

CITY OF TORRANCE

HOUSING ASSISTANCE COMMUNITY DEVELOPMENT DEPARTMENT

3031 Torrance Blvd · Torrance, California 90503 · Telephone (310) 618-5840 · Fax (310) 618-2429

Portability Request

Please submit this form if you are holding a current and valid voucher from the City of Torrance Housing Authority, and you wish to relocate to another jurisdiction.

Name of Head of Household:	
Social Security Number:	
Primary Phone Number:	
Alternate Number:	
Have you already located a unit in the other jurisdiction? \Box Yes	s. \square No.
If yes, provide new address:	
Have you vacated your current unit? ☐ Yes. ☐ No. If yes, provide date:	
I'm requesting a transfer to the following Public Housing Authority (PHA):	
Name of PHA:	
Address:	
PHA Caseworker:	
Telephone Number:	
Fax:	
I hereby authorize the City of Torrance Housing Authority to provide the receiving PHA all documents and verifications needed to complete my portability request. I understand that my portability is subject to review by the receiving PHA and may be approved or denied. I have also received written material and an explanation of the program during my initial voucher briefing.	
Name of Head of Household:	_ Date:
Signature:	
(TORRANCE HOUSING OFFICE USE ONLY)	
The Request to Transfer has been: ☐ Approved	□ Denied
Name/Title of PHA Official: Signature of PHA Official:	Telephone: