



RESIDENT APPLICATION FOR TRANSFER

Last Name: _____ First Name: _____ Middle Initial: _____

Client Account #: _____

Address: _____

Home Phone Number: _____ Cell Phone Number: _____

Circle Current Bedroom Size: 0 1 2 3 4 5

Circle Bedroom Size Requested: 0 1 2 3 4 5

Use the space below to briefly outline the reason(s) for your transfer application:

IMPORTANT INFORMATION

Documentation supporting the request for a transfer must be attached to this form.

APPLICATION PROCESS: *The San Francisco Housing Authority does not transfer any family to any particular apartment, community, neighborhood or development because of race, color, sex, religion (creed), disability, familial status, national origin, ancestry, sexual orientation, marital status, source of income, or age.* Completing this application does not guarantee a transfer. If the SFHA approves the transfer application, the applicant will be placed on the Transfer Waiting List. When the applicant reaches the top of list and a unit properly sized for the applicant's household is available, the applicant will be offered a unit. Should the resident accept the offer, the resident will be dropped from all transfer lists. Should the resident refuse to accept the unit, the PHA will skip over the resident without affecting the resident's placement on the transfer list. However, if the resident refuses a second offer made at that particular site, the resident shall be dropped from that site's transfer list. *A resident may only be transferred once every five years except for Emergency Transfers.*

HOUSING SELECTION: In order to receive a transfer, the applicant **MUST** identify SFHA housing locations that would compromise or jeopardize the safety of the applicant or household. When identifying locations, the applicant should consider public safety, medical and disability needs, and all other family or individual factors that could impact the choice of housing locations.

For safety reasons, I cannot live at the locations circled below:

Family Housing	Senior & Disabled Housing
<input type="checkbox"/> Great Highway <input type="checkbox"/> Randolph & Head (200 Randolph/409 Head) <input type="checkbox"/> Sunnydale (1654 Sunnydale Avenue) <input type="checkbox"/> Potrero Terrace & Annex (1095 Connecticut Street)	<input type="checkbox"/> 363 Noe Street <input type="checkbox"/> 4101 Noriega Street <input type="checkbox"/> San Jules Apartments (Eddy Street)

Applicant Signature: _____

Date: _____

IMPORTANT REMINDER: RETURN COMPLETED FORM TO YOUR PROPERTY OFFICE
