

# HOUSING AUTHORITY OF THE CITY OF BASTROP

P. O. Box 707, 502 Farm Street, Bastrop, Texas 78602  
PH:512-321-3398 TTY:800-735-2989 (800-RELAY TX) FAX: 512-303-0568

## DISPOSITION AGREEMENT/EMERGENCY CONTACT

I am providing the following information to the Housing Authority of the City of Bastrop to be used in the event that I should die or become incompetent. The information provided herein shall be used to determine the disposition of any refunds due me and furniture or other property left in the unit at the time of my death or incompetence, provided that there are no remaining members of my household that are adults.

### I have a Will of Testament. The Executor of my Will is:

1. \_\_\_\_\_

Name	Executor	Phone Number
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Address	City	State	Zip
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I do not have a Will of Testament or in the event my Executor could not be contacted or can not act as my Executor, please contact (must be an adult):

2. \_\_\_\_\_

Name	Relationship to me	Phone Number
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Address	City	State	Zip
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In the event the above individual can not be contacted, or refuses property left in my apartment, please contact (must be an adult):

3. \_\_\_\_\_

Name	Relationship to me	Phone Number
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Address	City	State	Zip
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_____	<u>X</u>
Name of Tenant	Signature

_____	<u>X</u>	_____
Address	Date	Phone #

Before me, the undersigned authority appeared \_\_\_\_\_  
Who under oath swears that the fore-going statement is true and correct.

Signed this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_ by me, the undersigned  
authority in and for the County of Bastrop, State of Texas.

Notary Public: \_\_\_\_\_

(NOTARY SEAL)

Date commission expires: \_\_\_\_\_

**WARNING!** Section 1001 of Title 18 of the U.S. Code, states that a person who knowingly and willingly makes false or fraudulent statements to any department or agency of the United States is guilty of a felony.

*Bastrop Housing Authority does not discriminate against persons on the basis of disability status in the admission or access to, or treatment or employment in, its federally assisted programs and activities.*