



WAYNE METROPOLITAN HOUSING AUTHORITY

TENANT VERIFICATION OF MOVE OUT

Tenant Name: _____

Address of unit you're moving out of: _____

Vacate unit date: _____

Date keys were returned: _____

Tenant Signature: _____ Date: _____

Landlord Signature: _____ Date: _____

This form is required to be signed by the landlord and the tenant before assistance can begin for the new unit.

Staff _____

11/24/14