

Lucas Metropolitan Housing 424 Jackson St Toledo, OH 43604 419-259-9448 Fax 419-259-9495 TRS: Dial 711 www.lucasmha.org

## INTENT TO VACATE NOTICE TO LANDLORD WITH NOTICE OF HCVP TENANT GOOD STANDING STATUS

## Dear Property Owner:

I am submitting this notice to inform you that I plan to vacate the premises located at:

Address

City, State, Zip Code

I will be submitting this form to the Housing Choice Voucher Program office so that my eligibility to relocate can be determined. Since being a tenant in good standing is one requirement to be eligible to rehouse, I must have you complete the lower portion of this form. This notice only serves as my intent to vacate and is being used as a factor in the eligibility process of moving with continued assistance.

Prior to vacating, I will provide you with a Notice of Lease Termination in accordance with my lease requirements and Family Obligations of the Housing Choice Voucher Program that will include my vacate date.

Tenant Name (Printed)

Phone

Email Address

Tenant Signature

Date

## \*Participant/tenant must indicate current household members on page 2.

THE CURRENT LANDLORD MUST COMPLETE THIS PORTION BELOW		
Dear LMH,	who lives at	
Tenant Name	Tenant's Curren	
currently has a lease that expires on	and $\Box$ continu	ues month to month
The tenant is is not current w	ith their portion of rent and utilities	5.
Landlord Signature	Phone Number	Date



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## \*Participant must list current household members and relationship below:

Name of Household Member	Relation to Head of Household	
	Self	

FOR OFFICE USE ONLY       Elective Move   Mandatory Move
<ul> <li><u>The following eligibility items have been reviewed</u>:</li> <li>ITV notice has been completed and signed by landlord/alternative documents provided</li> <li>Special Program Requirements to relocate if applicable</li> <li>Lease Term</li> <li>Repayment Agreement if applicable</li> <li>Rent and Utility (water/sewer) are current</li> <li>Potential Program Violations</li> <li>Reasonable Accommodation Status/Update</li> <li>Eligible Voucher Size</li> </ul>
Participant is determined <b>Eligible</b> to relocate. May be issued a bedroom voucher.
Participant is determined <b>Ineligible</b> to relocate. Notification was sent to participant.
Housing Specialist Signature Date

If you need this document in a different language or LARGER FONT or it you need a reasonable accommodation (persons with disabilities), please call 419-259-9448 or TRS: Dial 711. Advance notice of seven days is required in order to arrange for interpreter services.