



# 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)

## Intent to Vacate Form

Under the Section 8 Housing Choice Voucher Program, families can move their assistance from one unit to another unit under certain conditions. **All of the following conditions are necessary for a unit transfer to be approved.**

- You have given a proper 30 day notice to your landlord. This notice is from the beginning of a month to the end of the same month.
- The first term of the lease has been satisfied. You must have lived in your current unit under the Section 8 Housing Choice Voucher program for one year.
- All money owed to the Housing Authority and the owner has been paid in full.
- **A copy of your most recent water bill is attached.**

Greene Metropolitan Housing Authority will provide the Landlord/Agent with your new address (if known) upon request. GMHA may provide a prospective landlord with the name and address of your previous landlord as well as your previous address. Other information may be provided, if applicable, such as tenancy history, and criminal and drug trafficking history.

Please also be aware that if you transfer your voucher size will be re-determined in compliance with our current subsidy and payment standard policy.

Name of Head of Household: \_\_\_\_\_

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

Phone Number: \_\_\_\_\_ E-mail address: \_\_\_\_\_

PLEASE CHECK ONE OF THE FOLLOWING:

I wish to continue receiving assistance \_\_\_\_\_ I no longer need assistance \_\_\_\_\_

Date you wish to vacate or no longer receive assistance: \_\_\_\_\_

Please state the reason that you would like to transfer: \_\_\_\_\_

Client Signature: \_\_\_\_\_

### THIS PORTION IS TO BE COMPLETED BY LANDLORD

My signature certifies that:

1. I have been given a 30 day notice of the tenant's intent to vacate my unit.
2. I understand the tenant is responsible for full rent if the unit is not vacated on the above date unless proper continued occupancy procedures are followed. (30 days)

Does this tenant owe you any money? \_\_\_\_\_

Has a new lease been signed \_\_\_\_\_ if yes, what are the lease term dates? \_\_\_\_\_

Owner Signature \_\_\_\_\_ Phone# \_\_\_\_\_ Date \_\_\_\_\_