Indianapolis Housing Agency

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A New Day & Better IHA

IndyHousing.org

REQUEST TO MOVE FORM

Please complete this form in full and submit it to the Indianapolis Housing Agency to request a move with continued assistance under the Housing Choice Voucher (HCV) Program. Please allow up to 60 days for the process to begin.

1. Participant Information

- **Head of Household Name:** _____
- **Current Address:** _____
  _____
- **Phone Number:** _____
- **Email Address (optional):** _____

2. Reason for Move

- **(check all that apply):**
  - ☐ Lease Expiring
  - ☐ Unit Issues / Unsafe Conditions
  - ☐ Family Composition Change
  - ☐ Domestic Violence / VAWA
  - ☐ Job Relocation
  - ☐ Reasonable Accommodation
  - ☐ Other (please explain): _____
    _____
- Requested Tentative Move-Out Date: _____

You must submit a copy of your 30-day notice to vacate, signed and dated by both you and your current landlord (this form will be provided by IHA once your move request has been approved)

3. Acknowledgement & Signature

I understand that this request is subject to approval by the housing authority and that I must comply with all HCV program requirements, including proper notice to my landlord and attending a move briefing (if required).

Signature of Head of Household: _____

Date: _____

The Violence against Women Act (VAWA) protects tenants regardless of sex, gender identity, or sexual orientation, from being terminated, from participation in, or evicted from the Housing Choice Voucher program on the basis that the tenant is or has been a victim of domestic violence, dating violence, sexual assault or stalking. As required by VAWA, enclosed are HUD form 5380, Notice of Occupancy Rights under the Violence Against Women Act and HUD form 5382, Certification of Domestic Violence, Dating Violence, Sexual Assault, or Stalking and Alternate Documentation.