

# 1099 FORM REQUEST

Name: \_\_\_\_\_

Address: \_\_\_\_\_

\*\*It is the policy of the Housing Authority of the City of Los Angeles that our agency must maintain owner's current address in our database. Please contact Owner Services immediately at 213-252-1247, 1254, or 1246 to update the address if you have moved.  
Your duplicate 1099 form will not be issued until the address has been corrected.

Telephone #: \_\_\_\_\_ Alternate telephone #: \_\_\_\_\_

Vendor (Entity ID) #: \_\_\_\_\_ Tax ID (last four digits): \_\_\_\_\_

Rental property address (1 unit) \_\_\_\_\_

Use this section to briefly state your question(s), describe any errors or state your request:

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Signature of Owner(s): \_\_\_\_\_

**Mail To:**

Housing Authority of the City of Los Angeles  
Attn: Finance Department/Section 8 Payables  
2600 Wilshire Blvd., 4<sup>th</sup> Floor  
Los Angeles, CA 90057

Email: [Finance@hacla.org](mailto:Finance@hacla.org)  
Fax: (213) 383-8249 Attn: Finance  
Department