



# LONOKE COUNTY HOUSING AUTHORITY

617 N. Greenlaw • Carlisle, AR 72024 • 870-552-3554 tel • 870-552-3555 fax

## PORTABILITY REQUEST AND INFORMATION

The Lonoke County Housing Authority administers Section 8 Rental Assistance **only** for the Lonoke County Housing Authority. If you are moving to an address that is not within Lonoke County, you must request to have your information transferred to the Housing Agency that serves the area in which you are planning to live. This is called "portability."

To use the portability feature of your Housing Choice Voucher, the following information must be submitted to this housing office.

For **NEW Applicants** who currently live or work in the Lonoke County Housing Authority:

- You must complete and return this Portability Form

For **Current Program Participants**:

- You must submit a copy of the 30-60 day written notice to vacate to your landlord
- You must be issued a new Housing Choice Voucher
- You must complete and return this Portability Form

Your paperwork will be transferred to the Housing Agency you have indicated below. *Once your paperwork is transferred, the Lonoke County Housing Services Department will no longer be able to assist you regarding the processing of your case.* You must contact the new Housing Agency below for information regarding:

- Processing time of paperwork and program orientation
- Questions regarding your bedroom size and inspection date
- Information about the Payment Standards (rents) for that area
- Income limits for the new Housing Agency

Please be prepared to pay full rent until the process is completed.

I request to have my paperwork transferred to:

Agency Name: \_\_\_\_\_

Agency Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Contact Person's Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_

### My forwarding information

Client's Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Address: \_\_\_\_\_ City, State/Zip: \_\_\_\_\_

Your signature below acknowledges your request to utilize the portability feature of your Housing Choice Voucher.

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