

1823 Harney Street Omaha, NE 68102 (402) 444-6900

Property Name:	
Unit Number:	

PUBLIC HOUSING TRANSFER REQUEST

In order to qualify for a transfer, you must meet the following requirements: have been a resident in the current unit for at least one (1) year, have not engaged in criminal activity that threatens the health and safety or residents and staff, do not owe back rent, other charges, or have a pattern of late payment, have no housekeeping lease violations or history of damaging property, do not have a current bed-bug/roach infestation, and can get utilities turned on in the name of the head of household (applicable only to properties with tenant-paid utilities). Return completed forms with any needed documentation to your Property Manager.

Resident Name:
Address and Apartment #:
I am currently residing in a bedroom unit and I need abedroom.
Reason for the request (Supporting documentation may be required.):
Tenants transferring due to a tenant requested reason, that does not qualify as high priority, will be responsible for paying a transfer fee prior to transfer. Fees are listed below:
• \$350 studio
• \$400 1 bedroom
• \$500 2 bedroom
• \$650 3 bedroom
• \$750 4 bedroom+
Please complete the accompanying Property Selection Form to identify your preferred property locations.
Head of Household's Signature Phone #

Transfer request for serious/life-threatening reasons as well as threats of physical harm or criminal activity are processed as high priority requests. All other requests are processed as regular priority when units are available.

FOR OFFICE USE ONLY							
Date Received	Time Receiv	ed	Receiv	red by:			
Name	Address			Property/ Unit #			
Bedroom size eligible for	·						
Type of Transfer: 1. Emergency – Main 2. Resident request – 3. Required – Demo/I 4. Required – Make a 5. Required – over-cre 6. Required – over-ho 7. Resident request –	Medical/Criminal/ Disposition ccessible unit avai owded used	lable					
Documentation AttachedPolice ReportI		VAWA _	RA _	Family Review (Pg 1)	Work/School Records		
☐ I certify that the tend documentation for the r			ets all elig	ibility criteria listed above	and that supporting		
☐ I have discussed the	transfer fees with	the tenant.					
Comments:							
Property Management Signature	gnature:			Date:	-		

Original transfer request and property selection form stays in file and scan/send a copy to the leasing coordinator.