



HOUSING CHOICE VOUCHER PROPERTY OWNER CERTIFICATION (aka Section 8)

Owner/Agent's Name _____

Address of Assisted Unit: _____

Ownership of Assisted Unit

I certify that I am the legal owner or the legally designated agent for the above referenced unit, and the prospective tenant has no ownership interest in this dwelling unit whatsoever.

Approved Residents of Assisted Unit

I understand that the family members listed on the dwelling lease agreement as approved by the Housing Authority are the only individuals permitted to reside in the unit. I also understand that I am not permitted to live in the unit while I am receiving assistance payments.

Housing Quality Standards

I understand my obligations in compliance with the Housing Assistance Payments Contract to perform necessary maintenance so the unit continues to comply with Housing Quality Standards.

Tenant Payments

I understand that the amount of the tenants' portion of the contract rents is determined by the Housing Authority, and that it is illegal to charge any additional amounts for rent which have not been specifically approved by the Housing Authority.

Security Deposit

I understand that the amount of security deposit cannot exceed that of private market or in excess of amounts charged to unassisted tenants, and that it is illegal to charge any additional amounts for security deposits that have not been specifically approved by the Housing Authority.

Reporting Vacancies to the Housing Authority

I understand that if the assisted unit becomes vacant, I am responsible to notify the Housing Authority immediately in writing.

Administrative and Criminal Actions for Intentional Violations

I understand that failure to comply with the terms and responsibilities of the Housing Assistance Payments contract is grounds for termination of participation in the Housing Choice Voucher program. I understand that knowingly falsifying material facts is a violation of State and Federal criminal law.

Housing Authority Disapproval of Owner

I understand the Housing Authority must not approve a unit for lease under the Housing Choice Voucher Program if the owner of the unit is the parent, child, grandparent, grandchild, sister, or brother of any member of the family, unless the Housing Authority determines that approving the unit would provide reasonable accommodation for a family member who is a person with disabilities. I hereby acknowledge that I have no familial relation as stated above with the tenants of this unit.

____ Date _____
Signature of Property Owner/Agent

___ Signed in presence of HA staff [HA staff initials _____] OR ___ Signature notarized

WARNING---Title 18 US Code Section 1001 states that a person is guilty of a felony for knowingly and willingly making a false or fraudulent statement to any Department or Agency of the United States. State law may also provide penalties for false or fraudulent statements.