

RE-ASSI GNMENT OF HOUSI NG ASSI STANCE PAYMENT (HAP) CONTRACT

Date:	Vendor ID:	
For value received, the receipt of which is her undersigned jointly and severally, hereby barga	eby acknowledged and intending to be legally bound here ns, sells, assigns and transfers to:	by, the
under and all right, title, interest and remedie	nee), its successors and assigns all monies due or to become s and obligations in and under the Housing Assistance P een the undersigned and the Philadelphia Housing Autho monies due thereon.	ayment
All Parties hereby acknowledge the terms of this of this Assignment. Effective date of Assignment	s Assignment and obligations incurred by the Assignee as t:	a result
To be completed by Assignee (new owner/ age	nt): To be completed by Assignor (previous owner/ a	agent):
Assignee / Payee	Assignor	
Business Address	Business Address	
City State Zip	Gity State Zip	
Social Security Number or Federal Tax ID	Social Security Number or Federal Tax ID	
Telephone Number	Telephone Number	
Assignee Signature D	ate Assignor Signature Dat	<u>e</u>
PHA cannot make any payments without Federal Tax I D. For more information, see	third party verification of your Social Security Num the Change in Ownership Checklist.	ber or
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 Philadelphia Housing	Authority on	
Signature of PHA Official	Name of PHA Official (Printed)	