



Una version en Espanol de este documento esta disponible en la Oficina Central del CHA.

Yon vesyon Kreyol Ayisyen pou dokiman enpotan sa-a disponib nan Biwo Santral CHA.

A versao em Portugues deste documento esta a sua disposic_ao no seu Escritorio de Central de Gerencia do CHA.

RE-ASSIGNMENT OF HOUSING ASSISTANCE PAYMENT (HAP) CONTRACT

Date: _____

For value received, the receipt of which is hereby acknowledged and intending to be legally bound hereby, the undersigned jointly and severally, hereby bargains, sells, assigns and transfers to:

_____ (Assignee), its successors and assigns all monies due or to become due under and all right, title, interest and remedies and obligations in and under the Housing Assistance Payment Contracts for the attached list of units, between the undersigned and the Cambridge Housing Authority, as Obliger, including the right to collect and retain monies due thereon.

All Parties hereby acknowledge the terms of this Assignment and obligations incurred by the Assignee as a result of this Assignment. Effective date of Assignment: _____

To be completed by Assignee (new owner/agent):

Assignee / Payee

Business Address

City State Zip

Social Security Number or Federal Tax ID

Telephone Number

Assignee Signature Date

To be completed by Assignor (previous owner/agent):

Assignor

Business Address

City State Zip

Social Security Number or Federal Tax ID

Telephone Number

Assignor Signature Date

PHA cannot make any payments without third party verification of your Social Security Number or Federal Tax ID. For more information, see the Change in Ownership Checklist.

To be completed by Notary Public:

State of _____

County of _____

Subscribed and sworn to me this _____ day of _____

Signature of Notary Public

To be completed by PHA

Reviewed and approved by Cambridge Housing Authority on _____
Date

Signature of PHA Official

Name of PHA Official (Printed)