



# THE NEW REIDSVILLE HOUSING AUTHORITY

924 Third Avenue, Reidsville, NC 27320  
Phone: 336-589-6510 • Fax: 888-879-8030  
Website: WWW.NEWRHA.ORG

## Transfer of Ownership

The ownership of the below unit address is being transferred to a new owner.

Tenants Name: \_\_\_\_\_ Phone #: \_\_\_\_\_

Unit Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_ Zip: \_\_\_\_\_

New Owners Name: \_\_\_\_\_ Phone #: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_ Zip: \_\_\_\_\_

This form is to transfer the ownership from the current owner \_\_\_\_\_ to the New Owner listed above. This transfer is effective \_\_\_\_\_. The current contract rent amount of \$ \_\_\_\_\_, the lease ending date is \_\_\_\_\_. The remaining terms of the lease remain the same.

As the owner I understand that I will receive payment from the tenant and third-party payment from the Housing Authority. As the tenant I understand that my rent payment is to be sent to the new owner.

Tenant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

New Owner Signature: \_\_\_\_\_ Date: \_\_\_\_\_

RHA Staff Signature: \_\_\_\_\_ Date: \_\_\_\_\_