

Tampa Housing Authority

5301 W Cypress St.

Tampa, FL 33607

[DATE]

**RE: [Client name]**

To Whom It May Concern:

This family is being referred to the Family Unification Program due to concerns of inadequate housing. **The children are currently at risk of out of home care due to housing issues.** [This statement MUST be included in the letter or the FUP will not be accepted by THA]

*Please describe the family’s situation: any financial assistance they have received to maintain housing, date on eviction notice, staying in a motel, etc. In order for an intact family to be accepted for FUP, we need to clearly identify in this letter that the children are at imminent risk of removal due to loss or lack of housing. Remove the “Sample” watermark via the Page Layout tab above.*

Thank you for your assistance. Please contact me at the number below if any additional assistance is needed.

Thank you,

Case Manager Name

Contact information