

Peoria Housing Authority

Moving Families Forward

Portability Request Form

Head of Household Name: _____

Current Address: _____

City, State, Zip: _____

Current Telephone Number: _____

Current Leasing Specialist: _____

I have given my current Landlord _____ a 30-day notice and will be vacating my unit effective _____.

Please forward my voucher and paperwork to:

Housing Authority: _____

Address: _____

City, State, Zip: _____

Port Specialist Name: _____

Phone Number: _____ Fax: _____

Email Address: _____

Are they Billing or Absorbing? _____

Signature of Head of Household _____ Date: _____

To be completed by Peoria Housing Authority

Date paperwork faxed to receiving HA _____

Date paperwork mailed to receiving HA _____

Date Billing Time Expires _____

Receiving HA Absorbing effective _____

Receiving HA Billing effective _____

Portability Specialist Signature _____

100 S. Richard Pryor Place • Peoria, IL 61605 • Tel: 309-676-8736 • TTY: 309-674-0849
Fax: 309-676-0291 • <http://peoriahousing.org/>

