



Scan the QR Code to access the required Recertification Packet.

Request To Move

| Participant Information | | | |
|---|------------|-------------|------------------|
| Participant Name (print) | | | Last Four of SSN |
| Email | | | |
| Home Phone | Cell Pho | ne | |
| Current Address | | | |
| City | | State | Zip |
| Owner Information | | | |
| Owner Name (print) | | Email | |
| Home Phone | Cell Pho | ne | |
| Current Address | | | |
| City | State | | Zip |
| If you are requesting to move prior to the end of your | lease, ple | ase fill ou | t this section. |
| Early Release requests will not be granted to individuals in the first year of their lease unless the reason qualifies under Fair Housing requirements or Opportunity Home San Antonio HQS Landlord termination. Valid supporting documentation is required for your early release request. Please note that a Recertification Packet must be submitted with your Request to Move, or your early release request will be denied. If you are requesting an early release from your current lease, please write a brief explanation of your reason: | | | |
| Please indicate the documentation you have to support your request (check all that apply): □ Police report □ Copy of the Judgment* □ Letter Statement(s) from a knowledgeable professional □ Other *Note that a copy of the judgment will only be accepted if obtained through the appeals process in court. To move without penalty, you must first provide your landlord with a written notice and obtain their agreement as required by your lease. In addition, you must receive written approval from Opportunity Home before moving out or vacating the unit. Do not vacate the unit until you have received approval. | | | |
| Effective Date of Lease Termination | | | |
| If you submit an updated Request to Move Form and the new effective lease termination date is 60 days past the initial lease termination date , you must resubmit a Request for Tenancy Approval for the current unit. It is further agreed that the Housing Assistance Payments (HAP) being paid to the owner under this HAP Contract will cease as of the above effective date. If the participant remains in the unit, the participant is responsible for payment of contract rent in full beyond the effective date. By signing, the owner acknowledges that a claim for vacancy loss or damages may not be filed with Opportunity Home; this does not apply to owners in the Moderate Rehabilitation and Project-Based Voucher programs. | | | |
| By signing below, we, the above named participant and ove the property occupied by the participant. The participant a Move if the participant wishes to cancel this request. | | - | |
| Participant Signature | | Da | te |
| Owner Signature | | Da | te |

The following person has been designated to coordinate compliance with the nondiscrimination requirement contained in HUD's regulations implementing Section 504: Michaelle Finch, 818 S. Flores, San Antonio, Texas 78204. homesa.org | 210.477.6000