

## Template 2: Medical Hardship / Family Change

*Best for: Health emergencies, caring for a family member, or a change in household size (divorce/marriage).*

**RE: Documentation of Occupancy Change – [Property Address]**

**Date: [Date]**

**This letter serves to explain a necessary change in my primary residence status. While I purchased and occupied the subject property with the full intent of making it my long-term home, an extenuating [Medical/Family] circumstance has arisen since my closing.**

**The Circumstance: [Example: "A member of my immediate family requires full-time care at a location [Number] miles away," or "A change in my household status has made continued occupancy of this specific home no longer practical."]**

**Supporting Action: I have maintained the property as my primary residence for [Number] months and have documented the transition with [List proof: e.g., doctor's note, legal documents]. I am notifying you to ensure my file remains transparent and compliant with VA occupancy guidelines regarding "Valid Intent."**

**Sincerely, [Your Name & Signature]**