



# TACOMA HOUSING AUTHORITY

## REQUEST TO PORT OUT

THA form RA-01(180)

DATE: \_\_\_\_\_

NAME (print) \_\_\_\_\_ SSN \_\_\_\_-\_\_\_\_-\_\_\_\_

ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ ZIP \_\_\_\_\_

PHONE: \_\_\_\_\_ MSG# \_\_\_\_\_

REASON FOR REQUESTING PORTABILITY: \_\_\_\_\_

HAVE YOU SUBMITTED AN 'INTENT TO VACATE NOTICE' TO YOU LANDLORD? YES NO

ESTIMATED DATE TO PORT OUT \_\_\_\_\_

CITY & STATE YOU ARE PORTING TO \_\_\_\_\_

PLEASE PROVIDE THE NAME OF THEIR LOCAL HOUSING AUTHORITY, IF KNOW

RECEIVING PHA \_\_\_\_\_

HAVE YOU ALREADY SELECTED A UNIT OUTSIDE OF THA'S JURISDICTION? YES NO

IF YES, PLEASE COMPLETE THE FOLLOWING

NEW UNIT'S ADDRESS \_\_\_\_\_

CITY/STATE \_\_\_\_\_ ZIP \_\_\_\_\_

HEAD OF HOUSEHOLD SIGNATURE \_\_\_\_\_

DATE \_\_\_\_\_

### RETURN THIS FORM TO

**TACOMA HOUSING AUTHORITY  
RENTAL ASSISTANCE DIVISION  
902 SOUTH L STREET  
TACOMA, WA 98405-4037**

**THA USE ONLY – DO NOT WRITE BELOW THIS LINE**

CASEWORKER:		CLIENT ID:	
LANDLORD ID:		RECEIVING PHA:	
DATE 52665 SENT:			