Dear Section 8 Tenant (participant):

To assist the Leased Housing/Section 8 Department with processing your information in a timely and efficient manner, we have implemented the following steps to our moving with continued assistance procedural.

Complete and return the move packet and attach all income verification information that is necessary for your household, including changes in family composition. Your move packet includes the following:

- **Notice to Move** – Complete and return with your application. Must have landlord signature in order to process.
- **Move With Continued Assistance Questionnaire** – Complete and return this form along with your signed Notice to Move form.

Upon receipt of your move packet, HABD will review your request and determine if you are eligible to move. If your request to move is approved, HABD will notify you in writing within 15 business days following receipt of your move request of the date and time of your move briefing appointment. You cannot vacate your current unit until you are issued a voucher and a moving packet by HABD. You must provide proper move-out notification to your current landlord and a copy to HABD in accordance with the terms and conditions specified in your lease.

If the move packet is not completed and returned with all of the required information, your move may be denied or delayed.

Thank you in advance for your cooperation.

Sincerely,

The Leased Housing/Section 8 Department

Rev. 12/2015
Move with Continued Assistance Change of Income/Household Questionnaire

Attention:

You must submit proper documentation along with this form. All documentation regarding changes to your household's composition and income must be submitted. Failure to provide this information will result in the delay in processing your move or cause your move to be denied.

Please complete the following:

Name: ___________________________ Date: ___________________________

Address: ___________________________

Contact Phone Numbers: ___________________________

Home: ___________________________ Cell: ___________________________

Work/Alternative#: ___________________________

I am reporting the following changes in my household: □ Increase or □ Decrease (Check one)

<table>
<thead>
<tr>
<th>Increase</th>
<th>Decrease</th>
</tr>
</thead>
<tbody>
<tr>
<td>If you are reporting an increase in income, you must supply the following information as applicable to your situation:</td>
<td>If you are reporting a decrease in income, you must supply the following as applicable:</td>
</tr>
<tr>
<td>Employment: Paystubs (3 most recent) or letter from employer with start date, rate of pay, number of hours and frequency of pay (i.e. daily, monthly, weekly).</td>
<td>Employment: Separation notice from former employer.</td>
</tr>
<tr>
<td>Benefits: Most recent award letter/computer printout with effective date and amount from agency.</td>
<td>Benefits Evidence of decrease or denial of Social Security or other benefit awards. Status of unemployment application. Evidence of decrease or denial of pension or other income.</td>
</tr>
<tr>
<td>Other Income Sources: Notarized Statements from anyone helping you pay your bills (this must include the amount given each month).</td>
<td>Other Income Sources: Notarized Statements from the source that is no longer helping you pay your bills.</td>
</tr>
</tbody>
</table>

For Income Changes: Attach ALL the following documentation that applies to your household:

- □ Proof of employment
- □ Loss of employment/Income
- □ Proof of Social Security/SSI
- □ Proof of Child Support
- □ Proof of Social Security/SSI
- □ Proof of Child Support
- □ Income
- □ Veterans administration income
- □ Bank Account Statement (Last 2 Monthly statements)
- □ Proof of Annuities, Stocks, CD's, Bonds, Money Market Accounts
- □ Outside source helping you pay your bills
- □ Any other sources of income received (please specify): ___________________________

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HOUSING AUTHORITY OF THE BIRMINGHAM DISTRICT
DEPARTMENT OF LEASED HOUSING and SECTION 8

Please complete if change is employment related:

New employer: ____________________________ Phone: ____________________
Address: ____________________________ ____________________________
Start date: ___________ Rate of pay: $_______ (hourly) Hours per week: ___________
Contact Person Name/Title: ____________________________

Former employer: ____________________________ Phone: ____________________
Address: ____________________________ ____________________________
Last Date of Work: ___________ Reason for Leaving: ____________________________
Contact Person Name/Title: ____________________________

If applicable, please report other changes in household income (explain):

*If you are reporting no income then you must also complete the Zero Income Form and Affidavit.

For household Member Changes (household composition): Attach the following that apply along with the above information for income changes for all adult members.

<table>
<thead>
<tr>
<th>Add New Household Member</th>
<th>Delete Current Household Member</th>
</tr>
</thead>
<tbody>
<tr>
<td>You must submit the following in order to add someone to your lease:</td>
<td>The head of household must provide at least one of the following:</td>
</tr>
<tr>
<td>• Landlord approval letter.</td>
<td>• A completed Resident Affidavit form, utility bill with new address, USPS change of address request form, or state issued photo ID with new address; or</td>
</tr>
<tr>
<td>• Birth Certificate</td>
<td>• Head of Household notarized self certification that the family member is no longer a part of the assisted household.</td>
</tr>
<tr>
<td>• Social Security Card</td>
<td>• Proof of residence at new address, such as name on lease or mortgage.</td>
</tr>
<tr>
<td>• Valid Picture ID (adult)</td>
<td>• Court ordered legal Proof of custody documents (if you are not the biological parent of child being added)</td>
</tr>
<tr>
<td>• Proof of Relationship (adult)</td>
<td>• Authorization for the Release for Information/Privacy Act Notice form HUD 9886 for any person 18 or older being added to the household</td>
</tr>
<tr>
<td>• Consent to Obtain Criminal Background records form (adult)</td>
<td>• Proof of citizenship (Declaration 214)</td>
</tr>
<tr>
<td>• Income information of new family member (adult)</td>
<td></td>
</tr>
<tr>
<td>• Court ordered legal Proof of custody documents (if you are not the biological parent of child being added)</td>
<td></td>
</tr>
<tr>
<td>• Authorization for the Release for Information/Privacy Act Notice form HUD 9886 for any person 18 or older being added to the household</td>
<td></td>
</tr>
<tr>
<td>• Proof of citizenship (Declaration 214)</td>
<td></td>
</tr>
</tbody>
</table>

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List family member(s) you are adding or removing:

<table>
<thead>
<tr>
<th>Name:</th>
<th>SSN#:</th>
<th>Date of Birth:</th>
<th>Age:</th>
<th>Sex:</th>
<th>Race:</th>
<th>Relationship to Head of Household:</th>
<th>Full-Time Student?</th>
<th>Add/Remove Date</th>
<th>Disabled?</th>
</tr>
</thead>
</table>

If you are removing a family member please indicate why:

________________________________________________________________________

Certification

I hereby certify that the above information is true and correct to the best of my knowledge. I understand that any misrepresentation will be grounds for denial or termination from the HABD.

WARNING:

Section 1001 of Title XVII of the United States Code makes it a criminal offense to make willful false statements or misrepresentations to any department or agency of the United States as to any matter within its jurisdiction.

Signature: ___________________________ Date ___________________
NOTICE TO MOVE

Today’s Date: __________

TENANT INFORMATION

<table>
<thead>
<tr>
<th>TENANT’S NAME (Print):</th>
<th>TENANT’S PHONE NUMBER:</th>
</tr>
</thead>
</table>

Dear Landlord:

Please consider this as notice that I, ________________________________, hereby inform you of my intent to vacate (move from) your rental property located at: ________________________________ by: _______ _

(Rental unit address) (Move out date)

(Move date must be the last date of the month)

The tenant must be in good standing and the tenant must give at least a full 30 day advance notice to vacate and the notice must be in accordance with the terms and conditions of their lease.

The family is aware that they must clean the unit and repair any damages caused by them or guest prior to vacating the unit and return the keys to landlord. The Housing Authority of the Birmingham District (HABD) is not responsible for tenant caused damages. HABD will terminate the Housing Assistance Payments (HAP) effective the same date of the tenant’s intent to vacate date (move out indicated above). The landlord understands they will not receive any further HAP beyond the move out date.

The tenant will be fully responsible for the entire contract rental amount without HAP from the HABD if they remain in the unit beyond the Notice to Move date. However, if a completed Lease Extension Authorization Form between the tenant and landlord to extend the Notice to Move is submitted no later than ten (10) days before the Notice to Move date indicated above. The landlord must complete the appropriate section below in order for the HABD to process your paperwork to move.

I agree that my tenant is currently in good standing and owes no outstanding rent or damages. I understand that it is my responsibility to enforce my lease if there is any breach of this agreement/lease on behalf of the tenant. I further understand that all HAP/Utility Allowance Program (UAP) payments will cease as of aforementioned vacate date.

For Landlord to complete: ☐ Vacate due to end of lease in good standing ☐ Break lease with permission and approval by landlord (check one).

I, ________________________________ (landlord/manager), hereby acknowledge receipt of this notification to vacate and agree with the move out date indicated above.

_________________________________________ __________________________
Landlord Signature Date

_________________________________________ __________________________
Tenant Signature Date

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