



JACKSON HOUSING AUTHORITY  
 2747 LIVINGSTON ROAD JACKSON, MS 39213  
 P.O. BOX 11327 JACKSON, MS 39283  
 PHONE: 601-362-0885 FAX: 601-982-4733

**HCV TRANSFER REQUEST**

JHA must review all move requests for eligibility and will process each request within 14 days. In order to be eligible to move with continued Housing Choice Voucher (HCV) assistance, you must be in good standing and meet all the following criteria:

- You have not moved within the last 12 months.
- You must have a zero balance with current landlord (**documentation required**).
- Your lease is expired or current landlord is willing to provide a general release form.
- You have provided your current landlord and JHA with 30 notice to vacate (**documentation required**).
- You must have completed an update of income within the past 120 days.

**Name (HOH):** \_\_\_\_\_ **Telephone:** \_\_\_\_\_

**Current Address:** \_\_\_\_\_

**City/State:** \_\_\_\_\_ **Zip Code:** \_\_\_\_\_

**Program (HCV or VASH):** \_\_\_\_\_

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Type of Move Requested:**

- Move within JHA Jurisdiction
- Move from a Project Based Voucher Development (Keystone Estates)
- Move outside of JHA Jurisdiction (Complete Portability Request)

I have submitted my 30 notice to vacate to the landlord and will vacate the property no later than \_\_\_\_\_.

**If you are unable to vacate the property by this date you MUST contact JHA no less than 10 days prior to this date to discuss further options.**

**Please answer the following questions:**

- Are you current on your tenant share of rent?  Yes  No
- Do you have an active lease with your current landlord?  Yes  No
- Are you being evicted or have a case pending against you in housing court?  Yes  No

I certify that the above statements are true to the best of my knowledge. I understand that supplying false statements and information can lead to a denial of my request and may affect my housing subsidy.

\_\_\_\_\_  
**Head of Household Signature**

\_\_\_\_\_  
**Date**

PLEASE MAIL OR HAND DELIVER REQUEST TO: Jackson Housing Authority  
 2747 Livingston Road  
 Jackson, MS 39213

INTERNAL OFFICE USE ONLY	
Date Reviewed:	_____
Received:	<input type="checkbox"/> 30 Day Notice <span style="margin-left: 200px;"><input type="checkbox"/> Zero Balance Statement</span>
Is Tenant Eligible to Move?	<input type="checkbox"/> YES <span style="margin-left: 150px;"><input type="checkbox"/> NO</span>
Comments:	_____ _____ _____
JHA Signature:	_____ Date: _____