



# Housing Alliance and Community Partnerships

711 North 6<sup>th</sup> Ave Pocatello, ID 83201 • Phone 208-233-6276 • Fax 208-233-9821

## PORTABILITY REQUEST FORM

Under the Section 8 Housing Choice Voucher Program, families can move their assistance from one unit to another unit under certain conditions. "Portability" means moving from one housing authority's jurisdiction to another housing authority's jurisdiction.

### **AM I ELIGIBLE TO MOVE INTO A UNIT IN A DIFFERENT HOUSING AUTHORITY?**

In order to move into a unit within the jurisdiction of a different housing authority (port out) you must meet at least one of the following criteria.

1. The head of household or spouse lived in the jurisdiction of your current housing authority at the time your family placed your name on the waiting list for the Section 8 Housing Choice Voucher Program.
2. You have been receiving housing assistance in the jurisdiction of your current housing authority for at least one year.

**If you do not meet the requirements to port your voucher as shown above, and you are an individual with a disability, you may request to port your voucher as reasonable accommodation (RA).** An RA may only be considered for disabled individuals. If you are a disabled individual and would like the request to port your voucher, be considered as a reasonable accommodation, submit this form with a *Request for a Reasonable Accommodation Form*. This form is available at our office. You may also call us to ask that one be sent to you.

**If you believe you are eligible to port and you would like to transfer your housing assistance to a unit in a different housing authority's jurisdiction, please fill out the form below.** Your request will not be processed until the housing authority receives a copy of your vacate notice. Please be aware that it could take up to three weeks to review and process your *Portability Request Form* depending on the number of requests pending. If you cancel your request, and wish to port to a new location, you will need to submit a new *Portability Request Form* and that process could take up to 10 business days.

Name of Head of Household: \_\_\_\_\_ Contact Number: \_\_\_\_\_

Home/Mailing Address: \_\_\_\_\_

### **Please list the city, county, and state in which you would like to move:**

City: \_\_\_\_\_ Name of PHA: \_\_\_\_\_

County: \_\_\_\_\_ Contact Person: \_\_\_\_\_

State: \_\_\_\_\_ Contact Number/Email: \_\_\_\_\_

### **Next steps in the portability process:**

1. We will contact the housing authority that covers the area you would like to move into. We will inform the housing authority that you wish to "port in" to their jurisdiction and confirm that they are taking portable vouchers.
2. Next, your request to "port out" must be approved by your current housing authority, and the housing authority in the location you wish to move. Our representative will inform you whether your request has been approved or denied.
3. If your request has been approved by both housing authorities, we will process your portability documentation, and your program documents will be sent to the housing authority where you will move.
4. You will need to contact your housing authority to inquire about any additional requirements they may have

X \_\_\_\_\_

Print Head of Household Name

Signature of Head of Household

Date

*Housing Alliance and Community Partnerships (HACP) does not discriminate based on race, color, creed, national origin, religion, disability, sex, sexual orientation, gender identity, age (over 40), military status, whistleblower retaliation, or familial status in admission or access to its programs.*

***HACP is an Equal Opportunity Employer.***

***If you need to request a Reasonable Accommodation, contact HACP at 208-233-6276 or TTY: 711 or 800-377-3529***