:	
Vehicle description:		
$\Box$ Someone Moved Out of the Home.		
Name:	Date:	
$\Box$ Drugs and/or Criminal Activity.		
Who:		
What and when?		
Police Reports?	Currently Incarcerated?	
□Subleasing of the Home.		
To whom:		
How much rent is being charged and sine	ce when?	
□Landlord is Accepting Additional Rent.		
How much and since when?		
$\Box$ Landlord is a Relative.		
Name of landlord:	What is the relationship?	
<b>Other Violations or Fraud</b> (charging live-in aide	e rent, landlord living in the home, etc):	
Who, other than you, can confirm the violat	tion and/or fraud:	
Name:	Contact Phone Number:	
Name:	Contact Phone Number:	
	however, we may need to ask you for more detailed infor ur name and contact information will be kept confidential s):	
Name:	Phone Number:	
Email address:	Date:	