

Upland Housing Authority
1200 N. Campus Ave.
Upland, CA. 91786
(909) 982-2649
Walk-In Request for Assistance

Our workers see clients by appointment only and cannot see walk-in clients. Please use this form to submit your request in writing. This form will be given to your worker to respond to your request. If your request does not require a meeting, your worker may get back to you via telephone or e-mail. We will attempt to address your request within 24 hours, or 1 business day.

Name: _____

Address: _____

Phone Number: (_____) _____ Cell or Work Phone: (_____) _____

E-Mail Address: _____

Describe the matter you need to discuss with your worker:

If you are requesting copies of any documents in your file, list the document(s) or forms you need. If we can provide the copies you are requesting we will call you when forms are copied and ready for pick-up at our offices. Please remember there is a fee of \$0.25 per page for copies.

Form/Document Requested: _____

Form/Document Requested: _____

Form/Document Requested: _____

Client's Signature: _____ Date: _____

For UHA Use Only:

Date Stamp:

Action Taken:

By: _____

Date: _____