



Pocahontas Housing Authority
Income based housing

Pocahontas Housing Authority Inc.
1320 Dalton Street
Pocahontas, AR 72455
Phone (870) 892-9278
Fax (870)892-1241

MEMBER OUT FORM

Please be advised that the following person has moved out or intends to move out of my household

NAME: _____

DATE OF BIRTH: _____

SOCIAL SECURITY #: _____

This person has moved out, or intends to move out, as of the following date: _____

Please process an interim recertification to account for this departure. I understand and acknowledge the following:

1. Management will recalculate household rent to account for the departure of the person named above; and
2. Management will evaluate whether my household is still large enough to occupy its current unit. If my household occupies a unit that is specially designed to accommodate a disability of the person named above, management will evaluate whether the household is still eligible to occupy the unit. As a result of the evaluation, management may require the household to move to a different unit at the site in which a unit first comes available.

HEAD OF HOUSEHOLD SIGNATURE: _____

DATE: _____ ADDRESS: _____

RECEIVED BY: _____

DATE: _____