

**MUTUAL AGREEMENT TO TERMINATE OCCUPANCY AGREEMENT &
HOUSING ASSISTANCE PAYMENTS (HAP) CONTRACT
(Current Participant's)**

I _____, as owner, agree to terminate the Occupancy.

Agreement and HAP Contract for my tenant_____.

Who currently resides at _____.

This termination shall be effective on _____.

Both parties are notified that Housing Assistance Payments by the Cambridge Housing Authority (CHA) for this unit shall end on this date, if an extension is required, a written request should be submitted to the CHA as soon as possible. Any HAP overpaid to the owner should be returned within a reasonable amount of time to the CHA.

The owner waives the right to seek any vacancy loss claim after the effective date of this agreement. It is advisable that the tenant make arrangements with the owner to return keys and request a final inspection of the unit to see if there are damages for which the tenant is responsible.

*The CHA is **NOT** responsible for damages caused by the tenant nor for keys not returned by the tenant to the Owner.

*The Owner further acknowledges that the tenant [] **IS** [] **IS NOT**
in good standing.

This agreement is entered into voluntarily by both parties. Both parties understand and agree to all of the above points. By signing this agreement, the owner waives any vacancy loss claim after the effective date of this agreement.

Owner's Signature:_____ Date:_____

Tenant's Signature:_____ Date:_____

Return to: Cambridge Housing Authority /Leased Housing Programs
675 Mass Ave 2nd Floor
Fax :617-520-6420 Phone: 617-497-4040
TDD 800-545-1833 x112
www.Cambridge-Housing.org