



525 SOUTH LAWRENCE STREET
MONTGOMERY, ALABAMA 36104-4611
PHONE: (334)-206-7200 - FAX: (334)-206-7222 - WEBSITE: MHA TODAY.ORG

PORTABILITY REQUEST

July \_\_\_\_, 2012

I \_\_\_\_\_, request to transfer my Section 8 voucher to the Section 8 Department of:

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

Portability Officer: \_\_\_\_\_

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

City, State, & Zip: \_\_\_\_\_

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

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

My contact information is as follows:

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

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

City, State, & Zip: \_\_\_\_\_

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

Lease Expiration Date: \_\_\_\_\_

I understand that the necessary documents will be sent to the requested agency.

Signature of Tenant

Date

Housing Specialist

Date

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CANCELLATION OF TRANSFER

I request that my transfer to \_\_\_\_\_, the above authority be cancelled.

Signature of Tenant

Date