PORTABILITY REQUEST FORM

Portability is the ability of a Housing Choice Voucher holder to move with continued assistance from one housing authority’s jurisdiction to another location.

TO USE YOUR PORTABILITY OPTION, CONTACT YOUR ELIGIBILITY CLERK. YOUR ELIGIBILITY CLERK WILL ASSIST YOU IN OBTAINING A TRANSFER VOUCHER. ONCE YOU HAVE A TRANSFER VOUCHER YOU MUST COMPLETE THIS FORM AND GIVE IT TO YOUR ELIGIBILITY CLERK.

I, ________________________________________, a current Housing Choice Voucher holder, would like to utilize the portability provision of the program to receive assistance in the State, City and/or County of ______________________.

I do hereby authorize the San Francisco Housing Authority to release any information or materials that are deemed necessary to the complete portability process of my Section 8 Housing Choice Voucher assistance to the following location:

HOUSING AUTHORITY: __________________________________________
ADDRESS: __________________________________________
________________________________________
CONTACT PERSON: __________________________________________
TELEPHONE NUMBER: _(________)_______________________________
______________________________________ _(________)____________________
Signature of Head of Household   Contact Number

______________________________________
Date

portability request form