



## PORTABILITY REQUEST FORM

DATE: \_\_\_\_\_

NAME: \_\_\_\_\_ TENANT # \_\_\_\_\_

PHONE # \_\_\_\_\_ ALT PHONE # \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP CODE: \_\_\_\_\_

### PLEASE COMPLETE THE FOLLOWING INFORMATION:

NAME OF RECEIVING HOUSING AUTHORITY \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP CODE: \_\_\_\_\_

STAFF CONTACT: \_\_\_\_\_

BILLING CONTACT: \_\_\_\_\_

FAX #: \_\_\_\_\_ PHONE #: \_\_\_\_\_ EMAIL: \_\_\_\_\_

EXPECTED MOVE OUT DATE: \_\_\_\_\_ RECERTIFICATION DATE \_\_\_\_\_

I UNDERSTAND THAT I MUST GET APPROVAL FROM PLANO HOUSING AUTHORITY BEFORE RELOCATING. I ALSO UNDERSTAND THAT I MUST GIVE MY CURRENT LANDLORD A 30-DAY WRITTEN-NOTICE WHICH MUST BE TURNED IN WITH THIS FORM BEFORE MOVING. I UNDERSTAND THAT FAILURE TO DO SO MAY RESULT IN IMMEDIATE TERMINATION FROM THE HCV PROGRAM.

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

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### AGENCY USE ONLY (Information regarding Receiving Housing Authority)

VOUCHER SIZE: \_\_\_\_\_ PMT STANDARD: \_\_\_\_\_ VOUCHER EXP: \_\_\_\_\_

APPROVED \_\_\_\_\_ DENIED \_\_\_\_\_

REASON FOR DENIAL: \_\_\_\_\_

DATE INFO SENT: \_\_\_\_\_ STAFF SIGNATURE: \_\_\_\_\_

MANAGEMENT SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_



## NOTICE TO VACATE

\_\_\_\_\_  
Date

\_\_\_\_\_  
Counselor

\_\_\_\_\_  
Tenant Name

\_\_\_\_\_  
Tenant Phone Number

\_\_\_\_\_  
Address

\_\_\_\_\_  
Alternate Phone Number

\_\_\_\_\_  
City, State, Zip

\_\_\_\_\_  
Email Address

I am giving notice that I will be vacating your unit located at:

\_\_\_\_\_  
City ZIP

on the following date: \_\_\_\_\_

On the date above, I will be returning all keys and would like to schedule a move out inspection of the unit.

Plano Housing Authority does not conduct move out inspections. Landlords/Owners will not receive payment from Plano Housing Authority after the move out date. Notice to Vacate should coincide with the lease ending date and HAP Contract unless relocation has been approved by Plano Housing Authority for emergency reasons.

Thank you for your consideration of this matter,

\_\_\_\_\_  
Tenant Signature

\_\_\_\_\_  
Date Submitted

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### To be completed by Landlord/Owner

Does the tenant owe the landlord any money for rent or damages? NO \_\_\_\_\_  
YES \_\_\_\_\_ If Yes, how much? \$ \_\_\_\_\_ (Attach applicable supporting documents)

Notice to vacate accepted by \_\_\_\_\_  
Landlord or Landlord Representative Print Name

Signature \_\_\_\_\_ Date Notice accepted \_\_\_\_\_