



Request for Third Inspection

Tenant Information

Name: _____ Date: _____

Last 4 of SSN: _____ Email Address: _____

Home Phone: _____ Cell Phone: _____

Address: _____ Unit Number: _____

City: _____ State: _____ Zip Code: _____

Landlord Information

Name: _____

Email Address: _____

Home Phone: _____ Cell Phone: _____

Address: _____ Unit Number: _____

City: _____ State: _____ Zip Code: _____

A fee of \$75.00 will be required for third inspection requests. Please return this form, along with a Money Order made out to:

Housing Authority Bexar County
 1954 E Houston St Suite 104
 San Antonio TX. 78202

Payment can be mailed or dropped in our drop-box at the above address.

I am requesting a third inspection for the above unit due to the following:



