

**CONCORD HOUSING AUTHORITY**  
**UNIT TRANSFER POLICY**

A public housing tenant may request a transfer at any time by completing a transfer request form. In considering the request, the Concord Housing Authority may schedule a meeting with the tenant to better understand the need for the transfer and to explore possible alternatives. The Concord Housing Authority will review the request in a timely manner and if a meeting is desired, it shall contact the tenant within ten (10) business days of receipt of the request to schedule a meeting. When the transfer is at the request of the family, the family may be required to provide third party verification of the need for the transfer. Emergency transfer requests that involve VAWA should include either:

1. A statement expressing that the tenant reasonably believes that there is a threat of imminent harm from further violence if the tenant were to remain in the same dwelling unit assisted under CHA's program; OR
2. A statement that the tenant was a sexual assault victim and that the sexual assault occurred on the premises during the 90-calendar-day period preceding the tenant's request for an emergency transfer.

Resident-initiated transfers will only be considered if they are based on necessity and the tenant is in good standing.

**CHA will consider the following categories of unit transfer requests:**

- A. **Emergency Situations:** These transfers are necessary when conditions pose an immediate threat to the life, health, or safety of a family or one of its members. Such situations may involve a tenant who is a victim of domestic violence, dating violence, sexual assault, or stalking, as provided in HUD's regulations at 24 CFR part 5, subpart L (VAWA), defects of the unit or the building in which the unit is located, a health condition of a family member, a hate crime, the safety of witnesses to a crime, or a law enforcement matter particular to the neighborhood.
- B. **Reasonable Accommodation:** These transfers are made when a resident needs to move to a different unit as an accommodation to a resident's disability. This kind of transfer may be requested for a variety of reasons, including, but not limited to: the resident needs to be moved to a ground floor unit because his disability prevents him from climbing stairs; the resident needs a unit with certain physical features and they cannot be provided in his current unit without undue financial and administrative burden to CHA.
- C. **Demolition, Disposition, Revitalization or Rehabilitation:** To facilitate relocation when required for modernization or other management purposes.

- D. **Occupancy Standards:** These transfers are made when resident's family size has changed and the resident's family is now too large or too small for the unit occupied.
- E. **Incentive:** To provide an incentive for families to assist in meeting the Concord Housing Authority's de-concentration goal.

## **PROCESSING OF TRANSFERS**

Approved unit transfer requests will be placed on a waiting list and will be sorted by the above categories and within each category by date and time.

Transfers in category A and B will be housed ahead of any other families, including those on the applicant waiting list. Transfers in category A will be housed ahead of transfers in category B. Transfers in category C, D, and E will be housed ahead of other applicants on the waiting list, but after transfers in categories A and B have been fulfilled.

The Concord Housing Authority will grant or deny the transfer request in writing within ten (10) business days of receiving that request or holding the meeting, whichever is later.

If the transfer is approved, the family's name will be added to the transfer waiting list. Concord Housing will, however, act as quickly as possible to move a tenant who is a victim of domestic violence, dating violence, sexual assault, or stalking to another unit, subject to availability and safety of a unit.

If the transfer is denied, the denial letter will advise the family of their right to utilize the grievance procedure.

## **REJECTION OF A UNIT OFFER**

If the family rejects with good cause, as defined by CHA, any unit offered they would not lose their place on the transfer waiting list. If the transfer is being made at the family's request and they reject the offer of a unit without good cause, the family will be removed from the unit transfer waiting list.

If the transfer is being made at the request of the Concord Housing Authority and the family rejects without good cause, the Concord Housing Authority will take action to terminate their tenancy. If the reason for CHA to request a transfer is because the current unit is too small to meet the Concord Housing Authority's optimum occupancy standards, the family may request in writing to stay in the unit without being transferred so long as their occupancy will not exceed two people per living/sleeping room

If the transfer is being made at the family's request and the rejected offer provides de-concentration incentives, the family will maintain their place on the transfer list and will not otherwise be penalized.

## **TRANSFERRING UNITS**

The family will be allowed seven (7) days from the date they execute the new lease and receive the keys to the new unit to complete their transfer. If after seven (7) days, the family is occupying the new unit and old unit they will be responsible for paying rent for both units. The security deposit originally paid will be transferred to the new unit. If at the move-out inspection of the old unit damages are left above normal wear and tear, the family will be billed in accordance with the Move-Out Schedule of Charges and have thirty (30) days to pay.

## **COST OF THE FAMILY'S MOVE**

The cost of the transfer generally will be borne by the family in the following circumstances:

- A. When the transfer is made at the request of the family;
- B. When the transfer is needed to move the family to an appropriately sized unit, either larger or smaller;
- C. When the transfer is needed because action or inaction by the family caused the unit to be unsafe or uninhabitable.

The cost of the transfer will be borne by the Concord Housing Authority in the following circumstances:

- A. When the transfer is needed in order to carry out rehabilitation activities.
- B. When action or inaction by the Concord Housing Authority has caused the unit to be unsafe or inhabitable.
- C. When the police request the transfer on behalf of the family.

The responsibility for moving costs in other circumstances will be determined on a case by case basis.

## **ELIGIBILITY FOR TRANSFER**

When the transfer is at the request of the family, it will not be approved unless the family is in good standing with the Concord Housing Authority. This means the family must be in compliance with their lease, have all payments, rent charges, payment plans and security deposit paid in full and must pass a housekeeping inspection prior to being added to the transfer waitlist. This requirement may be waived in transfer requests in categories A or B or when the transfer is being requested by Concord Housing.

## **RIGHT OF THE CONCORD HOUSING AUTHORITY IN TRANSFER POLICY**

The provisions listed above are to be used as a guide to insure fair and impartial means of assigning units for transfers. It is not intended that this policy will create a property right or any other type of right for a tenant to transfer or refuse to transfer.

**CONCORD HOUSING AUTHORITY  
APPLICATION FOR UNIT TRANSFER**

APPLICANT: \_\_\_\_\_

CURRENT ADDRESS: \_\_\_\_\_

HOME PHONE: \_\_\_\_\_ WORK PHONE: \_\_\_\_\_

Please check off reason(s) for the transfer request:

- 1. \_\_\_\_\_ Emergency
- 2. \_\_\_\_\_ Reasonable Accommodation
- 3. \_\_\_\_\_ Household Over or Under Housed
- 4. \_\_\_\_\_ Other

Please provide a written explanation of the reason for the Transfer request. Reasonable Accommodation requests should include a statement from a professional knowledgeable of your disability explaining the benefit expected to be derived from the transfer. Use the back of this form if necessary.

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*I hereby certify that the information I have given in this application is true and correct and I understand that any false statement or misrepresentation will result in the cancellation of my transfer application. I authorize the Concord Housing Authority to make inquiries from any parties to verify the accuracy of the information I have provided in this application.*

Tenant-Head of Household: \_\_\_\_\_ Date: \_\_\_\_\_

Tenant-Co-Head of Household: \_\_\_\_\_ Date: \_\_\_\_\_