



HOUSING AUTHORITIES CITY OF EUREKA & COUNTY OF HUMBOLDT

735 WEST EVERDING STREET, EUREKA CA 95503
PHONE: (707) 443-4583 FAX: (707) 443-4762 TTY: (800) 651-5111



CHECK REPLACEMENT REQUEST

I have not received the below payment as of _____, and I am requesting a replacement check.

Payee Name: _____ Vendor #: _____

Payment for: _____ Check #: _____

Tenant's Address: _____

The original check was:

Not received Damaged or Lost Received and stale-dated

Stolen, explain: _____

Other, explain: _____

I agree to return the lost check to the Housing Authority of the County of Humboldt when it is found. _____
Initial

I understand that the Housing Authority incurs a \$25.00 stop payment fee for each stopped check. As a courtesy, the Housing Authority waives the stop payment fee for the first check replacement. **Additional replacements will be charged a \$25.00 stop payment fee.** _____
Initial

Signature _____ Phone number _____

Name _____ Email address _____

If your address changed, please indicate the new address below:

Street address _____

City _____ State _____ Zip Code _____

For Accounting Use:

Payee Name: _____ V- or T-Code: _____

Check Date: _____ Date stopped: _____

Orig Check #: _____ Replmt Check #: _____

Vendor charged fee: \$ _____ Replmt Check Date: _____



The Housing Authorities are Equal Housing Opportunity Organizations

