

**Oxnard Housing Authority**  
**Housing Choice Voucher Program**  
1470 Colonia Road  
Oxnard, CA 93030  
Phone: (805) 385-8097  
Fax: (805) 385-7961



**Complete this form to authorize a representative to act and sign contracts on behalf of the legal owner. The owner will remain the payee unless otherwise designated.**

\_\_\_\_\_  
Owner Name

\_\_\_\_\_  
Participant Name

\_\_\_\_\_  
Owner Address

\_\_\_\_\_  
Tenant ID

\_\_\_\_\_  
City, State & Zip Code

\_\_\_\_\_  
Social Security/Taxpayer ID#

RE: PROPERTY ADDRESS

\_\_\_\_\_  
(Street Address, City & Zip Code)

**Persons authorized to act and sign documents on behalf of the owner:**

\_\_\_\_\_  
Name

\_\_\_\_\_  
Name

\_\_\_\_\_  
Phone Number

\_\_\_\_\_  
Phone Number

**All legal owners must sign below authorizing the above named person(s).**

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date