



PORTABILITY REQUEST FORM

Under the Section 8 Housing Choice Voucher Program, families can move their assistance from one unit to another unit under certain conditions. "Portability" means moving from one housing authority's jurisdiction into another housing authority's jurisdiction.

AM I ELIGIBLE TO MOVE INTO A UNIT IN A DIFFERENT HOUSING AUTHORITY?

In order to move into a unit within the jurisdiction of a different housing authority (port out) you must meet at least one of the following criteria.

1. The head of your household or spouse had legal residence in the jurisdiction of your current housing authority at the time your family placed your name on the waiting list for the Section 8 Housing Choice Voucher Program.
2. You have been receiving housing assistance in the jurisdiction of your current housing authority for at least one year.

If you believe you are eligible to port, and you would like to transfer your housing assistance to a unit in a different housing authority's jurisdiction, please fill out the form below.

Name of Head of Household: _____ Tenant ID: _____

Home Address: _____ Mailing Address: _____

Phone Numbers: Home: _____ Work: _____ Cell: _____

Please list the city, county, and state in which you would like to move.

City: _____

County: _____

State: _____

Next steps in the portability process:

1. We will contact the housing authority that covers the area you would like to move into. We will inform the other housing authority that you wish to "port in" to their jurisdiction, and confirm that they are receiving portable vouchers.
2. Next, your request to port out must be approved by your current housing authority, and the housing authority in the location you wish to move. Our representative will inform you whether or not your request has been granted.
3. If your request has been approved by both housing authorities, we will process your portability documentation, and your program documents will be sent to the housing authority where you will move.
4. You will need to contact your new housing authority to inquire about any additional requirements that they may have.

x

Print Head of Household Name

Signature of Head of Household

Date