



HOUSING AUTHORITY OF YAMHILL COUNTY

ASSIGNMENT OF CONTRACT/LEASE

This Assignment of Contract/Lease is effective _____ with regard to the following property:

Tenant: «Tenant»
Unit: «TenantAddress», «TenantCity» , OR

For valuable consideration, the **ASSIGNOR** herein, the **OWNER/LANDLORD** in the Contract/Lease dated _____ of the above described property, hereby assigns and sets over to, the **ASSIGNEE** herein, the **ASSIGNOR'S** entire interest in and to the Contract/Lease and the rent therein provided.

The **ASSIGNEE** hereby acknowledges the receipt of this assignment and agrees to be bound by all the terms and conditions of the Contract/Lease.

ASSIGNOR:

Name:
Signature:
Signature:
Date:

ASSIGNEE:

Name:
Signature:
Signature:
Date:
Address:
City, State, and Zip:
Phone Number:
Tax I.D. or Social Security Number:

The Housing Authority of Yamhill County hereby consents to the above described assignment of Contract/Lease.

Housing Authority Staff Signature

Title

Date

Assigned LL#

Housing Authority of Yamhill County
135 North East Dunn Place • P.O. Box 865
McMinnville, OR 97128-0865
Phone: (503) 434-6571 FAX: (503) 472-4376

April 19, 2005

«LLFirstName» «LLLastName»
«LLAddress1»
«LLCity» «LLState» «LLZip»

,

RE: «TenantAddress»
 «TenantCity», OR

Dear Owner:

We understand that the lease and contract for «Tenant» at «TenantAddress», «TenantCity» has been transferred to you. In order for the Housing Authority of Yamhill County to release rental assistance payments to you, the enclosed documents need completed and returned.

1. Assignment of Contract/Lease. Please complete where indicated as Assignee.
2. Basic Information. Complete this form in its entirety.
3. W-9. Please complete, sign and date.

In addition to the above documents, we require a copy of the closing document listing the buyer, seller, and the property address.

Your prompt return of the above required items will expedite the release of payments. Should you have any questions, please feel free to contact at 434-6571, ext..«Extension»

Sincerely,

«Worker»
Housing Specialist

/am
enclosures



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HOUSING AUTHORITY OF YAMHILL COUNTY

BASIC INFORMATION

Print or Type name of OWNER: _____

OWNER Address _____

City, State, Zip _____

OWNER's Phone Number _____

Print/type MANAGER/AGENT _____

MANAGER/AGENT Address _____

City, State, Zip _____

MANAGER/AGENT Phone _____

ON-SITE MGR: _____

ON-SITE MGR Phone: _____

MAKE CHECKS PAYABLE TO _____

MAIL CHECKS TO: _____

To whom should correspondence be sent? _____

Signature of AUTHORIZED OWNER/AGENT: _____