



Section 8 Offices
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Equal Opportunity Housing

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SECTION 8 REQUEST TO MOVE FORM

You *may not move out* of your assisted unit without permission from SRC
This form should only be completed by the Head of Household.

Instructions: Savin Rock Communities must review all move requests for eligibility and will process move requests within 14 calendar days. **REMINDER, IN ORDER TO MOVE BY THE FIRST OF ANY MONTH THIS (AND ALL FORMS REGARDING YOUR MOVE) MUST BE RECEIVED BY THE 22ND OF THE PREVIOUS MONTH** (*Please note portable out of town moves take longer to process, please submit form(s) as soon as possible*)

To be eligible to move with continued assistance from Section 8, you must be a participant in good standing and meet all the follow criteria (including but not limited to):

- You cannot have moved into a new unit within the last 12 months (exceptions *may* apply)
- You must be current with your tenant portion of rent • you must be in compliance with your lease • You must have either an expired lease or if you are in a lease, the ability to obtain a Mutual Rescission form signed by your current landlord. (Subject to review)

A Mutual Rescission (signed by LL & Tenant) or a (30 day) (or 60 days if your leases states) written notice must be given to your landlord & a copy of one of these must accompany this form.

Head of Household Name: _____ Last Four SS# _____

Current Address: _____ Contact Telephone Number _____

Date Intent to Vacate Unit: _____

if you do not move by the agreed upon date, please contact your tenant coordinator immediately for instruction to resubmit notice(s) to vacate

COMPLETE BOTH SIDES OF THIS FORM

Please read and check the appropriate box.

Type of Move Requested: (Please check)

Move within West Haven Move outside of West Haven Transfer within current building/managed property.

If moving out of West Haven provide receiving Housing Authority Information:

Housing Authority: _____ Contact name: _____

Address: _____

Contact Telephone Number _____ Contact Fax _____

Head of Household, please answer the following questions:

*Do you have an active lease with your current landlord?

Yes _____ No _____ Exp date: _____

*Did you supply landlord/PHA with a 30-day written notice or a mutual rescission?

Yes _____ No _____

*Are you being evicted, or do you have a case pending against you in housing court?

Yes _____ No If yes, what is the reason for eviction: _____

Landlord, please answer the following questions:

* Is the tenant current on their share of the rent? Yes__ No___ if no, what is owed \$ _____

* Is the tenant in violation of their lease? Yes_____ No _____ if yes please

explain _____

* If the tenant is month to month have they supplied you with a written 30-day notice to vacate? Yes _____ no _____

* If the tenant is in a lease, have you & the tenant signed a mutual rescission? Yes_____

No _____

I certify that the above statements are true to the best of my knowledge. I understand that supplying false statements and information can lead to a denial of my move request and jeopardize my housing subsidy.

Head of Household Signature

Date

Current Landlord Signature

Date

**Landlord: by signing this document, you give permission for the tenant to move in the above listed time frame