



**HomeBASE  
MOBILITY TRANSFER FORM**

With this form, a HomeBASE family that receives temporary accommodation and/or rental assistance may move from one HomeBASE administering agency's region to another as long as the family maintains its eligibility for HomeBASE. If a Participant moves and remains eligible, the sending administering agency must arrange to transfer the Participant's file and the receiving administering agency shall be responsible for the family's HomeBASE benefit, including all leasing and stabilization assistance.

Date of Submission Request: \_\_\_\_\_

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HomeBASE Participant Name and Originating Address:

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Gross Annual Household Income: \_\_\_\_\_ Proposed Unit Bedroom Size: \_\_\_\_\_

Assigned Bedroom Size: \_\_\_\_\_ Proposed Lease-Up Date: \_\_\_\_\_

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Current HomeBASE Administering Agency \_\_\_\_\_

Address:

Telephone #:

Fax#:

Contact Person:

Receiving HomeBASE Administering Agency \_\_\_\_\_

Address:

Telephone #:

Contact Person:

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Address of Proposed Unit:

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(Street, Apt. #)

(Town/City)

(Zip)

Name of Landlord: \_\_\_\_\_

Address: \_\_\_\_\_  
(Street) (City/State/Zip)

Phone Number: \_\_\_\_\_

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When a Request for Rental Assistance Program Payment is submitted to the current HomeBASE administering agency for a unit located in a different jurisdiction, this Mobility Form should be attached to the RFPP and forwarded to the administering agency whose jurisdiction covers the location of the new unit. If the unit is accepted for program payment, the new administering agency should sign and return a copy of this transfer form to the original agency indicating that the transfer is complete.  
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\_\_\_\_\_  
Signed by Sending/Current HomeBASE administering agency Date

\_\_\_\_\_  
Signed by New/Receiving HomeBASE administering agency Date

\_\_\_\_\_ Successful Lease-Up

\_\_\_\_\_ Unsuccessful Lease-Up