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## TRANSFER REQUEST

Name: \_\_\_\_\_

Social Security Number: \_\_\_\_\_

Current Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Forwarding Address: \_\_\_\_\_

City/State/Zip Code: \_\_\_\_\_

I am requesting to port my Housing Choice Voucher to:

Name of Housing Authority: \_\_\_\_\_

Address: \_\_\_\_\_

City/State/Zip Code: \_\_\_\_\_

Telephone Number: \_\_\_\_\_ Fax: \_\_\_\_\_

Contact Person: \_\_\_\_\_

Estimated Date of Arrival: \_\_\_\_\_

Are You An FSS Participant?  YES  NO

If you are an FSS Participant please send a copy of this form to the FSS Coordinator.

I understand that once I port-out my rental assistance will be managed by the receiving Housing Authority and I may be absorbed into the receiving Housing Authority's Housing Choice Voucher Program.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_