



HOUSING CHOICE VOUCHER PORTABILITY REQUEST

NOTE: A completed *Request To Move; AHP-5242* form must be attached.

Part I. REQUEST TO PORT OUT - TO BE COMPLETED BY THE HEAD OF HOUSEHOLD	
Name: _____	Date: _____
SSN: _____ Email Address: _____	
Home Phone: _____ Work Phone: _____	
Unit Address: _____	
City: _____ State: _____ Zip Code: _____	
I request portability assistance to move to the following PHA jurisdiction:	
<i>Please ensure information is filled out completely and accurately.</i>	
Name of receiving PHA: _____	
Contact Person: _____ Phone: _____	
Fax: _____ Email Address: _____	
PHA Address: _____	
City: _____ State: _____ Zip Code: _____	
_____	_____
Head of Household Signature	Date

FOR SAHA USE ONLY

PART II. HOUSING CHOICE VOUCHER PORTABILITY REQUEST	
Voucher expiration date: _____	Lease/contract expiration date: _____
Completion Checklist:	
<input type="checkbox"/> EIV	<input type="checkbox"/> Entity Alert cleared
<input type="checkbox"/> 50058	<input type="checkbox"/> Copy of voucher
<input type="checkbox"/> Notice of Family Rental History	<input type="checkbox"/> Verification of income
<input type="checkbox"/> All permanent documents for all household members	HAS Initials: _____

PART III. PORTABILITY SPECIALIST'S LOG	
Receiving PHA: _____	Date of contact _____
Name of contact: _____	
Date portability papers were transmitted: _____	

- What are the next steps?**

 1. You will be contacted by SAHA within ten (10) business days to inform you of whether your request was approved or denied.
 2. If approved, your portability packet will be sent to the receiving PHA 30 days before your lease ends. The receiving PHA will be in contact with you to guide you through the rest of the porting process



The following person has been designated to coordinate compliance with the nondiscrimination requirement contained in HUD's regulations implementing Section 504: **Michelle Finch, 818 S. Flores, San Antonio, Texas 78204.**

SAHA
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