

Final Affairs Form

This form gives the Pike County Housing Authority (PCHA) information on how to handle final affairs in the event of death. This form is designed for single adult households who may not have a final will. Completion of this form does not obligate anyone outside of the household for any balances that may be due. Any time your wishes or your designees information changes a new form should be completed. PCHA will act off of the information from the last completed form received.

Please review and complete the sections below carefully.

1. Do you have someone PCHA can contact in the event of death and would receive the refund of any credit balance? _____ NO _____ YES

If YES, then complete the section below with that information.

Name: _____

Mailing Address: _____

Phone: _____

Relationship: _____

If NO, and you would want the refund of any credit balance to go to something else, then complete the section below with that information. This could be anything you desire, such as a church, animal shelter, not-for-profit, etc. If the above is marked "NO" and this section is left blank, PCHA will assume ownership of the refund of any credit balance.

Name: _____

Mailing Address: _____

Phone: _____

2. Do you have someone who will be responsible for the removal of furniture and other items from the apartment in the event of death? _____ NO _____ YES

If YES, then complete the section below with that information.

Name: _____

Mailing Address: _____

Phone: _____

Relationship: _____

If NO, then please read and initial the following section.

Since no one has been designated to remove furniture and other items from the apartment in the event of death, it is hereby declared that all remaining belongings shall become the property of PCHA for disposal. _____ **(Initial)**

Name: _____

Apartment Address: _____

Sign/Date: _____

