



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

INTENT TO VACATE

Under the Section 8 Housing Choice Voucher Program, families may 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:**

- A proper 30-day notice to your landlord/owner and GMHA. (Notice is from the beginning of a month to the end of the same month.) *Completed form must be received by GMHA no later than the end of the month prior to your Date to Vacate; e.g., form received by May 31st for vacate date of June 30th.*
- 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 GMHA and the landlord/owner has been paid in full.
- **A copy of your most recent water bill is attached.**

GMHA will provide the Landlord with your new address, upon request. GMHA may provide a prospective landlord with the name of your previous landlord as well as your previous address. **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: _____

Reason for transfer: _____

Head of Household Signature: _____

THIS PORTION MUST 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.

Does this tenant owe you any money? _____ If so, amount and reason: _____

Has a new lease been signed _____ If yes, what are the lease term dates? _____

Landlord Signature _____ Phone: _____ Date: _____

Warning: Title 18, Section 1001 of the U.S. Code states that a person is guilty of a felony for knowingly and willingly making false or fraudulent statements to any department of the United States Government. HUD, the PHA and any owner (or any employee of HUD, the PHA or the owner) may be subject to penalties for unauthorized disclosures or improper uses of information collected based on the consent form. Use of the information collected based on this verification form is restricted to the purposes cited above. Any person who knowingly or willfully requests, obtains or discloses any information under false pretenses concerning an applicant or participant may be subject to a misdemeanor and fined not more than \$5,000. Any applicant or participant affected by negligent disclosure of information may bring civil action for damages, and seek other relief, as may be appropriate, against the officer or employee of HUD, the PHA or the owner responsible for the unauthorized disclosure or improper use. Penalty provisions for misusing the social security number are contained in the Social Security Act at **208 (a) (6), (7) and (8). ** Violations of these provisions are cited as violations of 42 U.S.C. Section **408 (a) (6), (7) and (8).** GMHA does not discriminate on the basis of disability status in the admission or access to, or treatment or employment in, its federally assisted programs and activities.

