

## Hancock Metropolitan Housing Authority Housing Choice Voucher Briefing

Serving Hancock, Hardin, Putnam, and Wyandot County

August 2023

## Why do I have to do this Voucher Briefing?

When a family (you!) is determined to be eligible for the Housing Choice Voucher (HCV) program, the PHA (us) must ensure that the family (you) fully understand the way the program operates and the family's obligations under the program.

This is accomplished through an oral (now visual) briefing and a *Participant Briefing Packet* containing written documentation of information the family (you) needs to know.

Once the family (you) is fully informed of the program's requirements, the PHA (us) can issue the family (you) a Voucher.

# You will get your Participant Briefing Packet when you come into our office to pick up your Voucher & RTA Packet.

## Participant Briefing Packet

Please review this packet & keep it for future reference.



Hancock Metropolitan Housing Authority

1800 N Blanchard Street- Suite #114 Findlay, Ohio 45840 Phone: 419-424-7848

Fax: 419-424-7831

www.hancockmetro.com

## Meet our Staff:

<u>Name</u>	<u>Title</u>	<u>Picture</u>	Phone Ext.	<u>Email</u>
Casey Ricker	Executive Director		x 139	cricker@hancockmetro.com Cell #: 419-420-5076
Abby Mercer	Program Manager Clients: G-H-I-J		x174	amercer@hancockmetro.com
Vickie Davenport Clients: A-l	Occupancy Specialist B-C-D-E-F, K-L-M-N-O, Z		x178	vdavenport@hancockmetro.com
Jessica Murdock Clients	Occupancy Specialist s: P-Q-R-S-T-U-V-W-X-Y		x143	jmurdock@hancockmetro.com Cell #: 567-331-3202
Jo Lynn Sharrett	Receptionist		x137	jsharrett@hancockmetro.com
Dave Stultz	HQS Inspector		x142	dstultz@hancockmetro.com Cell #: 419-420-5079

Now that you have met the entire HMHA Team,

Please write down the name of your assigned caseworker:

Vickie- if your last name begins with A-B-C-D-E-F, K-L-M-N-O, or Z

Abby- if your last name begins with G-H-I-J

Jessica- if your last name begins with P-Q-R-S-T-U-V-W-X-Y

As you go through this presentation, please write down any questions you may have, so you can ask your caseworker after!

Also, feel free to take notes!

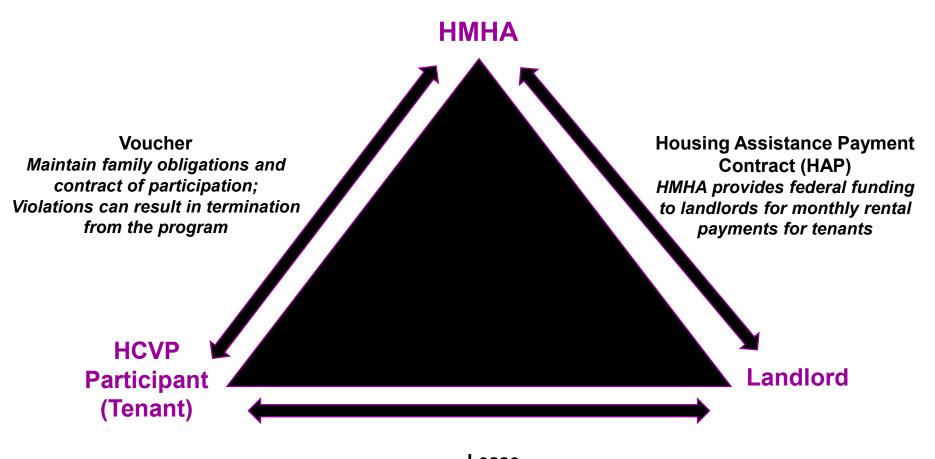
## Description of the Housing Choice Voucher Program

The Housing Choice Voucher Program was established to subsidize the rent for very low-income families in the private rental market. Families must meet HUD and HMHA eligibility requirements to receive assistance. Under the program, eligible families select a rental unit, and HMHA subsidizes their rent. Families generally pay about 30% of their adjusted monthly income toward housing expenses (rent and utilities). The subsidy amount may be recalculated any time the family's income changes. Family eligibility and subsidy calculations must be re-examined annually, and unit eligibility must be re-certified annually.

A family can utilize the voucher in the unit they currently live in (provided the owner/landlord is willing to participate in the program) or move to a unit anywhere in our jurisdiction (Hancock, Hardin, Putnam, or Wyandot counties).

A family can also request to move anywhere in the U.S. that has a Housing Authority administering the HCV Program (provided their physical address at the time of application is in our jurisdiction. If not, the family must lease up in our jurisdiction for a year before they will be eligible.) This is called Portability.

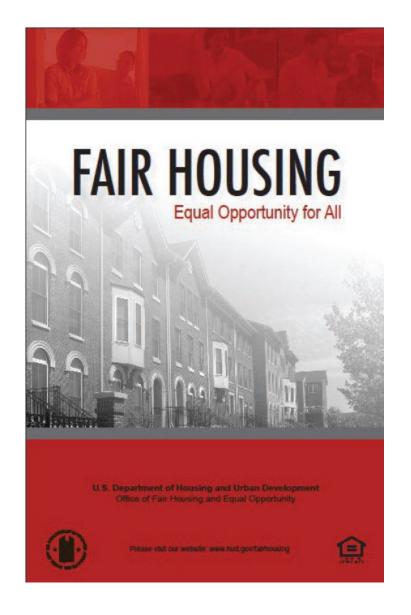
## The Partnership between the Tenant (you), HMHA, and the Owner

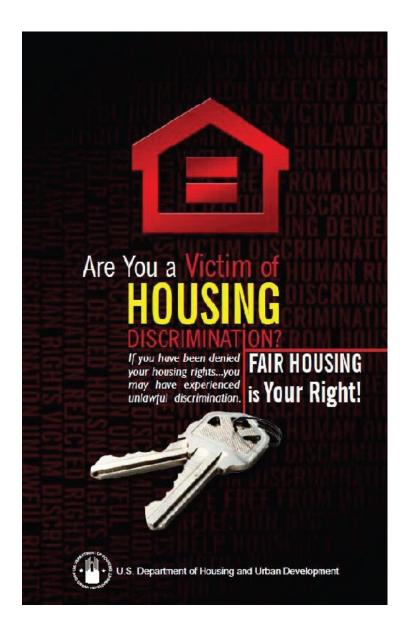


Lease
Contain lease terms, time period of the agreement, and rental
amount; Violations can result in termination of residency.

## Your Rights and Responsibilities

## Fair Housing





## Fair Housing

It is unlawful to discriminate in housing based on these factors:

- Race
- Color
- National Origin
- Religion
- Sex
- Familial status (including children under the age of 18 living with parents or legal custodians; pregnant women and people securing custody of children under 18)
- Disability

Findlay Hope House provides Fair Housing services in our area. Their phone number is 419-427-2848.

## Violence Against Women Act

CERTIFICATION OF U.S. Department of Housing DOMESTIC VIOLENCE, DATING VIOLENCE, EXUAL ASSAULT, OR STALKING, AND ALTERNATE DOCUMENTATION

OMB Approval No. 2577-0286 Exp. 06/30/2017

Purpose of Form: The Violence Against Women Act ("VAWA") protects applicants, tenants, and program participants in certain HUD programs from being evicted, denied housing assistance, or terminated from housing assistance based on acts of domestic violence, dating violence, sexual assault, or stalking against them. Despite the name of this law, VAWA protection is available to victims of domestic violence, dating violence, sexual assault, and stalking, regardless of sex, gender identity, or sexual orientation.

Use of This Optional Form: If you are seeking VAWA protections from your housing provider, your housing provider may give you a written request that asks you to submit documentation about the incident or incidents of domestic violence, dating violence, sexual assault, or stalking.

In response to this request, you or someone on your behalf may complete this optional form and submit it to your housing provider, or you may submit one of the following types of third-party documentation:

- (1) A document signed by you and an employee, agent, or volunteer of a victim service provider, an attorney, or medical professional, or a mental health professional (collectively, "professional") from whom you have sought assistance relating to domestic violence, dating violence, sexual assault, or stalking, or the effects of abuse. The document must specify, under penalty of perjury, that the professional believes the incident or incidents of domestic violence, dating violence, sexual assault, or stalking occurred and meet the definition of "domestic violence," "dating violence," "sexual assault," or "stalking" in HUD's regulations at 24 CFR 5.2003.
- (2) A record of a Federal, State, tribal, territorial or local law enforcement agency, court, or administrative agency; or
- (3) At the discretion of the housing provider, a statement or other evidence provided by the applicant or

Submission of Documentation: The time period to submit documentation is 14 business days from the date that you receive a written request from your housing provider asking that you provide documentation of the occurrence of domestic violence, dating violence, sexual assault, or stalking. Your housing provider may, but is not required to, extend the time period to submit the documentation, if you request an extension of the time period. If the requested information is not received within 14 business days of when you received the request for the documentation, or any extension of the date provided by your housing provider, your housing provider, your housing provider does not need to grant you any of the VAWA protections. Distribution or issuance of this form does not serve as a written request for certification.

Confidentiality: All information provided to your housing provider concerning the incident(s) of domestic violence, dating violence, sexual assault, or stalking shall be kept confidential and such details shall not be entered into any shared database. Employees of your housing provider are not to have access to these details unless to grant or deny VAWA protections to you, and such employees may not disclose this information to any other entity or individual, except to the extent that disclosure is: (i) consented to by you in writing in a time-limited release; (ii) required for use in an eviction proceeding or hearing regarding termination of assistance; or (iii) otherwise required by applicable law.

## Violence Against Women Act

- The Violence Against Women Act (VAWA) provides protections for victims of domestic violence, dating violence, sexual assault, or stalking. <u>VAWA</u> <u>protections are not only available to women but are available equally to all</u> <u>individuals regardless of sex, gender identity, or sexual orientation</u>.
- If you are receiving assistance through HMHA, you may not be denied assistance, terminated from participation, or be evicted from your rental housing because you are or have been a victim of domestic violence, dating violence, sexual assault, or stalking.
- Upon your request, HMHA may permit you to move to another unit and keep your assistance. To approve a request, HMHA may ask you to provide documentation that you are claiming rights under VAWA.

## Is Fraud Worth It?



### APPLYING FOR HUD HOUSING ASSISTANCE?

## THINK ABOUT THIS... IS FRAUD WORTH IT?

#### Do You Realize...

If you commit fraud to obtain assisted housing from HUD, you could be:

- Evicted from your apartment or house.
- Required to repay all overpaid rental assistance you received.
- Fined up to \$10,000.
- Imprisoned for up to five years.
- Prohibited from receiving future assistance.
- Subject to State and local government penalties.

#### Do You Know...

You are committing fraud if you sign a form knowing that you provided false or misleading information.

The information you provide on housing assistance application and recertification forms will be checked. The local housing agency, HUD, or the Office of Inspector General will check the income and asset information you provide with other Federal, State, or local governments and with private agencies. Certifying false information is fraud.

#### So Be Careful!

When you fill out your application and yearly recertification for assisted housing from HUD make sure your answers to the questions are accurate and honest. You must include:

All sources of income and changes in income you or any members of your household receive, such as wages, welfare payments, social security and veterans' benefits, pensions, retirement, etc.

Any money you receive on behalf of your children, such as child support, AFDC payments, social security for children, etc.

form HUD-1141 (12/2005)

## Is Fraud Worth It?

- If you commit fraud to obtain housing, you could be evicted, required to repay housing assistance, fined, imprisoned, and prohibited from receiving future assistance.
- You must report all income sources and any income changes for all members of your household.
- You must report the names of everyone, adults and children, relatives and non-relatives, who are living with you and make up your household.

## **Enterprise Income Verification**

(EIV)



U.S. Department of Housing and Urban Development

Office of Public and Indian Housing (PIH)



RENTAL HOUSING INTEGRITY IMPROVEMENT PROJECT

### What You Should Know About EIV

A Guide for Applicants & Tenants of Public Housing & Section 8 Programs

#### What is EIV?

The Enterprise Income Verification (EIV) system is a web-based computer system that contains employment and income information of individuals who participate in HUD rental assistance programs. All Public Housing Agencies (PHAs) are required to use HUD's EIV system.

### What information is in EIV and where does it come from?

HUD obtains information about you from your local PHA, the Social Security Administration (SSA), and U.S. Department of Health and Human Services (HHS).

HHS provides HUD with wage and employment information as reported by employers; and unemployment compensation information as reported by the State Workforce Agency (SWA).

SSA provides HUD with death, Social Security (SS) and Supplemental Security Income (SSI) information.

#### What is the EIV information used for?

Primarily, the information is used by PHAs (and management agents hired by PHAs) for the following purposes to:

- Confirm your name, date of birth (DOB), and Social Security Number (SSN) with SSA.
- Verify your reported income sources and amounts.
- Confirm your participation in only one HUD rental assistance program.
- Confirm if you owe an outstanding debt to any PHA.
- Confirm any negative status if you moved out of a subsidized unit (in the past) under the Public Housing or Section 8 program.
- Follow up with you, other adult household members, or your listed emergency contact regarding deceased household members.

EIV will alert your PHA if you or anyone in your household has used a false SSN, failed to report complete and accurate income information, or is receiving rental assistance at another address. Remember, you may receive rental assistance at only one home!

EIV will also alert PHAs if you owe an outstanding debt to any PHA (in any state or U.S. territory) and any negative status when you voluntarily or involuntarily moved out of a subsidized unit under the Public Housing or Section 8 program. This information is used to determine your eligibility for rental assistance at the time of application.

The information in EIV is also used by HUD, HUD's Office of Inspector General (OIG), and auditors to ensure that your family and PHAs comply with HUD rules

Overall, the purpose of EIV is to identify and prevent fraud within HUD rental assistance programs, so that limited taxpayer's dollars can assist as many eligible families as possible. EIV will help to improve the integrity of HUD rental assistance programs.

### Is my consent required in order for information to be obtained about me?

Yes, your consent is required in order for HUD or the PHA to obtain information about you. By law, you are required to sign one or more consent forms. When you sign a form HUD-9886 (Federal Privacy Act Notice and Authorization for Release of Information) or a PHA consent form (which meets HUD standards), you are giving HUD and the PHA your consent for them to obtain information about you for the purpose of determining your eligibility and amount of rental assistance. The information collected about you will be used only to determine your eligibility for the program, unless you consent in writing to authorize additional uses of the information by the PHA.

Note: If you or any of your adult household members refuse to sign a consent form, your request for initial or continued rental assistance may be denied. You may also be terminated from the HUD rental assistance program.

#### What are my responsibilities?

As a tenant (participant) of a HUD rental assistance program, you and each adult household member must disclose complete and accurate information to the PHA, including full name, SSN, and DOB; income information; and certify that your reported household composition (household members), income, and expense information is true to the best of your knowledge.

February 2010

## Enterprise Income Verification (EIV)

- Enterprise Income Verification (EIV) is a web-based system that contains employment and income information of individuals who participate in HUD rental assistance programs.
- HMHA will use EIV to identify if you or anyone in your household has used a fake social security number, failed to report true and accurate information, or is receiving rental assistance at another address.
- Knowingly providing false, inaccurate, or incomplete information is fraud and a crime.

## **Informal Review**

If you are not a program applicant (not currently receiving assistance), you have a right to request an Informal Review if you disagree with HMHA's decision. You can request an Informal Review for reasons including, but not limited to:

- You did not provide the required residency documentation.
- You did not respond to the initial request for verification.
- You did not supply the required paperwork for program participation.
- You and/or someone in your household engaged in prohibited criminal activity.
- You have an outstanding debt to HMHA or another PHA.
- You were unable to be contacted by mail.

Examples of when an Informal Review is not granted include, but are not limited to:

- You applied to a closed waiting list;
- Your income exceeds the program's annual gross income limit;
- Your voucher has expired.

## Informal Hearing

If you are a program participant, you have the right to request an Informal Hearing if you disagree with HMHA's decision. You can request an Informal Hearing for reasons including, but not limited to:

- You and/or someone in the household engaged in prohibited criminal activity.
- You failed to pay for tenant-supplied utilities, maintain tenant-supplied appliances, or repair damages.
- You failed to permit access for a Housing Quality Standards inspection.
- You committed serious and/or repeated violations of the lease;
- You failed to provide true and complete information to HMHA necessary to administer the HCV program.
- You failed to report income.
- You abandoned/vacated the unit with no notice.
- You have been evicted.
- You are delinquent on a repayment agreement.

## The Owner's Responsibilities

- Screen the family before executing the lease
- Sign and comply with the Housing Assistance Payment (HAP) contract and local housing laws
- Maintain the dwelling unit in accordance with Housing Quality Standards (HQS)
- Collect the family's share of rent and do not request additional rent that exceeds the HMHAapproved rent
- All rent increase requests must be submitted to HMHA prior to charging additional rent. The rent increase, if approved, will be effective no earlier than 60 days and the next 1<sup>st</sup> of the month from the date the request for rent increase was received.
- Follow federal laws which prohibit discrimination against an individual or family
- Contact HMHA when there is an unauthorized family move or a deceased tenant
- Contact HMHA when you suspect an unauthorized person living in the unit or if there are other concerns you wish to be investigated
- Enforce the terms of the lease agreement

## Your Responsibilities

- Find suitable housing
- Submit complete, accurate, and timely information and documentation to HMHA
- Comply with the annual reexamination of family income and composition
- Comply with requests for additional information
- Cooperate with HMHA for all inspections
- Take good care of your housing unit
- Abide by the terms of your lease agreement
- Keep tenant-responsible utilities paid and in service
- Report all household changes to HMHA in writing within 10 business days of the change
- Comply with your family obligations

## Your Family Obligations

In the HCV program, the family (you) have specific responsibilities. These responsibilities are called <u>family obligations</u>. You can lose your voucher if you do not comply with or violate family obligations.

(The Family Obligations are also listed on the Voucher)

## Please read all three pages of the

Family Obligations & Reporting Requirements we sent you:





#### FAMILY OBLIGATIONS & REPORTING REQUIREMENTS

#### POLICY ACKNOWLEDGEMENT

(Please read ALL pages of this form carefully)

The guidelines outlined in this document are provided to help you comply with the rules and regulations of the Hancock Metropolitan Housing Authority (HMHA) Housing Choice Voucher (HCV) Program. To provide rental assistance to as many eligible families as possible, all participants in this HUD-funded program must properly utilize government funds and follow policy requirements. Fraud, willful misrepresentations, or intent to deceive about reporting requirements of the HCV Program are criminal acts and may be prosecuted in a court of law.

#### ACTS OF FRAUD IN CONNECTION WITH HOUSING ASSISTANCE WILL RESULT IN TERMINATION FROM THE PROGRAM.

Please read the family obligations and reporting requirements carefully. Your signature on this document serves as verification that you have read and understand the information contained within this document. If you have any questions regarding program requirements, please don't hesitate to contact your Housing Specialist at (419) 424-7848.

#### YOUR FAMILY OBLIGATIONS:

The family obligations listed below are in accordance with the Code of Federal Regulations (CFR) Title 24, 982.551, and the Hancock Metropolitan Housing Authority (HMHA) Administrative Plan:

- The family must supply any information that HMHA or HUD determines to be necessary, including submission of required evidence of citizenship or eligible immigration status.
- The family must supply any information requested by HMHA or HUD for use in a regularly scheduled reexamination or interim reexamination of family income and composition.
- The family must disclose and verify social security numbers and sign and submit consent forms for obtaining information.
- Any information supplied by the family must be true and complete.
- The family is responsible for any Housing Quality Standards (HQS) breach by the family, including but not limited to failure to pay tenant-provided utilities or appliances or damages to the dwelling unit or premises beyond normal wear and tear caused by any member of the household or guest.

#### HMHA Policy

Damages beyond normal wear and tear will be considered damages that could be assessed against the security deposit.

- The family must allow HMHA to inspect the unit at reasonable times and after reasonable notice.
- 7. The family must not commit any serious or repeated violation of the lease.

#### HMHA Policy

HMHA will determine if a family has committed serious or repeated violations of the lease based on available evidence, including but not limited to a court-ordered eviction or an owner's notice to evict, police reports, and affidavits from the owner, neighbors, or other credible parties with direct knowledge.

Effective 5/1/2023

## Page 2:

Serious and repeated lease violations will include, but not be limited to, nonpayment of rent, disturbance of neighbors, destruction of property, living or housekeeping habits that cause damage to the unit or premises, and criminal activity. Generally, the criterion to be used will be whether or not the reason for the eviction was the fault of the tenant or guests. Any incidents of criminal activity related to domestic violence, dating violence, sexual assault, or stalking will not be construed as serious or repeated lease violations by the victim [24 CFR 5.2005(c)(1)].

 The family must notify HMHA and the owner before moving out of the unit or terminating the lease

#### HMHA Policy

The family must comply with lease requirements regarding written notice to the owner. The family must provide written notice to HMHA at the same time the owner is notified.

- The family must promptly give HMHA a copy of any owner eviction notice.
- The family must use the assisted unit for residence by the family. The unit must be the family's only residence.
- 11. The composition of the assisted family residing in the unit must be approved by HMHA. The family must promptly notify HMHA in writing of the birth, adoption, or court-awarded custody of a child. The family must request HMHA's approval to add any other family member as an occupant of the unit.

#### HMHA Policy

The request to add a family member must be submitted in writing and approved before the person moves into the unit. The HMHA also requires the landlord's written approval to add someone 18 or older. HMHA will determine the eligibility of the new member in accordance with the policies in Chapter 3 of the HMHA Administrative Plan.

- The family must promptly notify HMHA in writing if any family member no longer lives in the unit.
- 13. If the HMHA has given approval, a foster child or a live-in aide may reside in the unit. HMHA has the discretion to adopt reasonable policies concerning residency by a foster child or a live-in aide and to define when HMHA consent may be given or denied.
- The family must not sublease the unit, assign the lease, or transfer the unit.

#### HMHA Policy

Subleasing includes receiving payment to cover rent and utility costs by a person living in the unit who is not listed as a family member.

- The family must supply any information requested by HMHA to verify that the family is living in the unit or information related to the family's absence from the unit.
- The family must promptly notify HMHA when the family is absent from the unit.

#### HMHA Policy

Notice is required under this provision when any family member will be absent from the unit for an extended period. An extended period is defined as any period greater than 60 calendar days. Written notice must be provided to HMHA at the start of the extended absence.

- The family must pay utility bills and provide and maintain any appliances that the owner is not required to provide under the lease.
- The family must not own or have any interest in the unit (other than in a cooperative and owners
  of a manufactured home leasing a manufactured home space).
- The members of the family must not commit fraud, bribery, or any other corrupt or criminal act in connection with the program.

2 Effective 5/1/2023

After you have read all three pages, Please complete the bottom section on page 3:

- 20. Family members must not engage in drug-related criminal activity, violent criminal activity, or other criminal activity that threatens the health, safety, or right to peaceful enjoyment of other residents and persons residing in the immediate vicinity of the premises. (See Chapter 12 of HMHA's Administrative Plan for HUD and HMHA policies related to drug-related and violent criminal activity.)
- Members of the household must not engage in the abuse of alcohol in a way that threatens the health, safety, or right to peaceful enjoyment of the other residents and persons residing in the immediate vicinity of the premises. (See Chapter 12 of HMHA's Administrative Plan for a discussion of HUD and HMHA policies related to alcohol abuse.)
- An assisted family or member of the family must not receive HCV program assistance while
  receiving another housing subsidy for the same unit or a different unit under any other federal,
  state, or local housing assistance program.
- 23. A family must not receive HCV program assistance while residing in a unit owned by a parent, child, grandparent, grandchild, sister, or brother of any member of the family unless HMHA has determined (and has notified the owner and the family of such determination) that approving rental of the unit, notwithstanding such relationship, would provide reasonable accommodation for a family member who is a person with disabilities. [Form HUD-52646, Voucher]

#### REPORTING REQUIREMENTS:

- CHANGES IN INCOME: Participants must report ALL changes in household income within 10 days of the occurrence. Changes MUST be reported in WRITING by completing a Household Information Change Form.
- REPORT ALL HOUSEHOLD MEMBERS: Identify all individuals residing in the unit and/or any individuals expected to reside in the unit.
- NO UNAUTHORIZED PERSONS may reside in the unit without prior written approval from HMHA and the owner. No unauthorized person may receive any mail at the assisted unit address.
- GUESTS. HCV participants are allowed to have visitors. Guests can stay up to 14 days in a row, no more than 90 days in a calendar year. (BUT- Depending on your lease agreement, it could be less)

BY SIGNING THIS DOCUMENT, I ACKNOWLEDGE THAT I UNDERSTAND THE HCV PROGRAM FAMILY OBLIGATIONS AND THE REPORTING REQUIREMENTS. I AGREE TO FOLLOW THE FAMILY OBLIGATIONS AND REPORT ANY OF THE ABOVE-LISTED CHANGES TO HMHA WITHIN TEN (10) DAYS OF THE CHANGE OR OCCURRENCE. I UNDERSTAND THAT FAILURE TO FOLLOW THE ABOVE RULES MAY RESULT IN THE TERMINATION OF MY HCV RENTAL ASSISTANCE. I UNDERSTAND I CAN BE FINED UP TO \$10,000 OR IMPRISONED FOR UP TO FIVE YEARS IF I FURNISH FALSE OR INCOMPLETE INFORMATION.

Print Name:			
Signature:	Head of Household	Date:	
Signature:	Spouse/Co-Head	Date:	

Effective 5/1/2023

## Most common violations that result in the termination of rental assistance:

- Didn't report income changes
- Didn't turn in the paperwork that their caseworker requested from them
- Moved out and didn't tell us first ← this happens a lot for some reason!? Why?
- Didn't follow the rules of their Lease Agreement
- Got involved in illegal drug or violent criminal activity

### **WARNING**:

If you are terminated from the program, you will **NOT** be eligible for **1 YEAR**.

If you re-apply, you will be **DENIED**.

## Reporting Changes in Family Composition and Income

You <u>must</u> report all household income and/or composition changes within <u>10</u> <u>business days</u> of the occurrence to HMHA.

### These changes must be in writing and include but are not limited to

- a. Change in household income, including additional income added to the household.
- b. All income of minor children in the household, whether earned from employment, received from a government agency, child support, or paid to a payee on behalf of the minor child.
- c. A family member leaves the household.

HMHA must approve the addition of family members or others to the household and the owner before the change occurs.

## (Continued)

## Reporting Changes in Family Composition and Income

You **must** promptly report all changes, within 10 business days, such as but not limited to changes due to marriage, death, adoption, birth, court custody awards, persons moving in or out of the household, etc.

You may not allow persons, not approved by HMHA to be part of your household, to use the assisted address to reside in or use the assisted address for mail or as a temporary or permanent address, or for any other purpose.

You must report marriages by any member in your household, whether the spouse will reside in the assisted unit or not. You must report the incarceration of any household member.

## **Examples of Changes:**

- Started working
- Stopped working
- Unemployment benefits (started or stopped)
- Increase/Decrease of Social Security/SSI benefits
- Child support payments changed
- Household Composition (removing or adding someone)
- Had a baby
- Going to BioLife (this is income)
- Receiving Family Contributions
   (someone outside your household pays for your bills or living expenses)

How to Report: Fill out a Household Information Change Form

When to Report: Within 10 business days of the occurrence/change

## Income Changes: (Increase or Decrease)

Any time your family's income changes (increase or decrease), you must report it to HMHA.

**How to Report:** Fill out a Household Information Change Form

When to Report: Within 10 business days from the date the change occurred

If you fail to report changes to your household composition (who is living in your unit) or changes in your household income, you may lose your housing assistance, or you may have to repay money to HMHA.

## The Household Information **Change Form**

You will use this form **A LOT**, so take a couple of minutes to look over it.

This form is available outside our lobby and on our website (www.hancockmetro.com)

> Please note that your caseworker does have up to 60 days to process changes

#### HOUSEHOLD INFORMATION CHANGE FORM



You are required to report ALL changes in writing within 14 days of the change When possible, please provide supporting documentation to verify the change(s) you are reporting!

Head of Household		Phone #
Present Address		
Tell us what changed: (chec	ck all that apply)	
☐ Income Increase ☐ Inco	me Decrease	b Ended Changed Employers
Phone Number Add	ress Change Child Support Change	e (CIRCLE ONE- Increased OR Decreased?)
Household Composition- Add	ding or Removing a household member?** (see	below)
Other (please explain)		·
NOW- LIST ALL <u>CURRE</u>	<u>ENT</u> INCOME IN YOUR HOUSE	EHOLD (the income you <u>DO</u> have):
Name of Family Member	Income Source	Amount of Income
List each family member who receives income from any source	Name of your Employer (or temp agency), Social Security, SSI, Child Support, etc	If receiving a wage- List Hourly Rate and Hours Worked Per Week or Weekly/biweekly gross earning For all other income types, list amount per month (or week)
		\$per hour,hours/week
**For Household Composition	on Change(s): (must circle one)	→ REMOVING OR ADDING ??
Name of Household Member(s) bein	, , ,	
		If yes, list amount per month \$
Do you pay for a baby-sitter while yo	ou work or attend school? If yes, list	amount you pay \$ per
	vider	
	1001 of Title 18 of the U.S. Code makes it a <u>CRIM</u> <u>18</u> to any department or agency of the United States	INAL OFFENSE to make willful false statements or as to any matter within its jurisdiction.
I certify that the information	reported in this document is correct and co	omplete to the best of my knowledge.
SIGNATURE OF	HEAD OF HOUSEHOLD	DATE
Paturn this completed form to HMUA's of	Sea located at 1800 N Planchard St. Suita 114. Findley. C	OH 45840 // Fay #: 419-424-7831 // hmhamain@hancockmetro.com

Revised 7/2020

After this form is submitted, it could take up to 60 days to process



## Take a minute to look at this form:

## **HOUSEHOLD INFORMATION CHANGE FORM**

You are required to report ALL changes in writing within 14 days of the change

When possible, please provide supporting documentation to verify the change(s) you are reporting!

Tell us what changed: (	check all that apply)	
Income Increase	ncome Decrease Job Started J	Job Ended Changed Employers
Phone Number	Address Change Child Support Chang	ge (CIRCLE ONE- Increased OR Decreased?)
Household Composition-	Adding or Removing a household member?** (see	e below)
Other (please explain)	<u> </u>	
NOW- LIST ALL CURI	RENT INCOME IN YOUR HOUSE Income Source	EHOLD (the income you <u>DO</u> have):  Amount of Income
Name of Family Member List each family member who	Income Source Name of your Employer (or temp agency),	Amount of Income  If receiving a wage- List Hourly Rate and Hours Worked Per Week or Weekly/biweekly gross earning
Name of Family Member List each family member who	Income Source Name of your Employer (or temp agency),	Amount of Income  If receiving a wage- List Hourly Rate and  Hours Worked Per Week or Weekly/biweekly gross earning  For all other income types, list amount per month (or weekly)
Name of Family Member List each family member who	Income Source Name of your Employer (or temp agency),	Amount of Income  If receiving a wage- List Hourly Rate and  Hours Worked Per Week or Weekly/biweekly gross earning  For all other income types, list amount per month (or weekly)

	You need to fill	out this section:	
**For Household Compositi	on Change(s): ( <u>must</u> ci	rcle one)	MOVING OR ADDING
Name of Household Member(s) bein	ng Added or Removed:	Date of Birth	Social Security Number
Reason(s) for changes in household	member(s):		
F <u>ADDING</u> → HMHA <u>mu</u>			
F <u>ADDING</u> → HMHA <u>mu</u>	ust approve of all had he unit. (your land adding has incom	lord must also ap	prove) t it in the income sect
the person(s) you are	ust approve of all had he unit. (your land adding has incom	lord must also ap	prove) t it in the income sect ncome you <u>DO</u> have):
the person(s) you are	ust approve of all had he unit. (your land e adding has income and income incom	re, you need to list R HOUSEHOLD (the interpretation of Interpreta	prove) t it in the income sect ncome you <u>DO</u> have):

## If you DO NOT report your income changes:

**#1-** Your assistance will be **TERMINATED** 

#2- You will owe HMHA/HUD money \$\$

#3- You will never be eligible for rental assistance anywhere

#### Voucher

#### Housing Choice Voucher Program

#### U.S. Department of Housing and Urban Development

Office of Public and Indian Housing

Public Reporting Burden for this collection of information is estimated to average 0.05 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. This agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless that collection displays a visil dOMB control.

number. Assurances of confidentiality are not provided under this collection. This collection of information is authorized under Section 8 of the U.S. Housing Act of 1937 (42 U.S.C. 1437f). The information is used to authorize a family to look for an eligible unit and specifies the size of the unit. The information also sets forth the family's obligations under the Housing Choice Voucher Program.

Privacy Act Statement. The Department of Housing and Urban Development (HUD) is authorized to collect the information required on this form by Section 8 of the U.S. Housing Act of 1937 (42 U.S.C. 1437f). Collection of family members' names is mandatory. The information is used to authorize a family to look for an eligible unit and specifies the size of the unit. The information also sets forth the family's obligations under the Housing Choice Voucher Program. HUD may disclose this information to Federal, State and local agencies when relevant to civil, criminal, or regulatory investigations and prosecutions. It will not be otherwise disclosed or released outside of HUD, except as permitted or required by law. Failure to provide any of the information may result in delay or rejection of family voucher issuance.

Please read entire document before completing form. Fill in all blanks be	low. Type or print clearly.	Voucher Number
Insert unit size in number of bedrooms. (This is the number of bedrooms and is used in determining the amount of assistance to be paid on behalf of the size	1. Unit Size	
Date Voucher Issued (mm/dd/yyyy)     Insert actual date the Voucher is issued to the Family.		2. Issue Date (mm/dd/yyyy)
3. Date Voucher Expires (mm/dd/yyyy) must be at least sixty days after da Voucher is issued. (See Section 6 of this form.)	te issued.	3. Expiration Date (mm/dd/yyyy)
Date Extension Expires (if applicable)(mm/dd/yyyy) (See Section 6. of this form)		Extension Expires (mm/dd/yyyy)
5. Name of Family Representative	6. Signature of Family Appress tive	Date Signed (mm/dd/yyyy)
7. Name of Public Housing Agency (PHA)		
8. Name and Title of PHA Official	9. Signature of PHA Official	Date Signed (mm/dd/yyyy)

#### 1. Housing Choice Voucher Program

- A. The public housing age (PHA) has extermined that the above named to be a very large eligible to participate in the housing the very large program. Under this program, he had not see a decent, safe and sanitary unit to live in If to owner agrees to lease the unit to the family under the housing choice voucher program, and if the PHA approves the unit, the PHA will enter into a housing assistance payments (HAP) contract with the owner to make monthly payments to the owner to help the family pay the rent.
- B. The PHA determines the amount of the monthly housing assistance payment to be paid to the owner. Generally, the monthly housing assistance payment by the PHA is the difference between the applicable payment standard and 30 percent of monthly adjusted family income. In determining the maximum initial housing assistance payment for the family, the PHA will use the payment standard in effect on the date the tenancy is approved by the PHA. The family may choose to rent a unit for more than the payment standard, but this choice does not change the amount of the PHA's assistance payment. The actual amount of the PHA's assistance payment will be determined using the gross rent for the unit selected by the family.

#### 2. Voucher

A. When issuing this voucher the PHA expects that if the family finds an approvable unit, the PHA will have the money available to enter into a HAP contract with the owner. However, the PHA is under no obligation to the family, to any owner, or to any other person, to approve a tenancy. The PHA does not have any liability to any party by the issuance of this voucher.

- B. The voucher does not give the family any right to participate in the PHA's housing choice voucher program. The family becomes a participant in the PHA's housing choice voucher program when the HAP contract between the PHA and the owner takes effect.
- C. During the initial or any extended term of this voucher, the PHA may require the family to report progress in leasing a unit at such intervals and times as determined by the PHA.

#### 3. PHA Approval or Disapproval of Unit or Lease

- A. When the family finds a suitable unit where the owner is willing to participate in the program, the family must give the PHA the request for tenancy approval (on the form supplied by the PHA), signed by the owner and the family, and a copy of the lease, including the HUD-prescribed tenancy addendum. Note: Both documents must be given to the PHA no later than the expiration date stated in item 3 or 4 on top of page one of this voucher.
- B. The family must submit these documents in the manner that is required by the PHA. PHA policy may prohibit the family from submitting more than one request for tenancy approval at a time.
- C. The lease must include, word-for-word, all provisions of the tenancy addendum required by HUD and supplied by the PHA. This is done by adding the HUD tenancy addendum to the lease used by the owner. If there is a difference between any provisions of the HUD tenancy addendum and any provisions of the owner's lease, the provisions of the HUD tenancy addendum shall control.

Document ID:

OMB No. 2577-0169

(Exp. 07/31/2022)

Please read the

<u>Voucher Issuance</u>
form we sent you,
then sign and date at
the bottom.





#### Hancock Metropolitan Housing Authority

1800 N Blanchard Street, Suite 114, Findlay, Ohio 45840

Phone: 419-424-7848 / Fax: 419-424-7831 / E-mail: hmhamain@hancockmetro.com www.hancockmetro.com

#### 5-II.D. VOUCHER ISSUANCE [24 CFR 982.302]

When a family is selected from the waiting list (or as a special admission as described in Chapter 4), or when a participant family wants to move to another unit, the PHA will issue a Housing Choice Voucher, form HUD-52646.

The voucher is the family's authorization to search for housing. It specifies the unit size for which the family qualifies and includes both the date of voucher issuance and date of expiration. It contains a brief description of how the program works and explains the family obligations under the program. The voucher is evidence that the PHA has determined the family to be eligible for the program, and that the PHA expects to have money available to subsidize the family if the family finds an approvable unit. However, the PHA does not have any liability to any party by the issuance of the voucher, and the voucher does not give the family any right to participate in the PHA's housing choice voucher program [Voucher, form HUD-52646].

A voucher can be issued to an applicant family only after the PHA has determined that the family is eligible for the program based on information received within the 60 days prior to issuance [24 CFR 982.201(e)] and after the family has attended an oral briefing [HCV 8-1].

#### HMHA Policy

Vouchers will be issued to eligible applicants immediately following the mandatory briefing and completion of the verification process.

The PHA should have sufficient funds to house an applicant before issuing a voucher. If funds are insufficient to house the family at the top of the waiting list, the PHA must wait until it has adequate funds before it calls another family from the list [HCV GB p. 8 -10].

#### HMHA Policy

Prior to issuing any vouchers, the PHA will determine whether it has sufficient funding in accordance with the policies in Part VIII of Chapter 16.

If, due to budgetary constraints, the PHA must rescind vouchers that have already been issued to families, vouchers will be rescinded in order of the date and time they were issued, starting with the most recently issued vouchers. Once it is determined the PHA has adequate funding to issue vouchers again the process shall be reversed re-issuing vouchers to first participants whose voucher was suspended first working to get back to the top of the waiting list.

I, Donald Duck	, have read and understand the above policy regarding voucher issuance.
Signature:	Date:



### **Voucher Term:**

The voucher term is <u>60</u> calendar days. The family (you) must submit a Request for Tenancy Approval (RTA) and proposed lease within the 60 days.

## **Extension of Voucher Term**

The PHA will automatically approve one 30-day extension upon written request from the family.

Any request for an additional extension must include the reason(s) an additional extension is necessary. HMHA may require the family to provide documentation to support the request.

All requests for extensions to the voucher term must be made in writing (fill out a *Voucher Extension Request* form) and submitted to HMHA *before* the voucher expiration date of the voucher (or extended term of the voucher).

HMHA will decide whether to approve or deny an extension request within 10 business days of the date the verification is received and will immediately provide the family written notice of its decision.

#### Suspension (Tolling) of Voucher Term

HMHA will suspend the housing choice voucher term when the family has submitted a Request for Tenancy Approval (RTA) during the voucher term. "Suspension" means stopping the clock on a family's voucher term from the time a family submits the RTA until the time the PHA approves or denies the request [24 CFR 982.4]. The suspension of time is also called "tolling".

### How is my Voucher size determined?

For each family, the PHA determines the appropriate number of bedrooms under the PHA **subsidy standards** and enters the family unit size on the voucher issued to the family. The family unit size does not dictate the size of the unit the family must actually lease, nor does it determine who within a household will share a bedroom/sleeping room.

The following requirements apply when the PHA determines family unit size:

- The subsidy standards must provide for the smallest number of bedrooms needed to house a family without overcrowding.
- The subsidy standards must be consistent with space requirements under the housing quality standards.
- The subsidy standards must be applied consistently for all families of like size and composition.
- A child who is temporarily away from the home because of placement in foster care is considered a member of the family in determining the family unit size.
- A family that consists of a pregnant woman (with no other persons) must be treated as a two-person family.
- Any live-in aide (approved by the PHA to reside in the unit to care for a family member who is disabled or is at least 50 years of age) must be counted in determining the family unit size;
- Unless a live-in aide resides with a family, the family unit size for any family consisting of a single
  person must be either a zero- or one-bedroom unit, as determined under the PHA subsidy standards.

#### How is my Voucher size determined? - (continued)

#### PHA Policy:

The PHA will assign one bedroom for each two persons within the household, except in the following circumstances:

Persons of different generations (except when less than 10 years apart in age) will be allocated separate bedrooms.

Persons of the opposite sex (other than spouses, and children under age 5) will be allocated separate bedrooms.

Live-in aides will be allocated a separate bedroom.

Single-person families will be allocated one bedroom.

Children of the same gender with an age difference exceeding eight years will be allocated separate bedrooms.

Unrelated adults of the same gender will be allocated separate bedrooms

#### How is my Voucher size determined? - (continued)

The PHA will reference the following chart in determining the appropriate voucher size for a family:

Voucher Size

Persons in Household

(Minimum-Maximum)

- 1 Bedroom 1-2
- 2 Bedrooms 2-4
- 3 Bedrooms 3-6
- 4 Bedrooms 4-8
- 5 Bedrooms 6-10

#### **Exceptions to Subsidy Standards**

In determining family unit size for a particular family, the PHA may grant an exception to its established subsidy standards if the PHA determines that the exception is justified by the age, sex, health, handicap, or relationship of family members or other personal circumstances. Reasons may include, but are not limited to:

- A need for an additional bedroom for medical equipment
- A need for a separate bedroom for reasons related to a family member's disability, medical or health condition

For a single person who is not elderly, disabled, or a remaining family member, an exception cannot override the regulatory limit of a zero or one bedroom.

#### Exceptions to Subsidy Standards – (continued)

#### PHA Policy:

The PHA will consider granting an exception for any of the reasons specified in the regulation: the age, sex, health, handicap, or relationship of family members or other personal circumstances.

The family must request an exception to the subsidy standards in writing. The request must explain the need or justification for a larger family unit size and must include appropriate documentation. Requests based on health-related reasons must be verified by a knowledgeable, professional source (e.g., doctor or health professional) unless the disability and the disability—related request for accommodation is readily apparent or otherwise known. The family's continued need for an additional bedroom due to special medical equipment must be re-verified at the annual reexamination.

The PHA will notify the family of its determination within 10 business days of receiving the family's request. If a participant family's request is denied, the notice will inform the family of their right to request an informal hearing.

Ask your caseworker for a Request for Exception to Subsidy Standards form.

### Where You May Choose To Live

- You can utilize the voucher in the unit you currently live in (provided the owner/landlord is willing to participate in the program) or
- Move to a unit anywhere in our jurisdiction (Hancock, Hardin, Putnam, or Wyandot counties) or
- If you were living in our jurisdiction when you applied for our program, you can exercise portability.
   (You can request to move anywhere in the U.S. that has a Housing Authority (PHA) that administers the program, <u>BUT</u> if you were <u>not</u> living in our jurisdiction when you applied, you **must** reside in our jurisdiction for a year before you will be eligible to port your voucher.

### Moving with a Voucher under Portability

A household's needs may change over time due to changes in household size, job location, or other reasons. The tenant-based component of the HCV program is designed to allow a household to move to another PHA's jurisdiction without losing its voucher.

This regulation in the HCV program is referred to as "portability." Simply stated, portability means that an HCV household may use its voucher to lease a unit in any community in the country if a PHA is administering the program in that locality.

If you did not have a legal residence in our jurisdiction when you applied for assistance, you must lease in our jurisdiction for one year before you are eligible to port.

After that initial period, the household may take its voucher and move outside the PHA's jurisdiction as long as the household follows the PHA's portability procedure.

When a household moves with a voucher, the original PHA and the PHA in the new jurisdiction must determine which PHA will be responsible for making HCV payments to the owner and which PHA will receive a fee from HUD to administer the voucher. These arrangements are worked out between the two PHAs and should not involve the HCV household.

To apply for portability, contact your HMHA caseworker and tell them where you want to port.

Please Note: When you port, you fall under the rent limitations and bedroom size requirements of the receiving PHA, which may differ from our policies.

\*You can read more about Portability in your Participant Briefing Packet.

This is an example of what we call an 'Estimate'.

You will get your own when you pick up your Voucher.

We are going to look at Donald Duck's Estimate:

# What to look for:

Based on your household size and income,

You qualify for a \_\_\_1 bedroom unit.

#### **AND**

The <u>rent</u> should be *no more than* \$650 per month



#### **IMPORTANT:**

The amount listed above **IS NOT** how much HMHA will pay



Once we have received your <u>completed RTA form</u>, your caseworker will then be able to tell you

how much YOUR PORTION of the RENT will be.



If you have questions, call your caseworker!

### What to look for:

#### **Donald Duck**

Based on your household size and income,

You qualify for a \_\_\_1 bedroom unit.

#### **AND**

The <u>rent</u> should be *no more than* \$650 per month



#### **IMPORTANT:**

The amount listed above **IS NOT** how much HMHA will pay



#### **IMPORTANT:**

The amount listed above **IS NOT** how much HMHA will pay



Once we have received your <u>completed RTA form</u>, your caseworker will then be able to tell you how much <u>YOUR PORTION of the RENT</u> will be.



If you have questions, call your caseworker!

### **AND**

No, you cannot "pay the difference"

#### Question:

I found an apartment that's \$50 more than what you approved me for, can I just "pay the difference"?

#### HMHA's Response:

The rent amount we approve for you is based on what you can afford.

Therefore, if you can "pay the difference," that tells us that you must have additional income coming in that you haven't reported.

## For Your Information (FYI):

- The Voucher does **NOT** have a cash \$ value
- There is <u>NOT</u> a guaranteed amount that HMHA pays
- HMHA does NOT pay back rent
- YOU are responsible for paying the Security Deposit
- YOU are <u>responsible</u> for <u>utility deposits</u> (if applicable)

### Request for Tenancy Approval

(RTA)

The Request for Tenancy Approval (RTA) is a vital document that plays an important role in your receiving assistance.

When you find a unit you would like to rent, this is the form you will give the landlord to fill out and then return it to us.

We can then determine if the rent works for your income.

(Page 1 of 2)

Request for To Housing Choice V				and l	Department of H Jrban Developm of Public and Ind	ent	OMB Approval No. 2577-0169 (exp. 07/31/2022) Tenant ID 1234
Public reporting burden for sources, gathering and mai not required to respond to, (HUD) is authorized to coll selected unit is mandatory, agencies when relevant civ required by law. Failure to p							g instructions, searching existing data I conduct or sponsor, and a person is of Housing and Urban Development Collection of the data on the family's formation to Federal, State, and local tside of HUD, except as permitted or
Name of Public Housing A     Hancock Metropolitan					2. Address of Unit (s	treet address, apartment nu	mber, city, State & zip code)
3. Requested Beginning Da	te of Lease	4. Number o	f Bedrooms	5. Year Constructed	6. Proposed Rent	7. Security Deposit Amt.	8. Date Unit Available for Inspection
9. Type of House/Apartmen   High Rise   Mobile Home   RowTown House.   Single Family Deta   Walk Up- Multi-Fa	'Duplex ached				Section Home Section Section	Tax Cr  236 (insured or nonin: 515 Rural Developme escribe Other Subsidy, Ir	221 (d)(3)(BMIR) redit sured)
11. Utilities and Appliances The owner shall provide or p by a "T". Unless otherwise	pay for the uspecified be	utilities and a elow, the own	ppliances ir er shall pay	ndicated below by an ' y for all utilities and pr	"O". The tenant shall povide the refrigerator a	provide or pay for the utilities and range/microwave.	s and appliances indicated below
ltem	Specify f	uel type					Paid by
Heating	□Nat	ural Gas	☐ Ele	ctric Bottle	Gas Heat	Pump 🗌 Oil 🔲 (	Other
Cooking	□Nat	ural Gas	☐ Ele	ctric Bottle	Gas Heat	Pump 🗌 Oil 🔲 (	Other
Water Heating	□Nat	ural Gas	☐ Ele	ctric 🗌 Bottle	Gas Heat	Pump Oil O	Other
Other Electric							
Water							
Sewer					A V		
Trash Collection	1			<b>^</b>			
Air Conditioning	1				A .		
Other (specify)		<	K.	A			Provided by
Refrigerator		1					
Range/Microwave							
MRI Software LLC					Page 1 of 2		form <b>HUD-52517</b> (07/2019)

2 of 2)

e unit, and exterior painted areas have been found to be inspector certified under the accredited State certification nataining disclosure of known sed paint hazards in the unit, cluding a statement that the pamphiet to the family.  Is behavior or suitability for esponsibility.  word all provisions of the unit and will notify the libe approved.
sed paint hazards in the unit, cluding a statement that the amphiet to the family.  behavior or suitability for esponsibility.  word all provisions of the unit and will notify the
esponsibility.  word all provisions of the  unit and will notify the
unit and will notify the
Where you will Sign a
tno., city, State, & zip code) Date
Date (mm/dd/yyyy)

MRI Software LLC

Page 2 of 2 ALM 07/23/2021

form HUD-52517 (07/2019)

The RTA Packet we give you is the only one you will get.

We will only issue you a new one if the unit does not pass inspection & the landlord chooses not to make the required repairs.

You **cannot** have more than one RTA at any given time.

\*\*NEVER MAKE PHOTOCOPIES OF YOUR RTA\*\*

(or let anyone else make copies of it)

### Things to consider when searching for a unit:

- What utilities do I have to pay?
- Do I have to pay a deposit for any utilities?
- How much is the Security Deposit?
- Is it in a flood zone?

### Once you get your Voucher & RTA Packet

- Find a desirable unit (You have 60 days!!)
- Ask the landlord if they accept Metro Housing Choice Vouchers
- Have the landlord complete the RTA Packet
- Bring the completed RTA Packet to our office!

#### Rent Reasonableness

- No unit can be approved until HMHA has determined that the rent for the unit is reasonable. Rent reasonableness aims to ensure that fair rent is paid for each unit in the HCV Program.
- HUD regulations define a reasonable rent as one that does not exceed the rent charged for similar unassisted units in the same market area.
   HUD also requires owners not to charge more for assisted units than comparable units on the premises.
- Once you have selected a unit and submitted your RTA Packet, your caseworker will determine if the requested rent is reasonable.

### **Affordability**

- You cannot pay more than 40% of your adjusted monthly income for rent and tenant-supplied utilities.
- Once you have selected a unit and submitted the required paperwork (RTA Packet), your caseworker will perform a calculation using the most current income and household data you have provided.
- If the unit exceeds the 40% affordability limit, HMHA cannot approve
  the unit for rental assistance unless the owner is willing to negotiate
  the rent and/or utilities. You must locate a different unit if the owner
  does not negotiate the rent.

#### Reasonable Accommodation

- If you or a member of your household is a person with a disability and requires a reasonable accommodation to participate in the programs or services, please submit your request in writing to your caseworker.
- Some examples of reasonable accommodations include an extra bedroom for medical equipment, live-in aides, renting from a prohibited relative, and using a higher payment standard than approved to enable a person with disabilities to find a suitable unit.

### Processing your RTA

- If the unit is determined affordable and the rent is reasonable, your caseworker will submit a request for an inspection. The Inspector will contact the landlord to schedule the initial inspection.
- If the inspection fails, the Inspector will inform the landlord of the deficiencies, and they will have the opportunity to make the necessary repairs. If the landlord chooses <u>not</u> to make the repairs, HMHA needs to be notified so your caseworker can give you a new RTA Packet.
- The unit passes inspection:
  - The Inspector will inform your caseworker that it has passed.
  - Once the unit has passed inspection, you'll need to contact the landlord about signing their lease agreement (tenancy addendum must be attached).
  - Your caseworker will touch base with you and the landlord.
  - HMHA will need a copy of your executed (signed) Lease Agreement to move forward with your file.

#### **Tenant's Rent Portion**

### How much rent do I pay?

Once affordability has been approved, your caseworker should be able to tell you your anticipated rent portion.

<u>BUT</u> If we are still waiting for verifications from you or for you, your caseworker might not know your rent portion yet.

### Payment Standards

- Used to calculate the monthly housing assistance payment for a family.
- HMHA establishes payment standard amounts for each unit size
- The payment standard is the maximum monthly subsidy payment (equals rent plus utilities)

2023 PAYMENT STANDARDS			
	Effective	11/1/2022	
Hancoc	k County	Putnam	n County
0 Bdrm	\$605	0 Bdrm	\$587
1 Bdrm	\$709	1 Bdrm	\$665
2 Bdrm	\$905	2 Bdrm	\$794
3 Bdrm	\$1,170	3 Bdrm	\$966
4 Bdrm	\$1,477	4 Bdrm	\$1,067
Hardin	County	Wyando	ot County
0 Bdrm	\$587	0 Bdrm	\$587
1 Bdrm	\$655	1 Bdrm	\$652
2 Bdrm	\$794	2 Bdrm	\$794
3 Bdrm	\$1,021	3 Bdrm	\$966
4 Bdrm	\$1,105	4 Bdrm	\$1,148

### **Utility Allowances**

- You are responsible for paying any utilities that are the tenant's responsibility in your lease and utilities must be in the name of an adult household member (age 18 or older)
- A utility allowance is the estimated cost approved by HMHA of a reasonable consumption of utilities by a household.

### Total Tenant Payment (TTP)

- The total amount the HUD rent formula requires the tenant to pay toward gross rent and utility allowance. It is the highest of the following amounts, rounded to the nearest dollar:
  - 30% of the family's monthly adjusted income;
  - 10% of the family's monthly income;
  - Welfare rent (does not apply in this locality); or
  - The minimum rent (\$50)
- Depending on the rent to owner, the amount of the utility allowance, and the applicable payment standard for the family size, a family may pay more than their TTP toward rent and utilities.

## Housing Assistance Payment (HAP) Calculation

The Housing Assistance Payment (HAP) is the amount of the rent HMHA pays to the landlord.

The HAP payment is the lower of:

- Payment Standard minus TTP or
- Gross Rent (Contract Rent plus the Utility Allowance) minus TTP

#### Documents that you will sign

#### Lease Agreement

- The Lease Agreement is provided by the landlord. The landlord and the tenant sign the landlord's lease.
- The HUD Tenancy Addendum contains the information that must be included in your lease and is attached to your lease.
- If there is any conflict between the tenancy addendum and any other lease provisions, the language in the tenancy addendum must be followed.

### Tenancy Addendum (must be attached to your lease)

TENANCY ADDENDUM Section 8 Tenant-Based Assistance Housing Choice Voucher Program (To be attached to Tenant Lease) U.S. Department of Housing and Urban Development Office of Public and Indian Housing OMB Approval No. 2577-0169 exp. 7/31/2022

The Tenancy Addendum is part of the HAP contract and lease. Public reporting burden for this collection of information is estimated to average 0.5 hours. This includes the time for collection, reviewing and reporting the data. The information is being collected are required by 24 CFR 892.451 which in part attast the PHA must pay the housing assistance payment promptly. This agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless there is a valid CMB number. Assurances of confidentiality are not provided under this section.

HUD is committed to protecting the privacy of an individual's information stored electronically or in paper form in accordance with federal privacy laws, guidance and best practices. HUD expects its third-party business partners including Public Housing Authorities who collect, use, maintain, or disseminate HUD information to protect the privacy of that information in accordance with applicable law.

#### 1. Section 8 Voucher Program

- a. The owner is leasing the contract unit to the tenant for occupancy by the tenant's family with assistance for a tenancy under the Section 8 housing choice voucher program (voucher program) of the United States Department of Housing and Urban Development (HUD).
- b. The owner has entered into a Housing Assistance Payments Contract (HAP contract) with the PHA under the voucher program. Under the HAP contract, the PHA will make housing assistance payments to the owner to assist the tenant in leasing the unit from the owner.

#### 2. Lease

- a. The owner has given the PHA a copy of the lease, including any revisions agreed by the owner and the tenant. The owner certifies that the terms of the lease are in accordance with all provisions of the HAP contract and that the lease includes the tenancy addendum.
- b. The tenant shall have the right to enforce the tenancy addendum against the owner. If there is any conflict between the tenancy addendum and any other provisions of the lease, the language of the tenancy addendum shall control.

#### 3. Use of Contract Unit

- During the lease term, the family will reside in the contract unit with assistance under the voucher program.
- b. The composition of the household must be approved by the PHA. The family must promptly inform the PHA of the birth, adoption or court-awarded custody of a child. Other persons may not be added to the household without prior written approval of the owner and the PHA.
- c. The contract unit may only be used for residence by the PHA-approved household members. The unit must be the family's only residence. Members of the household may engage in legal profit making activities incidental to primary use of the unit for residence by members of the family.
- d. The tenant may not sublease or let the unit.
- e. The tenant may not assign the lease or transfer the unit

#### 4. Rent to Owner

- The initial rent to owner may not exceed the amount approved by the PHA in accordance with HUD requirements.
- b. Changes in the rent to owner shall be determined by the provisions of the lease. However, the owner may not raise the rent during the initial term of the lease.
- c. During the term of the lease (including the initial term of the lease and any extension term), the rent to owner may at no time exceed:

- The reasonable rent for the unit as most recently determined or redetermined by the PHA in accordance with HUD requirements, or
- Rent charged by the owner for comparable unassisted units in the premises.

#### 5. Family Payment to Owner

- The family is responsible for paying the owner any portion of the rent to owner that is not covered by the PHA housing assistance payment.
- b. Each month, the PHA will make a housing assistance payment to the owner on behalf of the family in accordance with the HAP contract. The amount of the monthly housing assistance payment will be determined by the PHA in accordance with HUD requirements for a tenancy under the
- The monthly housing assistance payment shall be credited against the monthly rent to owner for the contract unit.
- d. The tenant is not responsible for paying the portion of cent to owner covered by the PHA housing assistance payment under the HAP contract between the owner and the PHA. A PHA failure to pay the housing assistance payment to the owner is not a violation of the lease. The owner may not terminate the tenancy for nonpayment of the PHA housing assistance payment.
- e. The owner may not charge or accept, from the family or from any other source, any payment for rent of the unit in addition to the rent to owner. Rent to owner includes all housing services, mainterance, utilities and appliances to be provided and paid by the owner in accordance with the lease.
- The owner must immediately return any excess rent payment to the tenant.

#### 6. Other Fees and Charges

- a. Rent to owner does not include cost of any meals or supportive services or furniture which may be provided by
- b. The owner may not require the tenant or family members to pay charges for any meals or supportive services or furniture which may be provided by the owner. Nonpayment of any such charges is not grounds for termination of tenancy.
- c. The owner may not charge the tenant extra amounts for items customarily included in rent to owner in the locality, or provided at no additional cost to unsubsidized tenants in the premises.

Previous editions are obsolete Page 1 of 5 form **HUD-52** 

#### Documents that you will sign

## THE VAWA Lease Addendum

Once HMHA has a copy of your executed (signed) Lease Agreement, your caseworker can process your admission onto the HCV Program.

Your caseworker will contact you when the <u>VAWA Lease Addendum</u> is ready for you to sign.

When you sign the VAWA, you will also be given an "AOP" form stating your portion of the rent.

VIOLENCE, DATING VIOLENCE OR STALKING

U.S. Department of Housing and Urban Development Office of Housing Exp. 06/30/2017
Tenant ID 1234

#### LEASE ADDENDUM

#### VIOLENCE AGAINST WOMEN AND JUSTICE DEPARTMENT REAUTHORIZATION ACT OF 2005

TENANT	LANDLORD	UNIT NO. & ADDRESS
Donald Duck	Walt Disney, LLC	125 Mickey Lane

This lease addendum adds the following paragraphs to the Lease between the above referenced Tenant and Landlord.

#### Purpose of the Addendum

The lease for the above referenced unit is being amended to include the provisions of the Violence Against Women and Justice Department Reauthorization Act of 2005 (VAWA).

#### Conflicts with Other Provisions of the Lease

In case of any conflict between the provisions of this Addendum and other sections of the Lease, the provisions of this Addendum shall prevail.

#### Term of the Lease Addendum

The effective date of this Lease Addendum is  $\underline{03/01/2022}$ . This Lease Addendum shall continue to be in effect until the Lease is terminated.

#### VAWA Protections

- The Landlord may not consider incidents of domestic violence, dating violence or stalking as serious or repeated violations of the lease or other "good cause" for termination of assistance, tenancy or occupancy rights of the victim of abuse.
- 2. The Landlord may not consider criminal activity directly relating to abuse, engaged in by a member of a tenant's household or any guest or other person under the tenant's control, cause for termination of assistance, tenancy, or occupancy rights if the tenant or an immediate member of the tenant's family is the victim or threatened victim of that abuse.
- 3. The Landlord may request in writing that the victim, or a family member on the victim's behalf, certify that the individual is a victim of abuse and that the Certification of Domestic Violence, Dating Violence or Stalking, Form HUD-91066, or other documentation as noted on the certification form, be completed and submitted within 14 business days, or an agreed upon extension date, to receive protection under the VAWA. Failure to provide the certification or other supporting documentation within the specified timeframe may result in eviction.

Tenant	Date
Landlord	Date

/IRI Soπware LLC

Page 1 ALM 05/21/2022

Form HUD-91067 (9/2008)

#### Side Deals

It is against HUD regulations to set up a Side Deal to pay more rent than what was entered on the lease. The landlord <u>must not</u> request extra rent.

If you set up a side deal, YOU, the tenant, and the landlord could be <u>terminated</u> from participating in the program.

**NOTE:** This <u>does NOT</u> include monthly pet fees or an additional fee for renting a storage unit/garage.

#### **Need help to pay your Security Deposit?**

#### Request letters to give to the Charities:

**YOU** must request these from your caseworker.

□**FYI-** Keep in mind that some charities will only provide funding in cases where you have been residing inside *Hancock County* for a year. HMHA will provide a letter if requested. It is up to the charity whether they can give you funding.

### **HMHA Lingo:**

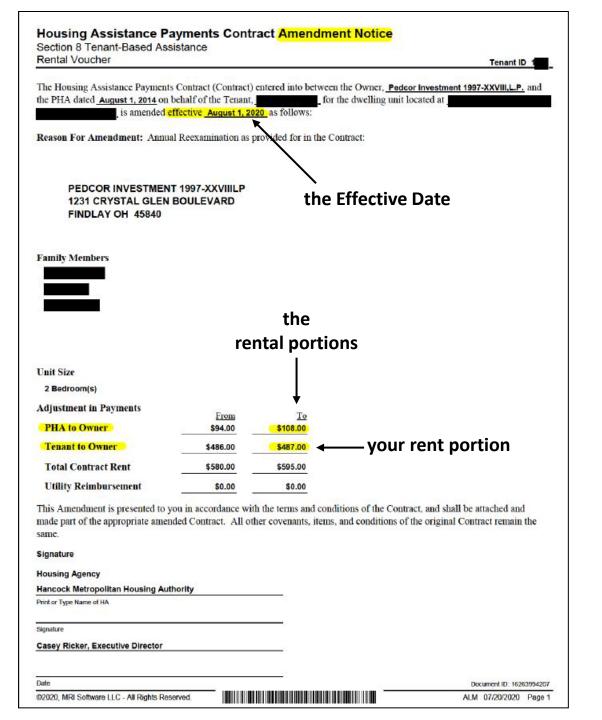
- RTA = Request for Tenancy Approval
- AOP= Amendment of Payment (see example on next slide)
- Doc Letter= A letter requesting documents from you
- VAWA= Violence Against Women's Act
- HAP= Housing Assistance Payment (our payment to your landlord)

If we use a term/word and you aren't sure what we're referring to, <u>please ASK!</u>

# This is what an "AOP" looks like:

AOP=
<u>Amendment of Payments</u>

It gives you a breakdown of the rental portions



#### \*Important Information\* from your Metro Caseworkers:

- **★** You <u>MUST</u> report <u>ALL</u> income changes <u>in writing</u> within 10 days of the occurrence → Fill out the Household Information Change Form
- You <u>must</u> follow the <u>rules/regulations</u> stated in your <u>Lease Agreement.</u>
- Guests: You can have guests, <u>but</u> they cannot stay more than 14 days in a row (unless your lease says otherwise)
- You <u>must</u> supply any information/documents requested by HMHA.
- **★** You **must** attend all scheduled appointments.
- Do <u>NOT</u> vacate your unit without giving <u>written notice</u> to HMHA <u>and</u> your Landlord first.
- ★ Make sure your voicemail box is <u>set up</u> AND your mailbox is <u>not</u> full.
- Read! Read! Read! Your paperwork
- Sign and Date <u>ALL</u> paperwork
- Do <u>NOT</u> violate your Family Obligations.



#### When in doubt → ask your caseworker!

Vickie: Ext 178 Abby: Ext 174 Jessica: Ext 143

If you are terminated from the program, you will <u>NOT</u> be eligible for <u>1 YEAR</u>. If you re-apply, you will be DENIED.

### There is a process/procedure for everything

This includes, but is not limited to:

- Moving (<u>after</u> your initial year on the program)
- Adding a person (adult or child) to your household
- Porting your voucher



### <u>Remember!</u>

- Your Voucher does **NOT** have a cash \$ value
- There is <u>NOT</u> a guaranteed amount that HMHA pays
- HMHA does NOT pay back rent
- YOU are responsible for paying the Security Deposit
- YOU are responsible for utility deposits (if applicable)

#### **In Summary:**

- 1.) Find a unit
- 2.) Give your RTA Packet to Landlord to fill out
- 3.) Return the completed RTA Packet (RTA, housing survey & unexecuted lease) to HMHA
- 4.) Caseworker processes the RTA Packet
- 5.) Unit is inspected by HMHA Inspector
- 6.) Inspection passes
- 7.) You sign Lease Agreement with the landlord You are responsible for the security deposit
- 8.) Get HMHA a copy of your signed Lease Agreement
- 9.) You will sign the VAWA Lease Addendum (your caseworker will contact you when it's ready to be signed)



# The unit you choose must pass an HQS Inspection

**HQS= Housing Quality Standards** 

These are the standards HMHA uses to determine whether the unit you selected qualifies to be assisted

#### What are we looking for?

U.S. Department of Housing and Urban Development Office of Public and Indian Housing

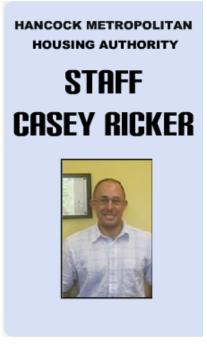


## A Good Place to Live!

You will get this Booklet with your Briefing Packet!

## Important!

Our inspectors now have ID Badges
It will have their name and picture on the front
with the logo and address on the back.







If they don't have the ID Badge DO NOT let them in.

## **Living Room**

#### **MUST HAVE:**

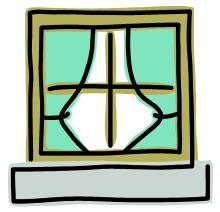
Two electrical outlets <u>or</u> one outlet and permanent

light





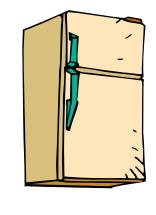
Window



## **Kitchen**

#### **MUST HAVE:**

- One permanent overhead light
- One electrical outlet
- Sink
- Stove
- Refrigerator
- GFCI









## Bathroom(s)

#### **MUST HAVE:**

- Permanent overhead light
- Outlets are not required









Tub or shower (preference for both)



- A door is required bathroom must be private
- A sink separate from the kitchen sink







# Bedrooms and other rooms used for living

#### **MUST HAVE:**



 Two electrical sockets <u>or</u> one electrical socket and a permanent overhead light

Window (if made to open, it must open)



### **Basements**

#### **MUST HAVE:**

Stable stairs—handrail required...4 steps or more



 If the basement is used for sleeping areas, there must be windows that will allow exit in case of fire



### **Smoke Alarms**

#### **MUST HAVE:**

At least one battery-operated or hard-wired smoke detector must be present and working on each level of the unit, including the basement, but not the crawl spaces and unfinished attic.





## **Exterior**

Paint: If you're going to reside in a unit that was constructed before 1978 there can be no deteriorated paint on the property. Deteriorated paint is paint that is chipping, cracking, flaking, or peeling (we will see a slide of it shortly). These rules apply specifically to The Department of Housing and Urban Development's Lead Based Paint Protocol and the Environmental Protection Agencies Renovation, Repair, and Painting protocol. At no time can you make these types of repairs these are landlord only because of the certifications involved. I make that note because sometimes landlords and tenants work out agreements to have the tenant do repairs as a trade off for the deposit cost.

**Foundation:** "Unsound or hazardous" means foundations with severe structural defects indicating the potential for structural collapse; or foundations that allow significant entry of ground water (for example, evidenced by flooding of basement).

**Gutters:** If gutters are installed on the property they must function as intended. Gutters are not required to be installed.



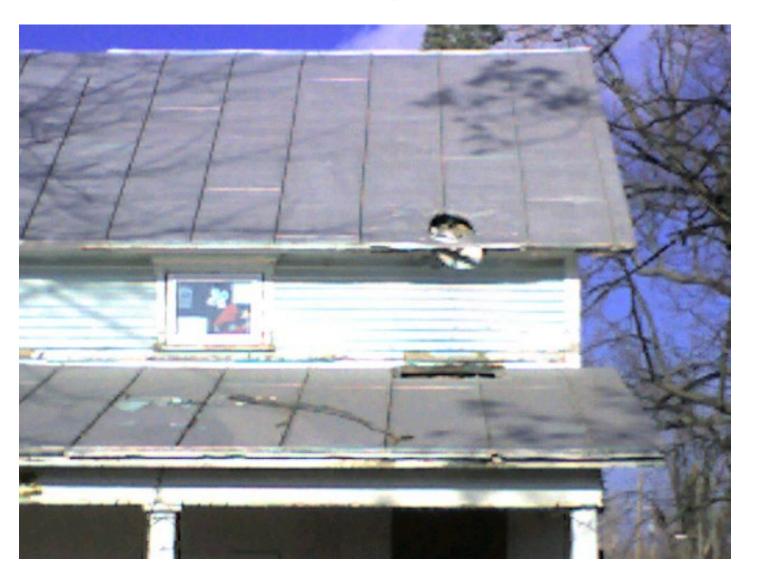
Railings and stairs: "Unsound or hazardous" means: stairs, porches, balconies, or decks with severe structural defects; broken, rotting, or missing steps; absence of a handrail when there are extended lengths of steps (generally four or more consecutive steps); absence of or insecure railings around a porch or balcony which is approximately 30 inches or more above the ground.

**Roof:** The roof has serious defects such as serious buckling or sagging, indicating the potential of structural collapse; large holes or other defects that would result in significant air or water infiltration (in most cases severe exterior defects will be reflected in equally serious surface defects within the unit, e.g., buckling, water damage). The gutters, downspouts and soffits (area under tree eaves) shows serious decay and have allowed the entry of significant air or water into the interior of the structure.

Chimney: HMHA shall visually check the chimney to ensure it is not in danger of collapse.

## **Next:**

We are going to examine some pictures of some housing quality standards deficiencies (failures).



#1) The hole in both sections of the roof will not pass HMHA's inspection.



#1) We have a deteriorated paint issue at this unit. The landlord would be required to treat the deteriorated paint with lead-based paint protocol then repaint.



#1) Gutters are not required but if installed, they must work properly.

#### What are the problems?



- #1) Outlet not installed in a proper electrical box.
- #2) No cover.
- #3) Electric wire not secured.
- #4) Deteriorated paint.

#### What are the problems?



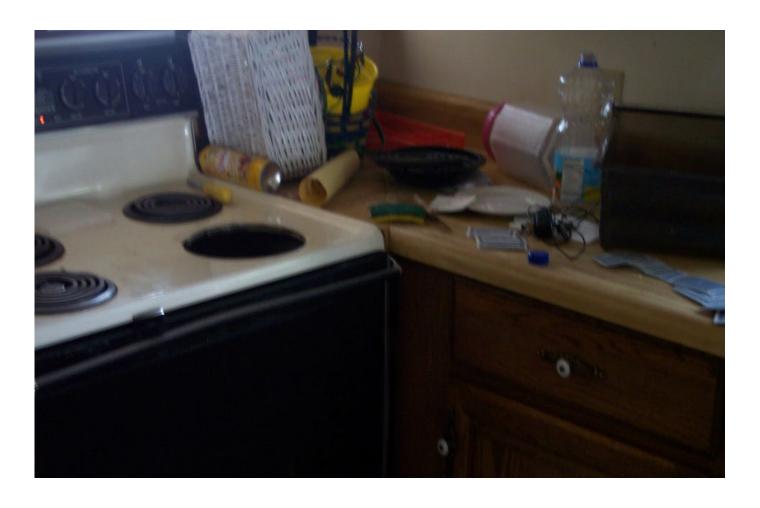
- **#1) Deteriorated paint**
- #2) TV antenna can access the 2<sup>nd</sup> floor window, therefore, a lock needs installed on that window.



#1) Will need to install a new lid for the toilet tank that isn't broken.



#1) Tripping hazard and floor deterioration will need repaired or replaced.



#1) Remember all burners must work so the one burner that is removed will not pass an inspection.

NOTE: If you have little ones and remove the knobs, that is acceptable just provide them upon inspection.

#### What are the problems?



#1) Deteriorated paint#2) Missing light bulbs

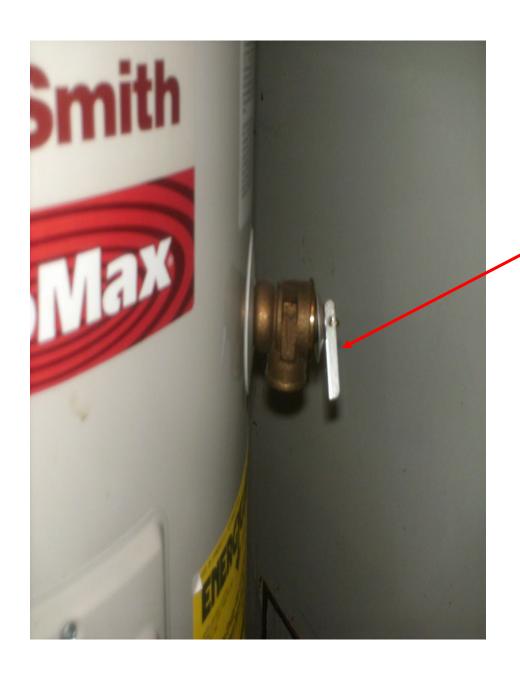
NOTE: When preparing for an inspection and you have a light bulb that is burned out leave it in the socket because Housing and Urban Development guidelines force HMHA to fail open sockets where no light bulbs are installed.



#1) Looks as if the trash service has been stopped. Either you or the landlord is responsible for the trash depending upon your agreement. It is important to maintain the service.



#1) Handrails need installed on both sides of the deck because it is an open stairway.



#### The Water Heater:

This picture illustrates a Temperature Pressure Relief Valve (TPV).

You can see this picture shows an open valve.

Housing Quality Standards require a line coming off this valve that extends to within 6" of the floor.



This picture shows completed installation.

## Think about what's important to you:

- Screens (Doors, windows)
- Water pressure
- Paint issues holes
- Garbage disposal
- Dishwasher
- Yard? Small, large?
- Carpeted

- Neighborhood
- Garage-Storage
- Closets
- Air Conditioning- Central or window unit or none?
- Will the heat be adequate for you?
- Furnace filters \$\$

## You May NOT Have:

Infestation

- Unvented heat source (e.g. kerosene heaters)
- Portable heaters as a main heat source

## IF YOU HAVE A PROBLEM, CALL THE LANDLORD FIRST!





#### **LANDLORDS** make this program possible

Therefore, you need to:

BE RESPECTFUL TO THEM

**BE RESPECTFUL TO THEIR PROPERTY!** 

and

FOLLOW THE RULES OF YOUR LEASE AGREEMENT

PLEASE Don't ruin it for everyone else.





#### **Follow us on Twitter!**

#### @HMHA45840

#### Why follow us?

- 1. Vacant Units are posted to help you find housing
- 2. Open communication with HMHA
- 3. Hear about upcoming events or notifications

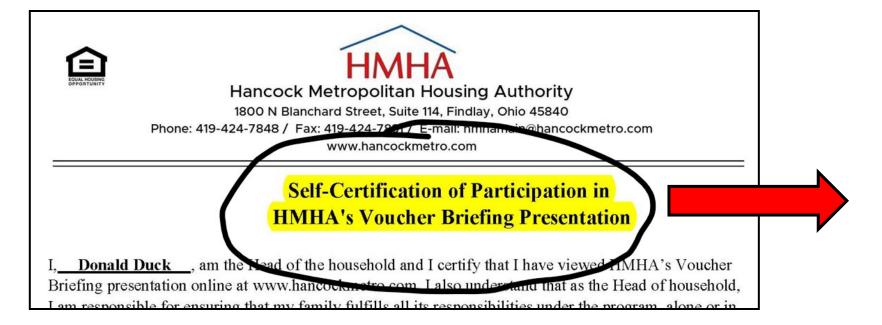
If you need assistance signing up for Twitter, call Casey at 419-424-7848 ext 139



#### Congratulations!

# You have officially completed HMHA's Online Voucher Briefing Presentation!!

Go to the next slide to get the 5-digit code for the Self-Certification of Participation in HMHA's Voucher Briefing Presentation form



## The 5-digit code is: 1-9-8-9-1





#### Hancock Metropolitan Housing Authority

1800 N Blanchard Street, Suite 114, Findlay, Ohio 45840
Phone: 419-424-7848 / Fax: 419-424-7831 / E-mail: hmhamain@hancockmetro.com
www.hancockmetro.com

#### Self-Certification of Participation in HMHA's Voucher Briefing Presentation

I, <u>Donald Duck</u>, am the Head of the household and I certify that I have viewed HMHA's Voucher Briefing presentation online at www.hancockmetro.com. I also understand that as the Head of household, I am responsible for ensuring that my family fulfills all its responsibilities under the program, alone or in conjunction with a cohead or spouse.

I have read and understand the attached 'Family Obligations & Reporting Requirements' form and I signed/dated it on page 2. I have also read and understand the attached 'Voucher Issuance' form and I signed/dated it at the bottom.

If I have any further questions, I will contact HMHA's office at 419-424-7848 and request to speak with my assigned caseworker.

To verify that I did view the presentation,	the following 5-digit code	was listed on the last slide of
---	----------------------------	---------------------------------

the presentation:

(IMPORTANT: If you DO NOT list this code, we WILL NOT release your paperwork)

By signing this form, I understand that knowingly supplying false, incomplete or in accurate information is punishable under Federal or State Criminal law and may be grounds for termination of housing assistance or denial of application.

Signature:	Date:
------------	-------

#### YOUR NEXT STEP:

Once you have completed the above section, you need to bring this form, your completed 'Family Obligations & Reporting Requirements' form, and your completed 'Voucher Issuance' form (4 pages total) to our office located in The Family Center at 1800 N. Blanchard St, Suite 114, Findlay, Ohio 45840.

We will only accept these forms during our normal business hours:

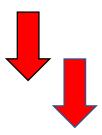
Monday 8:30am - 4:00pm
Tuesday 12:00pm - 5:00pm
Wednesday 8:30am - 12:00pm
Thursday & Friday- by appointment only

Once we have received these <u>3</u> completed forms, we will release your Voucher Briefing Packet to you, along with your Voucher and RTA (must be in person), so you can begin your search for housing.

Go to the next slide!



#### How to get your Voucher!



Bring your three completed forms: Self-Certification of Participation in HMHA's Voucher Briefing Presentation, Family Obligations & Reporting Requirements, and Voucher Issuance to our office during our regular business hours:

Monday 8:30 am - 4:00 pm
Tuesday 12:00 pm - 5:00 pm
Wednesday 8:30 am - 12:00 pm
Thursday & Friday- Closed to the public

to get your Voucher, RTA Packet, & Participant Briefing Packet.

# Please bring your completed forms to our office so you can get your Voucher!!

Monday 8:30 am-4:00 pm

Tuesday 12:00 pm- 5:00 pm

Wednesday 8:30 am- 12:00 pm

Thursday & Friday- Closed to the public

If you have questions, please call us! 419-424-7848

