

Dear Housing Voucher Program Participant:

Before you complete the attached Request to Relocate form, please read the following:

You can request to relocate **30–120 days before** your lease expires. If your lease does not expire within 30 -120 days of your request, your request to relocate will be denied unless there are extenuating circumstances deemed necessary and approved by the Camden County Senate Bill 40 Board. You must also meet the following criteria to voluntarily move:

- (1) You have not moved in the last twelve months.
- (2) Your landlord must declare that you are leaving the property in “good standing.”

Note: If the landlord returns a letter and attests that your family is not in “good standing” and provides sufficient proof to establish it, you will not be able to move and your assistance may be terminated.

Good standing means that you do not owe money, you do not have any damages to the unit, and your lease expires within 30 - 120 days.

If you do not meet the good standing criteria or extenuating circumstances do not exist, please do not submit a request to relocate. If you believe you will be able to satisfy these criteria, you may complete the attached Request for Relocation.

Do not give notice to move until you have received approval to relocate from the Camden County Senate Bill 40 Board, unless you are choosing not to participate in Housing Voucher Program any longer.

If the Camden County Senate Bill 40 Board determines that you are eligible to relocate, a relocation appointment will be scheduled.

Also, if the Camden County Senate Bill 40 Board is also in the process of completing your annual re-certification, your relocation will be delayed until the process is completed. Providing the Camden County Senate Bill 40 Board with all documents during the recertification process will help expedite the relocation process.

Sincerely,

Camden County Senate Bill 40 Board



REQUEST TO RELOCATE

DATE: _____

NAME: _____

Consumer ID #: _____

CURRENT ADDRESS: _____

CURRENT EMAIL ADDRESS: _____

CURRENT TELEPHONE NUMBER: _____

DATE LEASE EXPIRES: _____

REASON FOR MOVE (please select one option):

- Eviction
- Relocate to new neighborhood
- Household size increased – relocate to larger unit
- Household size decreased – relocate to smaller unit
- Reasonable Accommodation or live-in personal assistant/support service individual (must complete and attach reasonable accommodation form)
- Other (please provide details) _____

Guardian/Head of Household Signature

Date

