

SHA TRANSFER CHECKLIST
Section 8 Mod-Rehab Programs



Sender: _____ Bldg ID: _____ Phone: _____ Date: _____

Household Name: _____ Household SSN: _____

Assemble materials from top to bottom

	1. Personal Declaration
	2. Statement of Family Responsibility
	3. Authorization for the Release of Information (HUD 9886)
	4. SHA Release of Information

INCOME

	1. Income Verification (either WSHFC forms or SHA forms will be accepted)
	2. Self-Employment Verification include a signed copy of last year's tax return (WSHFC Self-Employment Verification can be substituted for this form)
	3. Zero Income Affidavit (SHA form)

ASSETS

	1. Asset Verification (if assets in excess of \$5,000) (WSHFC forms or SHA forms)
--	---

DISABILITY PROGRAM DEDUCTION

(if applicable)

	1. Professional Certification of Disability (WSHFC Disability Verification can be substituted for this form)
	2. Out of Pocket Medical Deductions include prescription printout or receipts

Please submit after tenant enters into lease agreement.	1. Initial Inspection Self-Certification
	2. Copy of the Lease and Tenancy Addendum
	3. Damage Payment and Drug form
Date of Transfer:	New Unit #: Old Unit #:

CONTACT NUMBERS FOR MOD-REHAB

Seattle Housing Authority
 190 Queen Anne Ave N
 Seattle, WA 98109
 www.seattlehousing.org

▶ New Applications: (206) 239-1782

▶ New Move-Ins AND Transfers: (206) 239-1782

▶ Annual Reviews, Special Reviews AND Move-Outs: (206) 239-1716

▶ FAX: (206) 256-7026