## NOTICE OF INTENT TO MOVE

I understand that the relocation process may take 45-60 days and my move out date is approximately 45 days away.

I understand that if my move out date is less than 45 days and I move to a new unit, I may be responsible for paying my first months rent and thereafter if the unit or my continued participation is not approved by LHA.

I understand my new unit must be inspected and pass inspection before LHA will approve any contract or leases with an approved owner. LHA will not pay any rent subsidy until the HAP contract and lease is approved by the landlord and LHA.

I understand I may not be eligible to relocate if I have been evicted or lease has been terminated due to serious or repeated lease violation or if LHA cited tenant defects have not been corrected.

I understand I can not relocate to a unit that exceeds the Payment Standard and my portion of rent exceeds 50% of my household's adjusted income.

## THIS IS MY NOTICE TO MOVE AND TERMINATE MY TENANCY

I,, terminate my te	enancy effective
(Tenant Name)	(End of month)
from my unit at	
( current address)	
Tenant Signature:	Date:
Landlord/Agent Signature:	Date:

By signing this form, I am aware Lincoln Housing Authority will stop payment to the owner at the end of the month as agreed above. If the tenant continues to reside in the unit after the agreed upon termination date, the tenant will be fully responsible for the entire rent.