SAHA | SAN ANTONIO HOUSING AUTHORITY
Opportunity Lives Here

REQUEST TO MOVE

PARTICIPANT INFORMATION	
Participant Name (*print*): _____	SAHA ID: _____
Telephone: _____	Email: _____
Current Address:	
OWNER INFORMATION	
Owner Name (*print*): _____	
Telephone: _____	Email: _____
Current Address: _____	

If you are requesting to move *prior to the end of your lease*, please fill out this section.	
Early Release requests will not be granted to individuals in the first year of their lease, unless the reason qualifies under Fair Housing requirements or San Antonio Housing Authority (SAHA) HQS Landlord termination. Valid supporting documentation is required for your request. If you are requesting an early release from your current lease, please write a brief explanation of your reason:	
Please indicate the documentation you have to support your request (check all that apply): ☐ Police report ☐ Letter Statement(s) from a knowledgeable professional	☐ Copy of the Judgment ☐ Other

Please note that in order to move, you must obtain your landlord's agreement and give your landlord written notice in accordance with your lease.

Effective Date of Lease Termination: _____
Date

It is further agreed that the Housing Assistance Payments (HAP) being paid to the owner under this HAP Contract will cease as of the above effective date. If the participant remains in the unit, the participant is responsible for payment of contract rent in full beyond the effective date. By signing, the owner acknowledges that a claim for vacancy loss or damages may not be filed with SAHA.

We, the above named **participant** and **owner**, hereby mutually agree to terminate the lease between us for the property occupied by the participant.

_____ _____
Participant Signature Date

_____ _____
Owner Signature Date