

Request for Portability

This request must be completed and returned with the following requirements:

1. You must be a current participant for a minimum of 12 months.
2. You must provide a copy of your current lease agreement
3. Criminal Background forms must be signed by all members 18 and over.

In addition to the above requirements, DHA will be contacting your current landlord to verify that you are currently in good standing under your lease agreement.

Client Name: _____ Client #: _____

Address: _____ Telephone: _____

City, State, Zip: _____

I am in good standing with my current landlord: Yes No

I would like to move from my current address effective: _____

Please provide the following information regarding the area in which you want to transfer your voucher assistance using the portability option.

Housing Authority: _____ Telephone: _____

Contact Person: _____ Fax: _____

Address: _____ Email: _____

City, State, Zip: _____

Client Signature: _____ Date: _____

Staff Signature: _____ Date: _____

Approved Denied