

The Housing Authority of the City of North Chicago, Illinois
1440 Jackson Street, North Chicago, Illinois 60064
Phone: (847) 785-4300 Fax: (847) 689-4489

CONTRACT TRANSFER AGREEMENT

I, _____ have purchased/acquired rental property that currently houses a participant on the North Chicago Housing Authority Housing Choice Voucher Program.

In reference to the contract for participant:

Participant Name

Address

I acknowledge that I have received a copy of the current Housing Assistance Payment (HAP) contract and lease in place.

I agree to abide by and honor the terms and conditions of the Housing Assistance Payment Contract between the prior owner and the North Chicago Housing Authority.

I further agree to abide by and honor the terms and conditions of the lease, with the Section 8 addendum attached and incorporated herein, signed by the prior landlord and current tenant.

Please be advised that failure to follow the rules and regulations of the North Chicago Housing Authority and Housing Assistance Payment Contract may result in the cancellation of contracts.

Signature of New Landlord

Date

Contact Number