

HOUSING AUTHORITY
NOTICE OF INTENT TO VACATE

RECEIVED BY: _____ H.A. Representative
DATE: _____

DATE OF NOTICE: _____
RESIDENT'S NAME: _____
PROPERTY NAME: _____
ADDRESS: _____

THIS IS TO ADVISE THE HOUSING AUTHORITY OF MY INTENT TO TERMINATE MY LEASE AGREEMENT FOR THE ABOVE UNIT ON THE _____ DAY OF _____, 20_____.

I PLAN TO MOVE TO : _____

MY NEW TELEPHONE # IS: _____ () _____

THE REASON I AM TERMINATING MY LEASE AGREEMENT IS:

“I UNDERSTAND THAT I AM FULLY RESPONSIBLE FOR THE RENT ON THE UNIT UNTIL I TURN IN THE KEYS.”

RESIDENT'S SIGNATURE

DATE

HOUSING AUTHORITY

INFORMAL HEARING REQUEST
(PUBLIC HOUSING APPLICANT ONLY)

DATE: _____

RECEIVED BY: _____ H.A. Representative
DATE: _____

TO WHOM IT MAY CONCERN:

I RECEIVED A LETTER FROM THE HOUSING AUTHORITY STATING MY APPLICATION
WAS DETERMINED "INELIGIBLE" BECAUSE OF:

- _____ CRIMINAL RECORD NOT IN ACCORDANCE
- _____ UNFAVORABLE LANDLORD VERIFICATION
- _____ TITLE 18 U.S.C. 1001
- _____ OTHER

I WOULD LIKE TO REQUEST AN INFORMAL HEARING OF THIS DECISION.

I WOULD PREFER A: (check one)

- _____ MORNING APPOINTMENT
- _____ AFTERNOON APPOINTMENT

MY CURRENT CONTACT INFORMATION IS LISTED BELOW.

NAME: _____

MAILING ADDRESS: _____

CITY, STATE, ZIP: _____

TELEPHONE #: _____ (____) _____

APPLICANT'S SIGNATURE: _____

HOUSING AUTHORITY
INFORMAL HEARING REQUEST
(HOUSING AUTHORITY RESIDENT ONLY)

RECEIVED BY: _____ H.A. Representative
DATE: _____

DATE: _____

TO WHOM IT MAY CONCERN:

I WOULD PREFER A: (check one)

- MORNING APPOINTMENT
 AFTERNOON APPOINTMENT

MY CONTACT INFORMATION IS LISTED BELOW.

NAME: _____

MAILING ADDRESS: _____

CITY, STATE, ZIP: _____

TELEPHONE #: () _____

RESIDENT'S SIGNATURE: _____

HOUSING AUTHORITY

GRIEVANCE HEARING REQUEST

(HOUSING AUTHORITY RESIDENT ONLY)

RECEIVED BY: _____ H.A. Re pre tative
DATE: _____

DATE: _____

TO WHOM IT MAY CONCERN:

I WOULD PREFER A: (check one)

MORNING APPOINTMENT

AFTERNOON APPOINTMENT

MY CONTACT INFORMATION IS LISTED BELOW.

NAME: _____

MAILING ADDRESS: _____

CITY, STATE, ZIP: _____

TELEPHONE #: _____ (____) _____

RESIDENT'S SIGNATURE: _____