



# Greene Metropolitan Housing Authority

538 N. Detroit Street, Xenia, OH 45385  
Xenia: 937-376-2908, Fairborn: 937-429-7736  
General Fax: 937-376-2487, Public Housing Fax: 937-347-1235, Section 8 Fax: 937-347-1230  
Website: [www.gmha.net](http://www.gmha.net)

## CONTINUED OCCUPANCY FORM

**Head of Household Section - Please Print**  
**Attach current water bill or continued occupancy will be denied.**

I \_\_\_\_\_ wish to continue to reside at:  
(Head of Household)

\_\_\_\_\_  
Unit Street Address City ST Zip

Please check the appropriate line:

Additional 30 days for the month of \_\_\_\_\_

I do not wish to move at this time.

\_\_\_\_\_  
*Head of Household's Signature* Date (\_\_\_\_) \_\_\_\_\_  
*Phone Number*

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### Landlord Section - Please Print

I, \_\_\_\_\_ agree to allow  
(Landlord Name)

The above tenant to continue occupancy in the listed unit for the specified time period indicated. I also am in agreement that my tenant still does not owe me any money.

\_\_\_\_\_  
*Landlord's Signature* Date

Does client have any unpaid rent or charges \_\_\_\_\_ Amount Owed \_\_\_\_\_

***NOTE: This form must be received by GMHA no later than 4:00 P.M. on the last working day of the month to assure housing assistance payments to your Landlord. This does not guarantee first of the month payment to your landlord if returned to GMHA after the 20<sup>th</sup> of the month.***

***If the form is not returned on time, you will be responsible for your own rent until such time you vacate the unit. If you later choose to remain in the unit, the complete move-in process will be necessary.***