



Pittsfield Housing Authority
65 Columbus Ave, Pittsfield, MA.01201
(413) 443-5936
Fax (413) 443-7294
www.Pittsfieldhousing.org

Move-Out Policy

1. This lease may be terminated by Tenant at any time by giving thirty (30) days advance written notice to PHA.
2. **You or your representative** are responsible for removing **all** personal belongings from the unit.
3. Apartment must be left empty and in clean condition (including refrigerator, cabinets, closets and front and back doorways) and should be broom swept.
4. Applicable to only the Elderly/Disabled Apartments - **Cable box** must remain in the apartment. Do not return to the office.
5. A move-out inspection *may be pre-scheduled when notice is given*, but *must* be scheduled at least 7 days before move-out by calling **413-443-7100** or **1-617-591-1068**. Move-out inspections will be scheduled on one of the last (2) business days of the move-out month, or on the 1 business day after the move-out, between 1pm-3pm.
6. If you are not prepared to vacate and surrender your keys at the scheduled move-out inspection, please call and reschedule. All keys must be surrendered at the conclusion of the move out inspection. Failing to prepare to vacate and return keys may result in additional days' rent being accrued. Keys will not be accepted without a completed move-out inspection.
7. You will be charged for any damages beyond normal wear and tear, and failure to remove/clean upon move out as necessary
8. Failure to adhere to the Move-Out Policy—including, but not limited to, leaving the unit in poor condition, abandoning personal belongings, failing to return keys, or failing to provide proper notice—will result in charges being assessed to my account. These charges will be pursued to the fullest extent allowed under local, state, and federal law.
9. Unresolved accounts or outstanding charges *will not be ignored*. The Pittsfield Housing Authority will actively pursue collection through legal means, and such debts may be reported to credit bureaus and collection agencies. Additionally, failure to comply with the Move-Out Policy or to settle outstanding balances may result in **ineligibility for future housing assistance programs**, including but not limited to Section 8 vouchers and other federal/state subsidized housing programs—both within and beyond Pittsfield.

30-Day Move-Out Notice Form

Tenant Name: _____
Property: _____ **Unit #:** _____
Current Address: _____
City, State, ZIP: _____
Phone Number: _____ **EMAIL:** _____

Planned Move-Out Date (Minimum 30-Day Notice Required): ____ / ____ / ____

New Forwarding Address:
Street Address: _____
City, State, ZIP: _____

Reason for Move-Out: _____

Emergency Contact Information:

Name: _____
Phone Number: _____
Address: _____
City, State, ZIP: _____

By signing below, I affirm that I have received, read, and understand the Pittsfield Housing Authority's Move-Out Policy and the consequences of non-compliance.

Tenant Signature: _____ **Date:** _____

Print Name: _____

I would like to pre-schedule a move-out inspection for: _____ @ _____ PM
(Inspections are scheduled on the last two business days of the month or 1st business day of the month, 1 pm - 3 pm)

PHA Staff Certification

I certify that I have reviewed the Move-Out Policy in detail with the above-named tenant and have answered all questions related to the policy and its consequences.

PHA Staff Name (Printed): _____
PHA Staff Signate: _____
Date: _____