



**GARFIELD COUNTY HOUSING AUTHORITY**

**1430 RAILROAD AVENUE, UNIT F**

**RIFLE, CO 81650**

**(970) 625-3589 or (888) 627-3589**

**Fax (970) 625-0859 \* TTY (800) 659-2656**

**Program Fraud/Abuse Form**

**Please print all information clearly.**

Name of Subject \_\_\_\_\_ Date \_\_\_\_\_

Address of Subject \_\_\_\_\_

Allegation of Fraud and/or Abuse of Program:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

General Questions regarding fraud and/or abuse:

Is the subject employed? \_\_\_\_\_ Where? \_\_\_\_\_ How Long? \_\_\_\_\_

Does the subject receive any other type of income? \_\_\_\_\_

Who lives in the household? \_\_\_\_\_

Name of possible unauthorized live-in? \_\_\_\_\_

How long has the possible unauthorized live-in been in the household? \_\_\_\_\_

Does unauthorized live-in work? If so, do you know where? \_\_\_\_\_

Is there anyone else who could have knowledge of this situation? \_\_\_\_\_

May we call you if additional information is needed? \_\_\_\_\_

If we asked you to, would you be willing to sign a statement about this information? \_\_\_\_\_

Is there any other information that you think would be helpful?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Continued



**Warning: Section 1001 of Title 18 of the United States Code, states that a person who knowingly and willingly makes false or fraudulent statements to any department or agency of the United States is guilty of a felony. This institution is an equal opportunity provider and employer.**



---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

*Your Contact information: (All information is confidential. You will only be contacted for additional questions.)*

---

Print Name	Phone Number	Email
------------	--------------	-------