



**WALWORTH COUNTY HOUSING AUTHORITY**

*affordable housing is the foundation to build a strong community*

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20 N Church Street, Suite 1 • Elkhorn, Wisconsin 53121

Phone: 262-723-6123 • Fax: 262-723-2079

**REQUEST FOR PORTABILITY**

**Applicant/Participant Information**

Name: \_\_\_\_\_

Current Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

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

Moving Date: \_\_\_\_\_

**I am requesting to transfer my Voucher to:**

Name of Housing Authority to be transferred to: \_\_\_\_\_

Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

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

Fax: \_\_\_\_\_

I therefore authorize the Walworth County Housing Authority to release my family composition and income documentation to this Housing Authority. I understand that if I decide not to use this transfer, I must inform the Walworth County Housing Authority in writing as soon as possible.

Applicant/Participant Signature: \_\_\_\_\_

Date: \_\_\_\_\_

You may return this by mail, email, fax or dropped off in the locked drop-box at the office.

[kfriend@wchawi.com](mailto:kfriend@wchawi.com) - - - - 20 N. Church Street, Elkhorn WI 53121 - - - - F: 262-723-2079