



TACOMA HOUSING AUTHORITY

Request to Port Out

THA Form (M-60)

Name (Please Print) _____, SSN _____

Address _____ Email _____

City _____ Zip _____ Phone _____

Are you requesting to port for one of the following reasons? If so, please check the applicable box:

The following circumstances apply ONLY to Housing Choice Vouchers:

- | | |
|---|--|
| <input type="checkbox"/> I ported in from another housing authority and THA has not absorbed my voucher. | <input type="checkbox"/> I have a situation that is approved through the Violence Against Women Act (VAWA). |
| <input type="checkbox"/> A household member has an approved Reasonable Accommodation to port out of THA's jurisdiction. | <input type="checkbox"/> I do not meet any of the stated criteria for porting, but the housing authority I am interested in porting to is absorbing. |

If you do not meet any of the criteria above, you do not qualify to port out of THA's jurisdiction.

If you meet one of the criteria above, please attach proof to this request form and fill out the section below.

Have you submitted an intent to vacate notice to your landlord? YES NO

Estimated date to port out: _____

Public Housing Authority you would like to port to:

Housing Authority _____ Email _____

Address: _____ City & State _____ Fax: _____

Head of Household Signature _____ Date _____

Rental Assistance Division - 902 S L St. Tacoma, WA 98405
253.207.4400 – Fax: 207.4454 - TDD: 1.800.545.1833