Date

Applicant Name

Applicant Address

City, State Zip

Dear Applicant:

Congratulations! This letter is to inform you that you have come to the top of the Agency Name Housing Choice Voucher waiting list. An Applicant Briefing appointment has been scheduled for you to learn about the program and to receive your voucher. All family members 18 years of age or older must attend. Your appointment is scheduled for:

Date:

Time:

Location:

If you need to reschedule this appointment or you no longer need or want the voucher, please contact me by DATE. Failure to attend the Applicant Briefing appointment or contact Agency Name to reschedule will result in your voucher being canceled and your name being removed from the waiting list.

If you have any questions, or if you or anyone in your household is a person with disabilities, and you require a specific accommodation in order to participate in the housing assistance program, please contact me at the number or email below.

Sincerely,

Coordinator Name

Phone Number

Email