



Empowering families to improve our community.

FLORENCE HOUSING AUTHORITY

HOUSING CHOICE VOUCHER DEPARTMENT
110 South Cypress Street, Florence, Alabama 35630
Telephone: (256) 740-5217 TRS: 711
Fax: (256) 768-3175

FAMILY REQUEST FOR PORTABILITY FORM

Portability is the ability of a family to move from one Housing Authority's jurisdiction to another Housing Authority's jurisdiction that administers a Housing Choice Voucher Program within the United States or its territories with continued rental assistance. The right to move under portability is not automatic and requires coordination and approval from both the initial Housing Authority and receiving Housing Authority. Therefore, you must understand a move under portability will take a little longer to process than a regular move within the same jurisdiction. In order to port out, you must meet the following criteria:

1. You have been receiving rental assistance through Florence Housing Authority's HCV Program for at least one (1) year.
2. You have fulfilled your current lease agreement or have written landlord permission to vacate and have given proper written notice to the landlord and Florence Housing Authority's HCV Department.
3. The head of household or spouse had legal residence in the jurisdiction of Florence Housing Authority at the time your family placed your name on the waiting list for the HCV Program (applicable only if you are being selected from the waiting list and are a new admission), and the household was on the waiting list for at least one (1) year.
4. Have you submitted an Intent to Vacate Notice to your landlord?

If you believe you are eligible to move with continued assistance under the portability regulations, and you would like to transfer your rental assistance to another Housing Authority's jurisdiction, please fill out the information in the area below.

Head of Household: _____ Last four of SSN: _____

Current Address: _____
(Street, City, State, Zip)

Phone Number: _____ Email: _____

Please list the city, county, and state in which you would like to move and PHA contact information.

City: _____ PHA Contact: _____
(if known)

County: _____ Email of PHA Contact: _____
(if known)

State: _____ Name of PHA: _____
(if known)

Providing the PHA contact information is not a requirement for us to process your information. However, it will help expedite getting the required documents to the appropriate Housing Authority.





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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 other Housing Authority that you wish to “port in” to their jurisdiction and confirm that they are receiving portable vouchers.
2. Next, your request to port out must be approved by Florence Housing Authority, and the Housing Authority in the location you wish to move. Our representative will inform you whether or not your request has been granted.
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 new Housing Authority to inquire about any additional requirements that they may have.

I, _____, have requested that Florence Housing Authority provide me with a Housing Choice Voucher to rent a unit that is located outside of their jurisdiction.

By signing below, I hereby authorize Florence Housing Authority to release information from my tenant file for the purposes of porting to a new location under the Housing Choice Voucher Program portability regulation.

Signature

Date

