



Section 8 Notice of Intent to Withdraw

Name of Head of Household: _____ Client #: _____

Address: _____

Phone: _____

Email: _____

This is to inform you that I wish to withdraw my household from participation in the rental assistance program (Housing Choice Voucher or Project-Based Voucher) effective on the date listed below.

Date giving up assistance: _____

My new address (if applicable): _____

Please initial:

_____ I understand that the Reno Housing Authority (RHA) will only assist me with my rent through the date above, and if the RHA has already paid my landlord for dates beyond that, I will be responsible for paying my landlord for that portion.

_____ I understand that after the effective date listed above, I cannot withdraw this request. If I change my mind after the date above, I will need to re-apply for assistance when the waiting list is open.

_____ I understand that if I owe a balance to the RHA, giving up my assistance does not resolve that balance. I will be expected to repay the RHA for the overpaid assistance following my existing repayment agreement, and any failure to abide by that agreement or fully repay the monies owed will cause the RHA to forward my balance to a collections agency for enforcement.

By typing my full name below, I am certifying the information on this form and stating I understand my obligations regarding withdrawing from the program.

E-Signature: _____

Date: _____