

FILE REVIEW REQUEST FORM

Sect	tion 8	Public Housing
Print Name of Head of Household: _		Client #:
Address:		
		Zip Code:
Phone:		Email:
Reason you are requesting a file review: (check all that apply)		
□ Disagree with rent portion / calculation of income □ Disputing a debt owed to R		
□ Disputing the denial of your reques	to your household	
□ Other (please specify):		
Please provide additional details related to the reason you need a file review:		

Please note that you have 14 days from the date of the letter you received in order to dispute an RHA decision. Additionally, File Reviews are not required for established policies and procedures and RHA determinations such as:

- Discretionary administrative determinations by RHA
- General policy issues or class grievances
- Refusal to extend or suspend a voucher (Section 8)
- An RHA determination not to grant approval of the tenancy (Section 8)
- Determination that the unit is not in compliance with HQS (Section 8)

Clients requesting a file review outside of the 14-day period or for a non-qualifying reason will be sent a letter explaining that a file review will not be scheduled. Once a file review has been scheduled, you may request one (1) reschedule prior to the date and time of the file review. If you miss two (2) scheduled file reviews, the RHA may not reschedule a third file review unless good cause is provided.

Signature

Date



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