MERRILL AREA HOUSING AUTHORITY

Merrill Area Housing Authority
Rental Housing
TENANT APPLICATION

PARK PLACE & WESTGATE LLC
215 GRAND AVENUE
MERRILL, WI 54452
PHONE: 715-722-1081 EXT 102
FAX: 715-804-5045
EMAIL: tschmeltzer@merrillha.com
WEBSITE: www.merrillha.com

STONEBRIDGE
307 W MAIN ST
MERRILL, WI 54452
PHONE: 715-722-1081 EXT 102
FAX: 715-804-5045
EMAIL: tschmeltzer@merrillha.com
WEBSITE: www.merrillha.com

JENNY TOWERS 711 E 1ST ST MERRILL, WI 54452
711 E 1ST STREET
MERRILL, WI 54452
PHONE: 715-722-1081 EXT 103
FAX: 715-804-5042
EMAIL: sstorm@merrillha.com
WEBSITE: www.merrillha.com

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MAHA RENTAL HOUSING
TENANT APPLICATION FORM

Applicant Name _____ **Date:** _____

WHITEOUT CAN NOT BE USED ANYWHERE ON THE APPLICATION OR IT WILL BE REJECTED

Please check the location you are interested in applying for:

Section 8 New Construction (Elderly/Disabled 62 & Older)

Jenny Towers ( ) 1 Bedroom
Woodbine Duplexes ( ) 2 Bedroom **(Individuals age 18 or older are eligible to apply)**
Ranch Homes ( ) 3 Bedroom **(Individuals age 18 or older are eligible to apply)**

Section 8 Multi-family PBRA (Individual's age 18 and older)

Park Place ( ) 1 Bedroom
Stonebridge ( ) 1 Bedroom ( ) 2 Bedroom
Westgate ( ) 2 Bedroom ( ) 3 Bedroom ( ) 4 Bedroom

Your application will be verified for eligibility and added to the waiting list based on the date and time the application was submitted.

Household Information:

Complete the following information for each household member that will occupy the unit at time of move-in:

Name (Last, First, MI)	Relationship to Head of Household	Sex (M/F)	Birth Date (MMDDYYYY)	Full-time Student (Y/N)	Social Security Number

Current Address: _____

_____

Primary Phone Number: _____

Alternate Phone Number: _____

Are you claiming a "Preference"? *Certain preferences are assigned to applicants to provide housing opportunities for households with special needs. See Tenant Selection Plan for greater detail.*

❑ Elderly

❑ Disabled.

❑ Other: _____

Type:

1st Choice: ❑ 1 BR ❑ 2 BR ❑ 3 BR ❑ 4 BR ❑ Other _____

2nd Choice: ❑ 1 BR ❑ 2 BR ❑ 3 BR ❑ 4 BR ❑ Other _____

Would you or anyone in your household benefit from a special need's unit? (Mobility, vision, or hearing impairment) ❑ Yes or ❑ No

Will you or anyone in your household require a live-in care attendant? ☐ Yes ☐ No

Name of Live-In Care Attendant: _____

Relationship *(If any)*: _____

Housing References:

List the **past 3 years** of housing references. (If additional space is required, use the back of this page.)

	Landlord's Name/Address	Your Address	Own/Rent	Dates
1.	_____	_____	**Own** ☐	From: _____
	_____	_____	**Rent** ☐	To: _____
	Phone: (___) _____			
2.	_____	_____	**Own** ☐	From: _____
	_____	_____	**Rent** ☐	To: _____
	Phone: (___) _____			
3.	_____	_____	**Own** ☐	From: _____
	_____	_____	**Rent** ☐	To: _____
	Phone: (___) _____			

Do you currently own a pet: ❑ Yes ❑ No

Please describe the pets owned: _____

Household Information (continued)

1. Will anyone else live in the unit on a full-time or part-time basis, such as children temporarily absent, children in a joint custody arrangement, children away at school, unborn children, children in the process of being adopted, or temporarily absent family members?
   ☐ **Yes** ☐ **No**
   If YES, explain _____

2. Do you expect the number of household members to change in the future? ☐ **Yes** ☐ **No**
   If YES, explain how many members will be added or reduced, and when that change will take place _____

3. Have any of the household members used names or a social security number other than the names and numbers used above? ☐ **Yes** ☐ **No**
   If YES, explain _____

4. Are any or ALL members of the household full-time students? ☐ **Yes** ☐**No**
   If YES, explain _____

5. Have you or any member of your household ever been convicted of, plead guilty to or been placed on probation for any crime? ☐ **Yes** ☐ **No**
   If YES, provide the nature of the crime(s):_____
   Date: _____ State: _____ City:_____ County: _____
   Are any of the above convictions a felony? ☐ **Yes** ☐ **No** **If YES, please explain** _____
   _____
   Are you or any members of your household subject to a lifetime registration requirement under a state sex offender registration program? ☐ **Yes** ☐ **No** **If YES, please explain** _____
   _____
   Are there any criminal charges pending now? ☐ **Yes** ☐ **No** **If YES, please explain** _____
   _____

6. Do you live in subsidized housing now or have you in the past? ☐ **Yes** ☐ **No**
   If YES, where? _____ From _____ To _____
   Were you evicted? ☐ **Yes** ☐ **No** If YES, why? _____

7. Have you or your spouse/co-applicant ever been evicted or otherwise involuntarily removed from rental housing due to fraud, non-payment of rent, failure to cooperate with recertification procedures, or for any other reason? ☐ **Yes** ☐ **No**
   If YES, explain _____
   _____

8. Have you ever filed or are you currently filing for bankruptcy? ☐ **Yes** ☐ **No**
   If YES, give reason _____
   Date of filing: _____

9. Have you ever lived at any other property managed by Merrill Housing Authority? ☐ **Yes** ☐ **No**
   If YES, where? _____

10. Why do you want to move from your current residence? _____

11. How did you hear about us? _____

12. Do you know or are you related to any of our residents or staff? _____

Income Information

Earned income is counted only for household members 18 or older and members who are legally emancipated. Unearned income such as a grant or benefit is counted for all household members, including minors.

Include all **GROSS income** (before taxes) each household member expects to earn in the next 12 months. (Check either **YES or NO** to every question, failure to do so the application maybe rejected).

Do **YOU or ANYONE** in your household receive OR expect to receive income from:

1. Employment wages or salaries? Self-employment? Regular pay as a member of the Armed Forces: ☐ **Yes** ☐ **No** (Include overtime, tips, bonuses, commission, and payments received in cash.)

Household Member	Name of Company (Note if self-employed)	Amount

2. Unemployment benefits or worker's compensation? ☐ **Yes** ☐ **No**

Household Member	Name of Company	Amount

3. Public Assistance, General Relief or Temporary Aid to Needy Families (TANF)? ☐ **Yes** ☐ **No**

Household Member	Name of Company	Amount

4. Child Support or Spousal Support (alimony)? ☐ **Yes** ☐ **No** *(We must count court ordered support whether it is received unless legal action has been taken to remedy. We must also count support that is not court-ordered, rather, received directly from the payer.)*

Household Member	**Source of Benefits**	**Amount**

(a) How is the support received? (Check all that apply)

☐ Child Support Enforcement Agency - Name of Agency: _____

☐ Court of Law - Name of Court: _____

☐ Directly from Individual - Name of Person: _____

☐ Other - Explain: _____

(b) If money is not actually received, are you taking legal action to remedy? ☐ **Yes** ☐ **No**
Explanation: _____

6. Social Security, SSI, or any other payments from the Social Security Administration? ☐ **Yes** ☐ **No**

Household Member	SSA Office	Amount

7. Regular payments from a pension, retirement plan, annuities, or Veteran's benefits? ☐ **Yes** ☐ **No**

Household Member	Source of Benefits	Amount

8. Regular payments from a severance package? ☐ **Yes** ☐ **No**

Household Member	Source of Benefits	Amount

9. Regular payments from any type of settlement? *(For example, insurance settlements)* ☐ **Yes** ☐ **No**

Household Member	Source of Benefits	Amount

10. Disability, death benefits or life insurance dividends? ☐ **Yes** ☐ **No**

Household Member	Source of Benefits	Amount

11. Regular gifts or payments from anyone outside of the household? ☐ **Yes** ☐ **No**
(This includes anyone supplementing your income or paying any of your bills.)

Household Member	Source of Benefits	Amount

12. Educational grants, scholarships, or other student benefits? ☐ **Yes** ☐ **No**

Household Member	Source of Benefits	Amount

12. Regular payments from lottery winnings or inheritances? ☐ **Yes** ☐ **No**

Household Member	Source of Benefits	Amount

13. Regular payments from rental property or other types of real estate transactions? ☐ **Yes** ☐ **No**

Household Member	Source of Benefits	Amount

14. Any other income sources or types not listed above? ☐ **Yes** ☐ **No**

Household Member	Source of Benefits	Amount

15. Do you or any other household member expect any change in income in the next 12 months?
☐ **Yes** ☐ **No** If YES, explain: _____

Zero Income Verification

Are YOU or is ANY OTHER ADULT member of your household claiming zero income?
☐ Yes ☐ No If YES, who? _____

REMINDER

CHECK THAT ALL THE QUESTIONS HAVE BEEN ANSWERED YES, NO, OR N/A TO AVOID HAVING YOUR APPLICATION REJECTED AND NOT BEING PLACED ON THE WAIT LIST.

Asset Information:

Include all assets and the corresponding annual interest rate, dividends or any other income derived from the asset. An asset is defined as any lump sum amount that you hold in your name and currently have access to. Include the value of the asset and corresponding income from the asset in the space provided.

INCLUDE ALL ASSETS HELD BY ALL HOUSEHOLD MEMBERS INCLUDING MINORS.

Do YOU or ANYONE in your household hold:

1. Checking or savings account? ☐ **Yes** ☐ **No**

Household Member	Bank or Financial Institution	Amount

2. CDs, money market accounts or treasury bills? ☐ **Yes** ☐ **No**

Household Member	Bank or Financial Institution	Amount

3. Stocks, bonds, or securities? ☐ **Yes** ☐ **No**

Household Member	Bank or Financial Institution	Amount

4. Trust funds? ☐ **Yes** ☐ **No**

Household Member	Bank or Financial Institution	Amount

Are any of the above listed trusts irrevocable? ☐ **Yes** ☐ **No**

5. Pensions, IRAs, 401Ks, 403Bs, KEOGH or other retirement accounts? ☐ **Yes** ☐ **No**

Household Member	Location of Account	Amount

6. Cash on hand? ☐ **Yes** ☐ **No**

Household Member	Source of Benefit	Amount

7. Surrender value of a whole life, universal life, or endowment insurance policy which is available to the policy holder before death? ☐ **Yes** ☐ **No**

Household Member	Location of Account	Amount

8. Real estate, rental property, land contract/contract for deeds or other real estate's holdings? (This includes your personal residence, mobile homes, vacant land, farms, vacation homes or commercial property) ☐ **Yes** ☐ **No**

Household Member	Source of Benefit	Amount

9. Personal property as an investment? (This includes paintings, coin or stamp collections, artwork collections or show cars and antiques. This does not include your personal belongings such as your car, furniture, or clothing.) **Yes** ☐ **No**

Household Member	Source of Benefit	Amount

10. Do you have a safe deposit box containing contents with a monetary value? ☐ **Yes** ☐ **No**

Household Member	Source of Benefit	Amount

11. Have you or any household member disposed of or given away any asset(s) for LESS than fair market value within the past 2 years? ☐ **Yes** ☐ **No**

Household Member	Location of Account	Amount

Do you or anyone listed above own a vehicle?

Vehicle Identification:

1. License #: _____ State Issued: _____ Make/Model/Year: _____
2. License #: _____ State Issued: _____ Make/Model/Year: _____
3. License #: _____ State Issued: _____ Make/Model/Year: _____

Do you or anyone listed above have Drivers License?

1. License #: _____ State Issued: _____ Expires: _____
2. License #: _____ State Issued: _____ Expires: _____
3. License #: _____ State Issued: _____ Expires: _____
4. License #: _____ State Issued: _____ Expires: _____
5. License #: _____ State Issued: _____ Expires: _____

All questions that were answered YES on this application will be verified through the appropriate third-party source. It will be your responsibility to provide management with all necessary information to properly process your application and verify your eligibility. This will include names, addresses, phone and fax numbers, account numbers (where applicable), and any other information required to expedite this process.

Signature Clause:

I understand that management is relying on this information to prove my household's eligibility for housing assisted under a program of the U.S. Department of Housing and Urban Development (HUD). I certify that all information and answers to the questions are true and complete to the best of my knowledge. I consent to release the necessary information to determine my eligibility. I understand that providing false information or making false statements may be grounds for denial of my application. I also understand that such action may result in criminal penalties.

I consent to have management verify the information contained in this application for purposes of proving my eligibility for occupancy. I will provide all necessary information and expedite this process in any way possible. I understand that my occupancy is contingent on meeting management's resident selection criteria and the HUD Neighborhood Stabilization Program.

I understand that in compliance with the FAIR CREDIT REPORTING ACT the processing of this application includes but is not limited to making any inquiries deemed necessary to verify the accuracy of the information I provided, including procuring consumer reports from consumer credit reporting agencies and obtaining credit information from other credit institutions.

I hereby grant this property owner and the Merrill Area Housing DBA Park Place and Westgate LLC and Jenny Towers the right to process this application for the purpose of obtaining a Rental/Lease Agreement with this property. Additionally, I authorize all corporations, companies, law enforcement agencies, academic institutions, and current and former employers to release information they may have about me and release them from any liability and responsibility from doing so. A photographic or faxed copy of this authorization shall be as valid as the original.

All household members 18 and over must sign below:

Signature	Date
Signature	Date
Signature	Date
Signature	Date

For Office Use Only	
Check here if Pre-Application is on file. ☐	**Application Date:**_____ **Time:**_____ **Desired Move-In Date:** _____ **Application Received By:** _____ **As Agent for Owner**

U.S. Department of Housing and Urban Development

Document Package for Applicant's/Tenant's Consent to the Release Of Information

This Package contains the following documents:

1. **HUD-9887/A Fact Sheet describing the necessary verifications**
2. **Form HUD-9887 (to be signed by the Applicant or Tenant)**
3. **Form HUD-9887-A (to be signed by the Applicant or Tenant and Housing Owner)**
4. **Relevant Verifications (to be signed by the Applicant or Tenant)**

Each household must receive a copy of the 9887/A Fact Sheet, form HUD-9887, and form HUD-9887-A.

HUD-9887/A Fact Sheet

Verification of Information Provided by Applicants and Tenants of Assisted Housing

What Verification Involves

To receive housing assistance, applicants and tenants who are at least 18 years of age and each family head, spouse, or co-head regardless of age must provide the owner or management agent (O/A) or public housing agency (PHA) with certain information specified by the U.S. Department of Housing and Urban Development (HUD).

To make sure that the assistance is used properly, Federal laws require that the information you provide be verified. This information is verified in two ways:

1. HUD, O/As, and PHAs may verify the information you provide by checking with the records kept by certain public agencies (e.g., Social Security Administration (SSA), State agency that keeps wage and unemployment compensation claim information, and the Department of Health and Human Services' (HHS) National Directory of New Hires (NDNH) database that stores wage, new hires, and unemployment compensation). HUD (only) may verify information covered in your tax returns from the U.S. Internal Revenue Service (IRS). You give your consent to the release of this information by signing form HUD-9887. Only HUD, O/As, and PHAs can receive information authorized by this form.

2. The O/A must verify the information that is used to determine your eligibility and the amount of rent you pay. You give your consent to the release of this information by signing the form HUD-9887, the form HUD-9887-A, and the individual verification and consent forms that apply to you. Federal laws limit the kinds of information the O/A can receive about you. The amount of income you receive helps to determine the amount of rent you will pay. The O/A will verify all of the sources of income that you report. There are certain allowances that reduce the income used in determining tenant rents.

   Example: Mrs. Anderson is 62 years old. Her age qualifies her for a medical allowance. Her annual income will be adjusted because of this allowance. Because Mrs. Anderson's medical expenses will help determine the amount of rent she pays, the O/A is required to verify any medical expenses that she reports.

   Example: Mr. Harris does not qualify for the medical allowance because he is not at least 62 years of age and he is not handicapped or disabled. Because he is not eligible for the medical allowance, the amount of his medical expenses does not change the amount of rent he pays. Therefore, the O/A cannot ask Mr. Harris anything about his medical expenses and cannot verify with a third party about any medical expenses he has.

Customer Protections

Information received by HUD is protected by the Federal Privacy Act. Information received by the O/A or the PHA is subject to State privacy laws. Employees of HUD, the O/A, and the PHA are subject to penalties for using these consent forms improperly. You do not have to sign the form HUD-9887, the form HUD-9887-A, or the individual verification consent forms when they are given to you at your certification or recertification interview. You may take them home with you to read or to discuss with a third party of your choice. The O/A will give you another date when you can return to sign these forms.

If you cannot read and/or sign a consent form due to a disability, the O/A shall make a reasonable accommodation in accordance with Section 504 of the Rehabilitation Act of 1973. Such accommodations may include: home visits when the applicant's or tenant's disability prevents him/her from coming to the office to complete the forms; the applicant or tenant authorizing another person to sign on his/her behalf; and for persons with visual impairments, accommodations may include providing the forms in large script or braille or providing readers.

If an adult member of your household, due to extenuating circumstances, is unable to sign the form HUD-9887 or the individual verification forms on time, the O/A may document the file as to the reason for the delay and the specific plans to obtain the proper signature as soon as possible.

The O/A must tell you, or a third party which you choose, of the findings made as a result of the O/A verifications authorized by your consent. The O/A must give you the opportunity to contest such findings in accordance with HUD Handbook 4350.3 Rev. 1. However, for information received under the form HUD-9887 or form HUD-9887-A, HUD, the O/A, or the PHA, may inform you of these findings.

O/As must keep tenant files in a location that ensures confidentiality. Any employee of the O/A who fails to keep tenant information confidential is subject to the enforcement provisions of the State Privacy Act and is subject to enforcement actions by HUD. Also, any applicant or tenant affected by negligent disclosure or improper use of information may bring civil action for damages, and seek other relief, as may be appropriate, against the employee.

HUD-9887/A requires the O/A to give each household a copy of the Fact Sheet, and forms HUD-9887, HUD-9887-A along with appropriate individual consent forms. The package you will receive will include the following documents:

1. **HUD-9887/A Fact Sheet**: Describes the requirement to verify information provided by individuals who apply for housing assistance. This fact sheet also describes consumer protections under the verification process.
2. **Form HUD-9887:** Allows the release of information between government agencies.
3. **Form HUD-9887-A:** Describes the requirement of third party verification along with consumer protections.
4. **Individual verification consents:** Used to verify the relevant information provided by applicants/tenants to determine their eligibility and level of benefits.

Consequences for Not Signing the Consent Forms

If you fail to sign the form HUD-9887, the form HUD-9887-A, or the individual verification forms, this may result in your assistance being denied (for applicants) or your assistance being terminated (for tenants). See further explanation on the forms HUD-9887 and 9887-A.

If you are an applicant and are denied assistance for this reason, the O/A must notify you of the reason for your rejection and give you an opportunity to appeal the decision.

If you are a tenant and your assistance is terminated for this reason, the O/A must follow the procedures set out in the Lease. This includes the opportunity for you to meet with the O/A.

Programs Covered by this Fact Sheet

Rental Assistance Program (RAP)

Rent Supplement

Section 8 Housing Assistance Payments Programs (administered by the Office of Housing)

Section 202

Sections 202 and 811 PRAC

Section 202/162 PAC

Section 221(d)(3) Below Market Interest Rate

Section 236

HOPE 2 Home Ownership of Multifamily Units

O/As must give a copy of this HUD Fact Sheet to each household. See the Instructions on form HUD-9887-A.

Notice and Consent for the Release of Information

to the U.S. Department of Housing and Urban Development (HUD) and to an Owner and Management Agent (O/A), and to a Public Housing Agency (PHA)

U.S. Department of Housing and Urban Development
Office of Housing
Federal Housing Commissioner

HUD Office requesting release of information (Owner should provide the full address of the HUD Field Office, Attention: Director, Multifamily Division.):	O/A requesting release of information (Owner should provide the full name and address of the Owner.):	PHA requesting release of information (Owner should provide the full name and address of the PHA and the title of the director or administrator. If there is no PHA Owner or PHA contract administrator for this project, mark an X through this entire box.):
310 W Wisconsin Avenue Ste 950 Milwaukee, WI 53203	Jenny Towers 711 E 1st St Merrill, WI 54452 Park Place & Westgate LLC 215 Grand Ave Merrill, WI 54452	Merrill Area Housing Authority Leasing Office Representative

Notice To Tenant: Do not sign this form if the space above for organizations requesting release of information is left blank. You do not have to sign this form when it is given to you. You may take the form home with you to read or discuss with a third party of your choice and return to sign the consent on a date you have worked out with the housing owner/manager.

Authority: Section 217 of the Consolidated Appropriations Act of 2004 (Pub L. 108-199). This law is found at 42 U.S.C.653(J). This law authorizes HHS to disclose to the Department of Housing and Urban Development (HUD) information in the NDNH portion of the "Location and Collection System of Records" for the purposes of verifying employment and income of individuals participating in specified programs and, after removal of personal identifiers, to conduct analyses of the employment and income reporting of these individuals. Information may be disclosed by the Secretary of HUD to a private owner, a management agent, and a contract administrator in the administration of rental housing assistance.

Section 904 of the Stewart B. McKinney Homeless Assistance Amendments Act of 1988, as amended by section 903 of the Housing and Community Development Act of 1992 and section 3003 of the Omnibus Budget Reconciliation Act of 1993. This law is found at 42 U.S.C. 3544.This law requires you to sign a consent form authorizing: (1) HUD and the PHA to request wage and unemployment compensation claim information from the state agency responsible for keeping that information; and (2) HUD, O/A, and the PHA responsible for determining eligibility to verity salary and wage information pertinent to the applicant's or participant's eligibility or level of benefits; (3) HUD to request certain tax return information from the U.S. Social Security Administration (SSA) and the U.S. Internal Revenue Service (IRS).

Purpose: In signing this consent form, you are authorizing HUD, the above-named O/A, and the PHA to request income information from the government agencies listed on the form. HUD, the O/A, and the PHA need this information to verify your household's income to ensure that you are eligible for assisted housing benefits and that these benefits are set at the correct level. HUD, the O/A, and the PHA may participate in computer matching programs with these sources to verify your eligibility and level of benefits. This form also authorizes HUD, the O/A, and the PHA to seek wage, new hire (W-4), and unemployment claim information from current or former employers to verify information obtained through computer matching.

Uses of Information to be Obtained: HUD is required to protect the income information it obtains in accordance with the Privacy Act of 1974, 5 U.S.C. 552a. The O/A and the PHA is also required to protect the income information it obtains in accordance with any applicable State privacy law. After receiving the information covered by this notice of consent, HUD, the O/A, and the PHA may inform you that your eligibility for, or level of, assistance is uncertain and needs to be verified and nothing else.

HUD, O/A, and PHA employees may be subject to penalties for unauthorized disclosures or improper uses of the income information that is obtained based on the consent form.

Who Must Sign the Consent Form: Each member of your household who is at least 18 years of age and each family head, spouse or co-head, regardless of age, must sign the consent form at the initial certification and at each recertification. Additional signatures must be obtained from new adult members when they join the household or when members of the household become 18 years of age.

Persons who apply for or receive assistance under the following programs are required to sign this consent form:

Rental Assistance Program (RAP)

Rent Supplement

Section 8 Housing Assistance Payments Programs (administered by the Office of Housing)

Section 202; Sections 202 and 811 PRAC; Section 202/162 PAC Section

221(d)(3) Below Market Interest Rate

Section 236

HOPE 2 Homeownership of Multifamily Units

Failure to Sign Consent Form: Your failure to sign the consent form may result in the denial of assistance or termination of assisted housing benefits. If an applicant is denied assistance for this reason, the owner must follow the notification procedures in Handbook 4350.3 Rev. 1. If a tenant is denied assistance for this reason, the owner or managing agent must follow the procedures set out in the lease.

Consent: I consent to allow HUD, the O/A, or the PHA to request and obtain income information from the federal and state agencies listed on the back of this form for the purpose of verifying my eligibility and level of benefits under HUD's assisted housing programs.

Signatures:

Additional Signatures, if needed:

Head of Household	Date	Other Family Members 18 and Over	Date
Spouse	Date	Other Family Members 18 and Over	Date
Other Family Members 18 and Over	Date	Other Family Members 18 and Over	Date
Other Family Members 18 and Over	Date	Other Family Members 18 and Over	Date

Agencies To Provide Information

State Wage Information Collection Agencies. (HUD and PHA). This consent is limited to wages and unemployment compensation you have received during period(s) within the last 5 years when you have received assisted housing benefits.

U.S. Social Security Administration (HUD only). This consent is limited to the wage and self employment information from your current form W-2.

National Directory of New Hires contained in the Department of Health and Human Services' system of records. This consent is limited to wages and unemployment compensation you have received during period(s) within the last 5 years when you have received assisted housing benefits.

U.S. Internal Revenue Service (HUD only). This consent is limited to information covered in your current tax return.

This consent is limited to the following information that may appear on your current tax return:

1099-S Statement for Recipients of Proceeds from Real Estate Transactions

1099-B Statement for Recipients of Proceeds from Real Estate Brokers and Barters Exchange Transactions

1099-A Information Return for Acquisition or Abandonment of Secured Property

1099-G Statement for Recipients of Certain Government Payments

1099-DIV Statement for Recipients of Dividends and Distributions

1099 INT Statement for Recipients of Interest Income

1099-MISC Statement for Recipients of Miscellaneous Income

1099-OID Statement for Recipients of Original Issue Discount

1099-PATR Statement for Recipients of Taxable Distributions Received from Cooperatives

1099-R Statement for Recipients of Retirement Plans W2-G

Statement of Gambling Winnings

1065-K1 Partners Share of Income, Credits, Deductions, etc.

1041-K1 Beneficiary's Share of Income, Credits, Deductions, etc.

1120S-K1 Shareholder's Share of Undistributed Taxable Income, Credits, Deductions, etc.

I understand that income information obtained from these sources will be used to verify information that I provide in determining initial or continued eligibility for assisted housing programs and the level of benefits.

No action can be taken to terminate, deny, suspend, or reduce the assistance your household receives based on information obtained about you under this consent until the HUD Office, Office of Inspector General (OIG) or the PHA (whichever is applicable) and the O/A have independently verified: 1) the amount of the income, wages, or unemployment compensation involved, 2) whether you actually have (or had) access to such income, wages, or benefits for your own use, and 3) the period or periods when, or with respect to which you actually received such income, wages, or benefits. A photocopy of the signed consent may be used to request a third party to verify any information received under this consent (e.g., employer).

HUD, the O/A, or the PHA shall inform you, or a third party which you designate, of the findings made on the basis of information verified under this consent and shall give you an opportunity to contest such findings in accordance with Handbook 4350.3 Rev. 1.

If a member of the household who is required to sign the consent form is unable to sign the form on time due to extenuating circumstances, the O/A may document the file as to the reason for the delay and the specific plans to obtain the proper signature as soon as possible.

This consent form expires 15 months after signed.

Privacy Act Statement. The Department of Housing and Urban Development (HUD) is authorized to collect this information by the U.S. Housing Act of 1937, as amended (42 U.S.C. 1437 et. seq.); the Housing and Urban-Rural Recovery Act of 1983 (P.L. 98-181); the Housing and Community Development Technical Amendments of 1984 (P.L. 98-479); and by the Housing and Community Development Act of 1987 (42 U.S.C. 3543). The information is being collected by HUD to determine an applicant's eligibility, the recommended unit size, and the amount the tenant(s) must pay toward rent and utilities. HUD uses this information to assist in managing certain HUD properties, to protect the Government's financial interest, and to verify the accuracy of the information furnished. HUD, the owner or management agent (O/A), or a public housing agency (PHA) may conduct a computer match to verify the information you provide. This information may be released to appropriate Federal, State, and local agencies, when relevant, and to civil, criminal, or regulatory investigators and prosecutors. However, the information will not be otherwise disclosed or released outside of HUD, except as permitted or required by law. You must provide all of the information requested. Failure to provide any information may result in a delay or rejection of your eligibility approval.

Penalties for Misusing this Consent:
HUD, the O/A, and any PHA (or any employee of HUD, the O/A, or the PHA) may be subject to penalties for unauthorized disclosures or improper uses of information collected based on the consent form.

Use of the information collected based on the form HUD 9887 is restricted to the purposes cited on the form HUD 9887. Any person who knowingly or willfully requests, obtains, or discloses any information under false pretenses concerning an applicant or tenant may be subject to a misdemeanor and fined not more than $5,000.

Any applicant or tenant affected by negligent disclosure of information may bring civil action for damages, and seek other relief, as may be appropriate, against the officer or employee of HUD, the Owner or the PHA responsible for the unauthorized disclosure or improper use.

Applicant's/Tenant's Consent to the Release of Information

Verification by Owners of Information Supplied by Individuals Who Apply for Housing Assistance

U.S. Department of Housing and Urban Development
Office of Housing
Federal Housing Commissioner

Instructions to Owners

1. Give the documents listed below to the applicants/tenants to sign. Staple or clip them together in one package in the order listed.
   a. The HUD-9887/A Fact Sheet.
   b. Form HUD-9887.
   c. Form HUD-9887-A.
   d . Relevant verifications (HUD Handbook 4350.3 Rev. 1).
2. Verbally inform applicants and tenants that
   a. They may take these forms home with them to read or to discuss with a third party of their choice and to return to sign them on a date they have worked out with you, and
   b. If they have a disability that prevents them from reading and/ or signing any consent, that you, the Owner, are required to provide reasonable accommodations.
3. Owners are required to give each household a copy of the HUD9887/A Fact Sheet, form HUD-9887, and form HUD-9887-A after obtaining the required applicants/tenants signature(s). Also, owners must give the applicants/tenants a copy of the signed individual verification forms upon their request.

Instructions to Applicants and Tenants

This Form HUD-9887-A contains customer information and protections concerning the HUD-required verifications that Owners must perform.

1. Read this material which explains:
   • HUD's requirements concerning the release of information, and
   • Other customer protections.
2. Sign on the last page that:
   • you have read this form, or
   • the Owner or a third party of your choice has explained it to you, and
   • you consent to the release of information for the purposes and uses described.

Authority for Requiring Applicant's/Tenant's Consent to the Release of Information

Section 904 of the Stewart B. McKinney Homeless Assistance Amendments Act of 1988, as amended by section 903 of the Housing and Community Development Act of 1992. This law is found at 42 U.S.C. 3544.

In part, this law requires you to sign a consent form authorizing the Owner to request current or previous employers to verify salary and wage information pertinent to your eligibility or level of benefits.

In addition, HUD regulations (24 CFR 5.659, Family Information and Verification) require as a condition of receiving housing assistance that you must sign a HUD-approved release and consent authorizing any depository or private source of income to furnish such information that is necessary in determining your eligibility or level of benefits. This includes information that you have provided which will affect the amount of rent you pay. The information includes income and assets, such as salary, welfare benefits, and interest earned on savings accounts. They also include certain adjustments to your income, such as the allowances for dependents and for households whose heads or spouses are elderly handicapped, or disabled; and allowances for child care expenses, medical expenses, and handicap assistance expenses.

Purpose of Requiring Consent to the Release of Information

In signing this consent form, you are authorizing the Owner of the housing project to which you are applying for assistance to request information from a third party about you. HUD requires the housing owner to verify all of the information you provide that affects your eligibility and level of benefits to ensure that you are eligible for assisted housing benefits and that these benefits are set at the correct levels. Upon the request of the HUD office or the PHA (as Contract Administrator), the housing Owner may provide HUD or the PHA with the information you have submitted and the information the Owner receives under this consent.

Uses of Information to be Obtained

The individual listed on the verification form may request and receive the information requested by the verification, subject to the limitations of this form. HUD is required to protect the income information it obtains in accordance with the Privacy Act of 1974, 5 U.S.C. 552a. The Owner and the PHA are also required to protect the income information they obtain in accordance with any applicable state privacy law. Should the Owner receive information from a third party that is inconsistent with the information you have provided, the Owner is required to notify you in writing identifying the information believed to be incorrect. If this should occur, you will have the opportunity to meet with the Owner to discuss any discrepancies.

Who Must Sign the Consent Form

Each member of your household who is at least 18 years of age, and each family head, spouse or co-head, regardless of age must sign the relevant consent forms at the initial certification, at each recertification and at each interim certification, if applicable. In addition, when new adult members join the household and when members of the household become 18 years of age they must also sign the relevant consent forms.

Persons who apply for or receive assistance under the following programs must sign the relevant consent forms:

Rental Assistance Program (RAP)
Rent Supplement
Section 8 Housing Assistance Payments Programs (administered by the Office of Housing)
Section 202
Sections 202 and 811 PRAC
Section 202/162 PAC
Section 221(d)(3) Below Market Interest Rate
Section 236
HOPE 2 Home Ownership of Multifamily Units

Failure to Sign the Consent Form

Failure to sign any required consent form may result in the denial of assistance or termination of assisted housing benefits. If an applicant is denied assistance for this reason, the O/A must follow the notification procedures in Handbook 4350.3 Rev. 1. If a tenant is denied assistance for this reason, the O/A must follow the procedures set out in the lease.

Conditions

No action can be taken to terminate, deny, suspend or reduce the assistance your household receives based on information obtained about you under this consent until the O/A has independently 1) verified the information you have provided with respect to your eligibility and level of benefits and 2) with respect to income (including both earned and unearned income), the O/A has verified whether you actually have (or had) access to such income for your own use, and verified the period or periods when, or with respect to which you actually received such income, wages, or benefits.

A photocopy of the signed consent may be used to request the information authorized by your signature on the individual consent forms. This would occur if the O/A does not have another individual verification consent with an original signature and the O/A is required to send out another request for verification (for example, the third party fails to respond). If this happens, the O/A may attach a photocopy of this consent to a photocopy of the individual verification form that you sign. To avoid the use of photocopies, the O/A and the individual may agree to sign more than one consent for each type of verification that is needed. The O/A shall inform you, or a third party which you designate, of the findings made on the basis of information verified under this consent and shall give you an opportunity to contest such findings in accordance with Handbook 4350.3 Rev. 1.

The O/A must provide you with information obtained under this consent in accordance with State privacy laws.

If a member of the household who is required to sign the consent forms is unable to sign the required forms on time, due to extenuating circumstances, the O/A may document the file as to the reason for the delay and the specific plans to obtain the proper signature as soon as possible.

Individual consents to the release of information expire 15 months after they are signed. The O/A may use these individual consent forms during the 120 days preceding the certification period. The O/A may also use these forms during the certification period, but only in cases where the O/A receives information indicating that the information you have provided may be incorrect. Other uses are prohibited.

The O/A may not make inquiries into information that is older than 12 months unless he/she has received inconsistent information and has reason to believe that the information that you have supplied is incorrect. If this occurs, the O/A may obtain information within the last 5 years when you have received assistance.

I have read and understand this information on the purposes and uses of information that is verified and consent to the release of information for these purposes and uses.

_____

Name of Applicant or Tenant (Print)

_____

Signature of Applicant or Tenant & Date

I have read and understand the purpose of this consent and its uses and I understand that misuse of this consent can lead to personal penalties to me.

_____

Name of Project Owner or his/her representative

_____

Title

_____

Signature & Date

cc:Applicant/Tenant

Owner file

Penalties for Misusing this Consent:

HUD, the O/A, and any PHA (or any employee of HUD, the O/A, or the PHA) may be subject to penalties for unauthorized disclosures or improper uses of information collected based on the consent form.

Use of the information collected based on the form HUD 9887-A is restricted to the purposes cited on the form HUD 9887-A. Any person who knowingly or willfully requests, obtains or discloses any information under false pretenses concerning an applicant or tenant may be subject to a misdemeanor and fined not more than $5,000.

Any applicant or tenant affected by negligent disclosure of information may bring civil action for damages, and seek other relief, as may be appropriate, against the officer or employee of HUD, the O/A or the PHA responsible for the unauthorized disclosure or improper use.

OMB Control # 2502-0581
Exp. (11/30/2015)

Optional and Supplemental Contact Information for HUD-Assisted Housing Applicants

SUPPLEMENT TO APPLICATION FOR FEDERALLY ASSISTED HOUSING

This form is to be provided to each applicant for federally assisted housing

Instructions: Optional Contact Person or Organization: You have the right by law to include as part of your application for housing, the name, address, telephone number, and other relevant information of a family member, friend, or social, health, advocacy, or other organization. This contact information is for the purpose of identifying a person or organization that may be able to help in resolving any issues that may arise during your tenancy or to assist in providing any special care or services you may require. **You may update, remove, or change the information you provide on this form at any time.** You are not required to provide this contact information, but if you choose to do so, please include the relevant information on this form.

☐ Check this box if you choose not to provide the contact information.

Applicant Name:	
Mailing Address:	
Telephone No:	**Cell Phone No:**
Name of Additional Contact Person or Organization:	
Address:	
Telephone No:	**Cell Phone No:**
E-Mail Address (if applicable):	
Relationship to Applicant:	

Reason for Contact: (Check all that apply)

- ☐ Emergency
- ☐ Unable to contact you
- ☐ Termination of rental assistance
- ☐ Eviction from unit
- ☐ Late payment of rent
- ☐ Assist with Recertification Process
- ☐ Change in lease terms
- ☐ Change in house rules
- ☐ Other: _____

Commitment of Housing Authority or Owner: If you are approved for housing, this information will be kept as part of your tenant file. If issues arise during your tenancy or if you require any services or special care, we may contact the person or organization you listed to assist in resolving the issues or in providing any services or special care to you.

Confidentiality Statement: The information provided on this form is confidential and will not be disclosed to anyone except as permitted by the applicant or applicable law.

Legal Notification: Section 644 of the Housing and Community Development Act of 1992 (Public Law 102-550, approved October 28, 1992) requires each applicant for federally assisted housing to be offered the option of providing information regarding an additional contact person or organization. By accepting the applicant's application, the housing provider agrees to comply with the non-discrimination and equal opportunity requirements of 24 CFR section 5.105, including the prohibitions on discrimination in admission to or participation in federally assisted housing programs on the basis of race, color, religion, national origin, sex, disability, and familial status under the Fair Housing Act, and the prohibition on age discrimination under the Age Discrimination Act of 1975.

Signature of Applicant	**Date**

The information collection requirements contained in this form were submitted to the Office of Management and Budget (OMB) under the Paperwork Reduction Act of 1995 (44 U.S.C. 3501-3520). The public reporting burden is estimated at 15 minutes 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. Section 644 of the Housing and Community Development Act of 1992 (42 U.S.C. 13604) imposed on HUD the obligation to require housing providers participating in HUD's assisted housing programs to provide any individual or family applying for occupancy in HUD-assisted housing with the option to include in the application for occupancy the name, address, telephone number, and other relevant information of a family member, friend, or person associated with a social, health, advocacy, or similar organization. The objective of providing such information is to facilitate contact by the housing provider with the person or organization identified by the tenant to assist in providing any delivery of services or special care to the tenant and assist with resolving any tenancy issues arising during the tenancy of such tenant. This supplemental application information is to be maintained by the housing provider and maintained as confidential information. Providing the information is basic to the operations of the HUD Assisted-Housing Program and is voluntary. It supports statutory requirements and program and management controls that prevent fraud, waste and mismanagement. In accordance with the Paperwork Reduction Act, an agency may not conduct or sponsor, and a person is not required to respond to, a collection of information, unless the collection displays a currently valid OMB control number.

Privacy Statement: Public Law 102-550, authorizes the Department of Housing and Urban Development (HUD) to collect all the information (except the Social Security Number (SSN)) which will be used by HUD to protect disbursement data from fraudulent actions.

Date:	
Tenant:	
Development:	
Apt:	

MERRILL AREA HOUSING AUTHORITY

CHANGES IN or DISPOSAL OF ASSETS

I hereby certify that during the two year (24 month) period preceding the effective date of my certification or recertification of eligibility for program participation, I have disposed of the following asset(s) as identified below.

A ASSET	B CASH VALUE*	C DATE DISPOSED	D ACTUAL AMOUNT RECEIVED
1.)			
2.)			
3.)			

If you state in column D that you received money, where is the money now? (please provide receipts if possible)

1. _____

2. _____

3. _____

CASH VALUE is the market value of the asset minus reasonable costs incurred in selling or converting the asset to cash. Such reasonable costs include:

1. **Penalties for withdrawing funds before maturity.**
2. **Broker/legal fees for the sale or conversion of assets.**
3. **Settlement costs for real estate transaction.**

I hereby certify that the information provided above is accurate and complete to the best of my knowledge. I consent to release such information in order to comply with government regulations regarding allocation of affordable housing. I understand that providing false or misleading information under oath may subject me to criminal penalties. I fully understand the information requested and the ramifications of my breach of this agreement.

_____ _____

Signature of Tenant/Applicant Date



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)

Any increase in income, such as wages from a new job or an expected pay raise or bonus.

All assets, such as bank accounts, savings bonds, certificates of deposit, stocks, real estate, etc., that are owned by you or any member of your household.

All income from assets, such as interest from savings and checking accounts, stock dividends, etc.

Any business or asset (your home) that you sold in the last two years at less than full value.

The names of everyone, adults or children, relatives and non-relatives, who are living with you and make up your household.

(**Important Notice for Hurricane Katrina and Hurricane Rita Evacuees:** HUD's reporting requirements may be temporarily waived or suspended because of your circumstances. Contact the local housing agency before you complete the housing assistance application.)

Ask Questions

If you don't understand something on the application or recertification forms, always ask questions. It's better to be safe than sorry.

Watch Out for Housing Assistance Scams!

- Don't pay money to have someone fill out housing assistance application and recertification forms for you.
- Don't pay money to move up on a waiting list.
- Don't pay for anything that is not covered by your lease.
- Get a receipt for any money you pay.
- Get a written explanation if you are required to pay for anything other than rent (maintenance or utility charges).

Report Fraud

If you know of anyone who provided false information on a HUD housing assistance application or recertification or if anyone tells you to provide false information, report that person to the HUD Office of Inspector General Hotline. You can call the Hotline toll-free Monday through Friday, from 10:00 a.m. to 4:30 p.m., Eastern Time, at 1-800-347-3735. You can fax information to (202) 708-4829 or e-mail it to Hotline@hudoig.gov. You can write the Hotline at:

HUD OIG Hotline, GFI
451 7th Street, SW
Washington, DC 20410

Social Security and SSI Administration Verifications

The Social Security Administration office no longer allows us to verify your Federal Social Security or SSI.

Therefore, you must provide us with a copy of your most recent Benefit Statement from them showing what your monthly benefit is for the current year.

If you do not have this Benefit Statement, you may contact them to request a Proof of Income letter. You may call them toll-free at 1-800-772-1213. When asked for the reason you are calling say "Benefit Statement", when asked again what you are requesting say "Proof of Income". From there follow their prompts to request this letter.

Instead, you may create a *my* Social Security account on their website, www.socialsecurity.gov, to view and print this information. However, to do so, **you must be able to verify some information about yourself and:**

- Have a valid E-mail address
- Have a Social Security number
- Have a U.S. mailing address, and
- Be at least 18 years of age.

Once you receive this information, please provide it to our office as soon as possible as we cannot continue your paperwork or renew your lease until we receive it. Thank you.

Race and Ethnic Data Reporting Form

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

OMB Approval No. 2502-0204
(Exp. 06/30/2017)

Name of Property	Project No.	Address of Property
Merrill Area Housing Authority		Section 8

Name of Owner/Managing Agent | **Type of Assistance or Program Title:**

Name of Head of Household | **Name of Household Member**

Date (mm/dd/yyyy): _____

Ethnic Categories*	Select One
Hispanic or Latino	
Not-Hispanic or Latino	
Racial Categories*	**Select All that Apply**
American Indian or Alaska Native	
Asian	
Black or African American	
Native Hawaiian or Other Pacific Islander	
White	
Other	

***Definitions of these categories may be found on the reverse side.**

There is no penalty for persons who do not complete the form.

Signature | **Date**

Public reporting burden for this collection is estimated to average 10 minutes 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 information is required to obtain benefits and voluntary. HUD may not collect this information, and you are not required to complete this form, unless it displays a currently valid OMB control number.
This information is authorized by the U.S. Housing Act of 1937 as amended, the Housing and Urban Rural Recovery Act of 1983 and Housing and Community Development Technical Amendments of 1984. This information is needed to be incompliance with OMB-mandated changes to Ethnicity and Race categories for recording the 50059 Data Requirements to HUD. Owners/agents must offer the opportunity to the head and co-head of each household to "self certify' during the application interview or lease signing. In-place tenants must complete the format as part of their next interim or annual re-certification. This process will allow the owner/agent to collect the needed information on all members of the household. Completed documents should be stapled together for each household and placed in the household's file. Parents or guardians are to complete the self-certification for children under the age of 18. Once system development funds are provide and the appropriate system upgrades have been implemented, owners/agents will be required to report the race and ethnicity data electronically to the TRACS (Tenant Rental Assistance Certification System). This information is considered non-sensitive and does no require any special protection.

Instructions for the Race and Ethnic Data Reporting (Form HUD-27061-H)

A. General Instructions:

This form is to be completed by individuals wishing to be served (applicants) and those that are currently served (tenants) in housing assisted by the Department of Housing and Urban Development.

Owner and agents are required to offer the applicant/tenant the option to complete the form. The form is to be completed at initial application or at lease signing. In-place tenants must also be offered the opportunity to complete the form as part of the next interim or annual recertification. Once the form is completed it need not be completed again unless the head of household or household composition changes. There is no penalty for persons who do not complete the form. However, the owner or agent may place a note in the tenant file stating the applicant/tenant refused to complete the form. **Parents or guardians are to complete the form for children under the age of 18.**

The Office of Housing has been given permission to use this form for gathering race and ethnic data in assisted housing programs. Completed documents for the entire household should be stapled together and placed in the household's file.

1. The two ethnic categories you should choose from are defined below. You should check one of the two categories.

1. **Hispanic or Latino.** A person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin, regardless of race. The term "Spanish origin" can be used in addition to "Hispanic" or "Latino."
2. **Not Hispanic or Latino.** A person not of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin, regardless of race.

2. The five racial categories to choose from are defined below: You should check as many as apply to you.

1. **American Indian or Alaska Native.** A person having origins in any of the original peoples of North and South America (including Central America), and who maintains tribal affiliation or community attachment.
2. **Asian.** A person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian subcontinent including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam
3. **Black or African American.** A person having origins in any of the black racial groups of Africa. Terms such as "Haitian" or "Negro" can be used in addition to "Black" or "African American."
4. **Native Hawaiian or Other Pacific Islander.** A person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands.
5. **White.** A person having origins in any of the original peoples of Europe, the Middle East or North Africa.


PLEASE
KEEP
DOCUMENTS
AFTER THIS
PAGE

Merrill Area Housing Authority
Park Place & Westgate LLC
Jenny Towers
715-722-1081 Phone
www.merrillha.com

TENANT SELECTION PLAN

The procedures contained in this TENANT SELECTION PLAN have been established in compliance with the Department of Housing and Urban Development (HUD) Handbook 4350.3 REV-1 Change 4 (Issued 11/27/2013), as amended, and all other applicable federal statutes and regulations. It is designed to promote fairness and uniformity in tenant selection and to promote efficiencies in the process by which applications are processed.

Park Place and Westgate LLC is a Section 8 Multi-Family Project-Based (PBRA) property that is administered by the U. S. Department of HUD and is designated to attract applicants for occupancy from all potentially eligible groups of individuals in the housing area regardless of race, color, religion, sex, national origin, disability, familial status, marital status, source of income, age, ancestry, medical condition, sexual orientation, or any other arbitrary basis. To be eligible for occupancy at these properties, there must be a match between the applicant's income level and family/unit size available. The goal of this Tenant Selection Plan is to establish a guideline for the selection of tenants in accordance with HUD regulations, which will enhance the quality of life for all and improve the financial viability of the Park Place and Westgate LLC.

AVAILABILITY OF PLAN

This plan is available to the public upon request. It will be available at 701 E 1st Street, Merrill, WI 54452 location during normal business hours Monday – Thursday 7:00am – 3:30pm and Friday 7:00am – 12:00pm or by phone request at 715-722-1081.

MODIFICATION OF PLAN

The Multi-Family Project Based Section 8 Tenant Selection Plan will be reviewed at least once annually or when there is a change in HUD regulations to ensure that it reflects current operating practices, program priorities, and HUD requirements. If Park Place and Westgate LLC and/or HUD's Contract Administrator feel the plan needs to be modified in any way, a notice of such modification will be provided by mail to applicants on the waiting list. For this reason, the current Tenant Selection Plan in place at Park Place and Westgate LLC will always be dated.

PROJECT-SPECIFIC REQUIREMENTS

Park Place & Westgate LLC is designated as a general population. Applicant(s) may be required to meet the restrictions as indicated below to proceed with the application process:

- **Park Place & Stonebridge** is designated for **1-4 individuals** who meet the restriction as indicated below to proceed with the application process:
  - A single person cannot occupy a unit with two (2) or more bedrooms unless one of the following applies:
    - ✓ An individual with a disability who needs a larger unit as a reasonable accommodation; or
    - ✓ A displaced individual when no appropriately sized unit is available; or
    - ✓ An elderly individual who has a verifiable need for a larger unit; or
    - ✓ A remaining family member of a tenant's family when no appropriately sized unit is available.
  - A smaller unit size may be assigned upon request; only if occupancy of the smaller unit will not cause serious overcrowding and will not conflict with local codes.
  - A larger unit size may be assigned upon request if one of the following conditions exists:
    - ✓ No eligible family in need of a larger unit and is available to move into the unit within sixty (60) days, the property has the proper size unit for the family, but it is not currently available, and the family agrees in writing to move at its own expense when a proper size unit becomes available.
    - ✓ The family needs a larger unit as a reasonable accommodation for a family member who is an individual with a disability.
  - If a family, based on the number of members, would qualify for more than one (1) unit size, the owner must allow the family to choose which unit size they prefer.
- **Westgate Apartments** are designated for **1-8 individuals** based on unit size and meet the restriction as indicated below to proceed with the application process:
  - A single individual cannot occupy a unit with two (2) or more bedrooms unless one of the following applies:
    - ✓ An individual with a disability who needs the larger unit as a reasonable accommodation; or
    - ✓ A displaced individual when no appropriately sized unit is available; or
    - ✓ An elderly individual who has a verifiable need for a larger unit; or
    - ✓ A remaining family member of a tenant's family when no appropriately sized unit is available.
  - A smaller unit size may be assigned upon request; only if occupancy of the smaller unit will not cause serious overcrowding and will not conflict with local codes.
  - A larger unit size may be assigned upon request if one of the following conditions exists:

- ✓ No eligible family in need of the larger unit and is available to move into the unit within sixty (60) days, the property has the proper size unit for the family, but it is not currently available, and the family agrees in writing to move at its own expense when a proper size unit becomes available.
- ✓ The family needs a larger unit as a reasonable accommodation for a family member who is an individual with a disability.

o If a family, based on the number of members, would qualify for more than one (1) unit size, the owner must allow the family to choose which unit size they prefer.

❖ **Jenny Towers Apartments** are designated for a special population. Applicant(s) may be required to meet the restrictions as indicated below to proceed with the application process:

- **Elderly and Disabled:** Individuals 18 years of age or older or a family who's head or co-head of household or whose sole member is 62 years of age or older applicants.
- **Duplexes and Homes:** Are designated for 2-6 individuals based on unit size and meet the restriction as indicated below to proceed with the application process:
  - o A single individual cannot occupy a unit with two (2) or more bedrooms unless one of the following applies:
    - An individual with a disability who needs a larger unit as a reasonable accommodation.
    - A displaced individual when no appropriately sized unit is available.
    - An elderly individual who has a verifiable need for a larger unit.
    - A remaining family member of a tenant's family when no appropriately sized unit is available.
  - o A smaller unit size may be assigned upon request; only if occupancy of the smaller unit will not cause serious overcrowding and will not conflict with local codes.
  - o A larger unit size may be assigned upon request if one of the following conditions exist:
    - No eligible family in need of the larger unit is available to move into the unit within sixty (60) days, the property has the proper size unit for the family, but it is not currently available, and the family agrees in writing to move at its own expense when a proper size unit becomes available.
    - The family needs a larger unit as a reasonable accommodation for a family member who is an individual with a disability.
  - o If a family, based on the number of members, would qualify for more than one (1) unit size, the owner must allow the family to choose which unit size they prefer.

OCCUPANCY STANDARDS

- 1 Bedroom — Minimum Occupants 1 — Maximum Occupants 2
- 2 Bedroom — Minimum Occupants 2 — Maximum Occupants 4
- 3 Bedroom — Minimum Occupants 3 — Maximum Occupants 6
- 4 Bedroom — Minimum Occupants 4 — Maximum Occupants 8
- A maximum of two (2) individuals per bedroom is allowed.
- Married couples cannot occupy a two (2) bedroom unit unless medically necessary.
- Married couples cannot occupy two (2) separate units unless divorced or legally separated.

PREFERENCES – PARK PLACE & WESTGATE LLC

- Individuals 18 years of age or older: Park Place & Westgate LLC has a no age preference for adults. Acceptable documentation to confirm applicants are 18 years of age or older may include birth certificates, social security card or military documents that show the applicant's birthdate.

PREFERENCES – JENNY TOWERS

Preferences are given to elderly and disabled adults.

- **Elderly** - Jenny Towers, preference for elderly 62 years of age or older. Documentation of ages is issued to confirm that applicants claiming an elderly preference are 62 years of age or older. Acceptable documentation may include birth certificates, social security card, or military documents that show the applicant's birthdate.
- **Adults with Disabilities** - Jenny Towers, preference for adults 18 years of age or older that are diagnosed with a disability. Documentation of disability must confirm only the existence of a disability and not the nature or extent of the disability. Verification of disability may be provided by form or letter, from a physician, psychologist, clinical social worker, or other licensed health care professional.

APPLICATION PROCESS AND SELECTING FROM A WAITING LIST

- An application cannot be accepted unless it is complete. You must designate the number of bedrooms requested, the application must be signed, and dated. Applications are accepted in person or by mail to Merrill Area Housing Authority 701 E 1st Street, Merrill, WI 54452 or faxed to 715-539-5433.
- A waiting list of interested individuals will be created and permanently maintain. The waiting list will be maintained in chronological order and must include the following information:
  - (a) Date and time the applicant applied; and
  - (b) Name of head of household; and
  - (c) Annual income; and

- (d) Identification of need for accessible unit, including the need for accessible features; and
- (e) Unit size.

❖ If an apartment is not available for occupancy when the application is submitted, you will be put on a waiting list. Park Place & Westgate LLC policy is to keep waiting lists open continuously. Your application will be screened and verified when an apartment becomes available prior to occupancy. If you choose to accept an apartment at that time, you will be removed from the waiting list. If you choose to not accept the unit at that time, we will keep you on the waiting list. See updating waiting list for further information.

APPLICANT SCREENING CRITERIA

During the admissions screening process, the owner will perform the necessary background check on all applicants 18 years of age or older for suitability prior to residency. Screening criteria will be applied consistently to all applicants, consideration of extenuating circumstances will be considered in the screening process.

❖ **Credit History:** Priority will be given to current credit activity over older activity. All rent and utilities must be paid in full. Poor credit history is grounds for rejection; however, a lack of credit history is not. Medical expenses up to $10,000 not considered for rejection.

❖ **Rental History:** Any evictions in the last three (3) years, past record of destruction, consistently late or unpaid rental obligations, police activity or poor housekeeping habits resulting in health or safety hazards is grounds for rejection. Lack of rental history is not grounds for rejection.

CRIMINAL ACTIVITY

The owner/agent will investigate and determine appropriate action based on the circumstances surrounding the crime and the tenant's knowledge or involvement in the crime.

The owner/agent may pursue termination of tenancy (eviction) if any household member participates in criminal activity that threatens the health or safety of staff, other tenants, tenants' guests, tenants' service providers, or persons residing in the immediate vicinity of the premises.

If a tenant, a tenant's guest, or a tenant's service provider commits a criminal act on or near the property, the tenant may be subject to termination of tenancy. The owner/agent will investigate evidence of criminal activity reported on or near the property.

Actions may warrant termination of tenancy (eviction) include but are not limited to:

1. Crimes or actions involving violence or potential violence
2. Sex crimes
3. Crimes or actions involving animal abuse
4. Criminal acts covered under the Violence Against Women Reauthorization Act of 2013 (stalking, domestic violence, dating violence or sexual assault)
5. Manufacture or distribution of an illegal or controlled substance
6. Crimes that interfere with a tenant's safety
7. Crimes that interfere with a tenant's right to peaceful enjoyment of the premises
8. Crimes that interfere with the safety of the property staff
9. Fraud
10. Crimes that involve damage to property such as arson, malicious damage
11. Crimes that involve illegal possession or use of weapons
12. Crimes that involve human trafficking
13. Terrorist activities
14. Crimes that involve explosives
15. Use of an illegal drug – on or near the property - when such use may interfere with the health, safety, and right to peaceful enjoyment of the property by other tenants
16. Abuse or pattern of abuse of alcohol that interferes with the health, safety, and right to peaceful enjoyment by other tenants. Standards are based on behavior, not the condition of alcoholism
17. Tenant, tenant's guest, or tenant's service provider is subject to any sex offender registration requirement based on a conviction. The owner/agent will investigate the charges. The tenant must participate in the owner/agent's investigation. If it is discovered that the tenant's guest or service provider is subject to a state lifetime sex offender registry or if the sex offender is considered a threat to public safety, and a qualified evaluator believes the offender is a predator or a sexually violent predator then the guest or service provider will be banned from the property. If the tenant invites or allows such a predator to visit or stay at the property, the owner/agent will initiate termination of tenancy

The property staff and/or the owner/agent will review certain criminal history for all adult household members at each annual certification.

The owner/agent reserves the right to terminate assistance or tenancy if such review of criminal history uncovers any of the following:

1. Any household in which any member was evicted in the last three (3) years from federally assisted housing for drug-related criminal activity

2. A household in which any member is currently engaged in illegal use of drugs or for which the owner/agent has reasonable cause to believe that a member's illegal use or pattern of illegal use of a drug may interfere with the health, safety, and right to peaceful enjoyment of the property by other tenants (The owner/agent has implemented a policy to address the term "currently engaged". Current will be indicated and investigated if there is a record of arrest or conviction within the last twelve (12) months)
3. Criminal activities resulting in felony conviction involving violence, potential violence, destruction of property, human trafficking, terrorist activities, illegal weapons charges or the illegal distribution or manufacture of a controlled substance will result in termination of tenancy.
4. Other Criminal activities resulting in other felony convictions may result in termination of tenancy.
5. A record of three (3) or more separate instances where the tenant is involved in criminal activities resulting in felony conviction will result in termination of tenancy.
6. Criminal activities resulting in misdemeanor convictions involving violence, potential violence, destruction of property, human trafficking, terrorist activities, weapons charges or the illegal distribution or manufacture of a controlled substance will result in termination of tenancy
7. Criminal activities resulting in other misdemeanor convictions may result in termination of tenancy
8. A record of three (3) or more separate instances where the tenant is involved in criminal activities resulting in misdemeanor convictions within three (3) years will result in termination of tenancy
9. United States Code Title 8, subsection 1324(a)(1)(A) prohibits the harboring of illegal aliens. The provision of housing to illegal aliens is a fundamental component of harboring. Tenants may be required to provide proof of citizenship or legal immigration status.
10. Sex Offender Registration: Tenant is currently subject to registration under a state sex offender registration program. If the owner/agent determines that a registered sex offender is part of the household, the owner/agent will allow the household to remove the sex offender. Removal must be documented using a signed, notarized copy of the owner's form. The household will have ten (10) business days to provide verification that the household member has alternative housing or that the household member has applied for alternative housing. Failure to provide such documentation will result in termination of assistance and possible termination of tenancy for all household members. In this case, the owner/agent reserves the right to monitor household composition. If the owner/agent discovers that a sex offender has moved into the unit, assistance will be terminated, and the household will be evicted in accordance with HUD requirements. Any assistance paid-in-error must be returned to HUD. If a

registered sex offender was removed from the household, the owner/agent reserves the right to monitor household composition. If the owner/agent discovers that a sex offender has moved into the unit, assistance will be terminated, and the household will be evicted in accordance with HUD requirements. Any assistance paid-in-error must be returned to HUD.

If the owner/agent discovers an unresolved criminal charge of any criminal activity as described above, the circumstances surrounding the arrest will be investigated.

If there is evidence that the tenant participated in such illegal activity, the owner/agent will meet with the tenant and the other adult household members to determine if the residency should be terminated or if the offending party should be removed from the unit including formal procedures required to remove the member from the household/lease.

Based on a preponderance of the evidence, if the owner/agent investigation indicates that a tenant participated in criminal activity as described above, the tenant may be subject to termination of tenancy (eviction).

SEX OFFENDERS

Note: These rules apply to any household member who was subject to a lifetime sex offender registration requirement at admission and was admitted after June 25, 2001. For admissions before June 25, 2001, there is currently no HUD statutory or regulatory basis to evict or terminate the assistance of the household solely on the basis of a household member's sex offender registration status.

HUD prohibits providing housing assistance to anyone who is subject to a state lifetime sex-offender registry. The owner/agent has opted to make that rule more restrictive by prohibiting any sex offender registrant from living on the property.

If an owner/agent and/or property staff discovers that a household member is a registered sex offender and was admitted in error, the owner/agent and/or property staff will immediately pursue termination of assistance and termination of tenancy. The owner/agent and/or property staff will first offer the family the opportunity to remove the ineligible (sex offender) family member from the household.

If the family is unwilling to remove that individual from the household, the owner/agent and/or property staff must pursue termination of assistance and termination of tenancy for the household in accordance with HUD instruction.

Sex offender screening is conducted at each annual and interim certification.

If any tenant is subject to registration on any state sex offender registry, the owner/agent and/or property staff and/or HUD will immediately notify the household that they have the option to remove the sex offender or the owner/agent and/or property staff will pursue termination of assistance and termination of tenancy.

If the owner/agent has good cause (i.e., notification from a state sex offender registry or law enforcement agency), all household members acknowledge that sex offender screening can be conducted by the owner/agent and/or property staff or by HUD or HUD's representatives.

CRIMINAL ACTIVITY DISCOVERED AFTER MOVE-IN

If the owner/agent discovers that a tenant misrepresented their criminal history at application, the owner/agent will require the household meet with property staff and discuss the information.

The owner/agent will comply with HUD's guidance and the owner/agent's criminal screening criteria when determining what action should be taken. Action may include termination of assistance and/or termination of tenancy depending on the severity of the crime and the willingness of the household to remove the offender.

DISTURBANCES OR INQUIRIES INVOLVING LAW ENFORCEMENT

Tenants are expected to contact law enforcement if they witness any illegal activity or if they feel they are in need of law enforcement intervention or protection.

If any law enforcement agency is called to the property because of any type of illegal disturbance and/or criminal violations caused by a tenant's illegal action, such incident shall be investigated by the owner/agent and/or property staff. If it is determined that a tenant was involved in criminal activity and/or other illegal behavior.

Law enforcement has the right to enter the property and the power to make arrests as needed within the law. At the local level, property is under the jurisdiction of the City of Merrill Police and Lincoln County Sheriff Department.

Disturbances and/or criminal violations where the tenant, a tenant's guest, or a tenant's service provider is involved in illegal activity is considered a lease violation.

If the tenant, the tenant's guest, or the tenant's service provider is the victim, the owner/agent will investigate the circumstances surrounding the specific situation and make a determination whether a lease violation occurred and if termination is appropriate.

The termination of the lease agreement will be conducted as allowed by the terms of the lease agreement and local, state, and federal law, including the provisions provided through the Violence Against Women Act (VAWA).

INCARCERATION

If the owner/agent or property staff discovers that a tenant has been incarcerated, the property staff will investigate the arrest/conviction. If the tenant has been convicted of any of the crimes that would constitute termination of tenancy, the owner/agent and/or property staff will immediately begin the process to terminate tenancy. This may include contacting the remaining household members, in accordance with HUD requirements, and beginning the process to remove the tenant from the household.

If an existing tenant is incarcerated, at least one other adult household member must be listed on the lease in order for other members to remain in the unit. If the remaining household members are minors, the owner/agent is compelled to comply with local law regarding child abandonment. This may include contacting child protective services.

If the incarcerated tenant is the sole household member, the owner/agent will initiate the process required when a unit is abandoned.

ILLEGAL IMMIGRANTS

United States Code Title 8, subsection 1324(a)(1)(A) prohibits the harboring of illegal aliens. The provision of housing to illegal aliens is a fundamental component of harboring. Tenants may be required to provide proof of citizenship or legal immigration status.

For certain HUD programs, eligibility requirements indicate that tenants may be required to provide proof of citizenship or eligible immigration status in order to continue to receive subsidy.

CONSIDERATION OF EXTENUATING CIRCUMSTANCES

In deciding whether to exercise discretion to terminate (evict) an individual or household that has engaged in prohibited criminal activity, the owner/agent will consider all of the circumstances relevant to the particular eviction decision, including but not limited to the seriousness of the offending action; the effect that eviction of the entire household would have on family members not involved in the criminal activity; and the extent to which the tenant has taken all reasonable steps to prevent or mitigate the criminal activity.

CRIMINAL ACTIVITY DISCOVERY

The lease and these House Rules provide grounds for terminating the lease for criminal activity engaged in on or near the premises, by any tenant, household member, or guest. Before terminating any tenant based on involvement in criminal activity, the owner/agent will (as appropriate):

1. Investigate whether the tenant committed a crime;
2. Investigate whether the tenant's guest or service provider committed a crime;
3. Investigate whether the tenant's guest or service provider committed a crime on or near the property;
4. Notify the household of the proposed action based on the information;
5. Provide the content of the criminal record and information about how to obtain a copy of the information if a criminal record was used in the investigation;
6. Provide the tenant with an opportunity to dispute the accuracy and relevance of the information
   obtained from any law enforcement agency;
7. Allow the household the opportunity to remove the household member involved in the indicated criminal activity.

Tenants have ten (10) business days to provide documentation to dispute the owner/agent's information or provide an explanation of mitigating circumstances. If the tenant fails to contact the owner/agent or indicates that he/she cannot provide documentation to refute the criminal activity discovered or provide mitigating circumstances, the owner/agent may begin the process to terminate tenancy.

NOTIFICATION OF APPLICANT REJECTION

If an applicant is denied admission to the property, they will receive a written notice stating the reason(s) for the rejection. The applicant has the right to respond in writing or request a meeting to dispute the rejection within fourteen (14) days of the notice. Individuals with disabilities have the right to request reasonable accommodations to participate in the informal hearing process. If admission is denied because criminal background screening indicates the applicant provided false information; the entity making the determination must provide the subject of the record and the applicant a copy of the information the action is based upon. The subject of the record and the applicant can dispute the accuracy and relevance of the information obtained from any law enforcement agency.

CITIZENSHIP REQUIREMENT

PIH 2018-24 Notice issued 11/27/18 amends, supersedes, or rescinds any of the following information regarding document requirements. Assistance in subsidized housing is restricted to the following:

- U.S. citizens or nationals; and
- Non-citizens who have eligible immigration status.

REQUIRED DOCMENTATION

Each family member, regardless of age, is required to submit the following evidence:

- From U.S. citizens or nationals:
  - ✓ A signed declaration of citizenship; and
  - ✓ A U.S. birth certificate or U.S. passport if applicable.

FROM NON-CITIZENS 18 YEARS AND OLDER

- A signed declaration of eligible non-citizen status and proof of age.

FROM NON-CITIZENS UNDER THE AGE OF 18 CLAIMING ELIGIBLE STATUS

- A signed declaration of eligible immigration status; and
- A signed consent form; and
- One of the OHS-approved documents.
- Those family members not claiming eligible immigration status may elect to sign a statement that they acknowledge their ineligibility for assistance.

GENERAL REQUIREMENTS

- Positive identification with a picture will be required (photocopy may be kept on file). A federal regulation effective June 19, 1995, requires applicants to declare that all family members residing in dwelling units are U.S. citizens, or non-citizens with eligible immigration status, or applicants can choose not to contend that he or she has eligible immigration status thus making the applicant ineligible to receive assistance. Documentation and verification of eligible immigration status will be completed at the time of application. For non-citizen's 18 years of age and older, a signed declaration of eligible noncitizen status and proof of age will be required. Non-citizen's 18 years of age and older must sign a declaration of eligible immigration status and provide a proof of age document. U.S. citizens must sign a declaration of citizenship.
- All applicant(s) must disclose social security numbers for all household members upon move in. Individuals 62 years of age and older as of January 31, 2010, whose initial determination of eligibility was begun prior to January 31, 2010, and those individuals who do not contend eligible immigration status are excluded from disclosure requirements. Applicants may be placed on the waiting list without proof of a social security number. Applicants have ninety (90) days to provide documentation of social

security number at the time the applicant is offered a unit. After ninety (90) days if a social security number has not been provided for all household members, the applicant will be determined ineligible and removed from the list. If a current tenant does not meet the SSN disclosure, documentation, and verification requirements. In the specified time frame, the household tenancy will be terminated due to non-compliance with the lease.

- ❖ Primary applicants must be of legal age to enter into a legal contract under state and local laws.
- ❖ Head of household, co-head, and all other adults (18 years of age and older) in each applicant family must sign an Authorization for Release of Information (HUD Form 9887 and 9887A) prior to being accepted and every year thereafter.
- ❖ An applicant must agree to pay the rent required by the program under which the applicant will receive assistance.

We are pledged to the letter and spirit of the U.S. policy for the achievement of equal housing opportunity throughout the nation. We encourage and support an affirmative advertising and marketing program in which there are no barriers to obtaining housing because of race, color, religion, sex, handicap, familial status, or national origin. TDD 1-800-735-2900

TIME FRAMES FOR SUBMITTING EVIDENCE OF CITIZENSHIP/IMMIGRATION STATUS

- ❖ Applicants must submit required documentation of citizenship/immigration status no later than the date the owner initiates verification of other eligibility factors. Citizen or non-citizen eligibility verification will be done first. Owner determines the applicant's citizenship or immigration status during the initial eligibility determination. Applicant's name may be added to wait list pending verification, but information must be submitted **prior** to move-in.
  - ➢ If the applicant cannot supply the documentation within the owner's specified time frame, the owner may grant the applicant an extension of not more than thirty (30) days, but only if the applicant certifies that:
  - ➢ The evidence is temporarily unavailable; and
  - ➢ Additional time is required for it to be obtained; and
  - ➢ Prompt and diligent efforts will be undertaken to obtain the evidence.
- ❖ However, until the necessary documentation is received, a unit cannot be allotted to the applicant.
- ❖ A request for an extension must be in writing. Owner must inform the applicant in writing if an extension request is granted or denied. If the request is granted, the owner/agent will include the new deadline for submitting the documentation. If the request is denied, the owner/agent will state the reasons for the denial in the written response. When granting or rejecting extensions, the owner/agent will treat applicants consistently.

REVIEWING AND VERIFICATION OF A HOUSHOLD'S CITIZENSHIP/IMMIGRATION STATUS

- Owner employs the INS automated Systematic Alien Verification for Entitlements System (S.A.V.E.) to verify eligibility for housing assistance.
- If secondary verification is necessary, owner must, within ten (10) days of receipt of such requirement, prepare and send OHS Form G-845S, Document Verification Request, to the Department of Homeland Security (OHS) office serving the property's jurisdiction.
- The owner must notify the family in writing as soon as possible if the secondary verification process returns a negative result. The family has thirty (30) days from receipt of the notice to choose which option to follow:
  - Assistance will not be delayed if the family submits immigration information in a timely manner but the OHS verification or appeals process has not been completed.
  - Assistance may be pro-rated if some household members are eligible for assistance and others are not.
  - Assistance must be denied or terminated if all family members are determined ineligible for assistance.
  - If assistance is denied, applicants may appeal the determination with OHS.

SOCIAL SECURITY NUMBER REQUIREMENTS

Applicant(s) must provide documentation of social security numbers for all members of the family.

- Effective January 31, 2010, all household members must provide:
  - The complete and accurate SSN assigned to each member of the applicant's household and
  - Documentation necessary to provide that the social security number is accurate (verification).
  - Adequate documentation to verify the SSN means a social security card issued by the Social Security Administration (SSA) or other acceptable evidence of the SSN, including but not limited to an original social security card; driver's license with SSN; identification card issued by a federal, state, or local agency, a medical insurance provider, or an employer or trade union; earnings statements on payroll stubs, Form 1099; benefit award letter, etc.
- For eligibility purposes, the requirement to disclose an SSN is waived if no SSN has been assigned; and
  - The household member is 18 years of age or older as of January 31, 2010, and eligibility determination started before January 31, 2010.
  - An individual does not contend eligible immigration status.
- Applicant(s) must disclose and provide documentation to verify SSNs for all household members (except those exempts from the SSN requirements) before being housed from the waiting list.

- ❖ Applicant(s) have ninety (90) days from date they are offered a unit to disclose and/or provide documentation to verify all non-exempt household members' SSNs. Applicants may retain their position on the waiting list during this time. After ninety (90) days, if SSN has not been disclosed and verified, the applicant should be determined ineligible and removed from the waiting list.
- ❖ The SSN provided will be compared to the information recorded in the SSA database (through HUD's EIV System) to ensure that the social security number, birthdate, and last name match. If EIV returns an error that cannot be explained or resolved, assistance and/or tenancy may be terminated, and any assistance paid in error must be returned to HUD. If the applicant(s)/tenant(s) deliberately provides an inaccurate social security number, the owner/agent and/or HUD may pursue additional penalties due to attempted fraud.
- ❖ Adding household members after move-in:
  - o For a new member, regardless of age, who has a social security number, SSN documentation must be provided no later than the processing of the certification that adds the new person to the household.
  - o If the new member is a child under 6 without a social security number, the household has ninety (90) days to provide SSN documentation. An additional ninety (90) days will be granted only if failure to provide documentation is due to circumstances beyond the tenant's control.
- ❖ Applicant(s) without social security numbers can contact the Social Security Administration: website: www.ssa.gov or call 1-800-772-1213.

INCOME LIMITS

Applicant's annual income must not exceed program income limits established by HUD and WHEDA annually. The only exception to this guideline is if the program has available two (2) market rate apartments that you may qualify for at the time of application.

- ❖ Park Place & Westgate LLC is a Section 8 Multi-Family Project-Based (PBRA) where only applicants whose income is at or below the low-income limit as defined by HUD are eligible for occupancy. The income limits for this project's type of subsidy are:
  - o Low-Income Limit 80% of Median Income
  - o Very Low-Income Limit 50% of Median Income
  - o Extremely Low-Income Limit 30% of Median Income
- ❖ Income Targeting: At least forty percent (40%) of the assisted units that become available in each fiscal year must be made available for leasing to families whose income does not exceed thirty percent (30%) of the area median income (extremely low-income).
- ❖ All information is subject to verification and applicant(s) must sign an Authorization for Release of Information 9887 & 9887A.
- ❖ Applicant(s) must submit income and asset information for verification.

SINGLE RESIDENCE/SUBSIDY CRITERIA

All applicants **MUST disclose** if they are currently receiving housing assistance. The owner/agent will not knowingly assist applicants who will maintain a residence in addition to the HUD-assisted unit. HUD provides the owner/agent with information about an applicant's current status as a HUD housing assistance recipient. The owner/agent will use the Enterprise Income Verification System (EIV) to determine if the applicant or any member of the applicant's household is currently receiving HUD assistance.

Nothing prohibits a HUD housing assistance recipient from applying to this property. However, if the applicant moves into this property before moving out of another subsidized unit, the applicant will be required to pay market rent until the move out from the previous property is complete. Assistance in the new unit will begin, if the household is still eligible, the day after assistance ends for the previous unit.

If the applicant or any member of the applicant household fails to disclose rental history fully and accurately, the application may be denied based on the applicant's "misrepresentation" of information.

This information will be reviewed on an annual basis at each annual certification. If any household member receives or attempts to receive assistance in another HUD assisted unit while receiving assistance on this property, the household member will be required to reimburse HUD for assistance paid in error. This is considered a material lease violation and may result in penalties up to and including eviction and pursuit of fraud charges.

RESTRICTIONS ON STUDENTS FOR SECTION 8 ASSISTANCE

A student enrolled in an institute of higher education as defined by the Higher Education Act of 1965 Amended 1998 will be deemed eligible for Section 8 Assistance if the student meets all other eligibility requirements, passes screening criteria and is:

- Living with parents/guardian who are receiving Section 8 Assistance or are applying to receive Section 8 Assistance; or
- Disabled and receiving assistance as of November 30, 2005; or
- At least 24 years of age; or
- Veteran; or
- Married; or
- Can provide independence of parents including providing certification that the parents did not claim the student on the most recent tax return; or
- An individual who has parents who are income eligible for the Section 8 Program.

A student who is otherwise eligible and meets screening requirements is eligible for assistance if the student meets the criteria indicated below. Section 8 Assistance shall be

provided to any individual who is enrolled as either a part-time or full-time student at an institution of higher education for obtaining a degree, certificate, or other program leading to a recognized educational credential when a student:

- ❖ Is classified as a vulnerable youth; a student meets HUD's definition of a vulnerable youth when:
  - o The individual is/was an orphan, in foster care, or a ward of the court at any time when the individual was 13 years of age or older; or
  - o The individual is, or was immediately prior to attaining the age of majority, an emancipated minor or in legal guardianship as determined by a court of competent jurisdiction in the individuals state of legal residence; or
  - o The individual has been verified during the school year in which the application was submitted as either an unaccompanied youth who is a homeless child or youth (as such terms are defined in section 725 of the McKinney-Vento Homeless Assistance Act) (42 U.S.C. 11431 et seq.) or as unaccompanied, at risk of homelessness, and self-supporting by:
    - A local educational agency homeless liaison designated pursuant to the McKinney-Vento Homeless Assistance Act; or
    - The director of a program funded under the Runaway and Homeless Youth Act or a designee of the director; or
    - The director of a program funded under subtitle B of title IV of the McKinney-Vento Homeless Assistance Act (relating to emergency shelter grants) or a designee of the director; or
    - A financial aid administrator.
- ❖ The individual is a student for whom a financial aid administrator makes a documented determination of independence by reason of other unusual circumstances.
  - o Any financial assistance a student receives
    (1) Under the Higher Education Act of 1965; or
    (2) From private sources, or
    (3) From an institution of higher education that is in excess of amounts received for tuition and other fees are included in annual income; except,
  - o If the student is 23 years of age or older with dependent children; or
  - o If the student is living with his or her parents who are receiving Section 8 Assistance.
- ❖ Financial assistance that is provided by individual(s) not living in the unit is not part of the annual income if the student meets the Department of Education's definition of "vulnerable youth".

INCOME TARGETING

To comply with the U.S. Department of Housing and Urban Development's (HUD) Income Targeting, Park Place & Westgate LLC must rent forty percent (40%) of subsidized units that

become available each year to extremely low-income households, which earn thirty percent (30%) or less of the area's median income, as determined by HUD.

If management determines that following: Park Place & Westgate LLC, waiting list in standard chronological order may not (or will not) achieve the admissions necessary to meet the income-targeting requirement, then management must implement procedures that will ensure compliance.
Management will implement the procedure of alternating between the first extremely low-income (ELI) applicant on the waiting list and the applicant at the top of the waiting list. To implement this method, management will select the first extremely low-income applicant on the waiting list (which may mean "skipping over" some applicants with higher incomes) for the available unit, and then select the next eligible applicant currently at the top of the waiting list (regardless of income level) for the next available unit. As subsequent units become available, tenant selection continues to alternate between the next extremely low-income applicant and the eligible applicant at the top of the waiting list until the forty percent (40%) target is reached.

Note: An applicant may be skipped over but will not lose his or her place on the waiting list.

UPDATING THE WAITING LIST

Park Place & Westgate LLC waiting list is maintained on a "first come, first serve" basis, determined by the date and time of application submission.

- An updated letter will be mailed to active waiting list applicant(s) every six (6) months. The letter shall include a self-addressed envelope to return the response to the management office. Applicant will be provided fourteen (14) days in which to respond. If the applicant replies affirmatively, his or her application will retain its position on the waiting list. If the reply is negative or if updated letter is returned because the address is not current, the applicant's name will be removed from the waiting list. If no reply is received within the specified time frame fourteen (14) days plus a week for mail delivery, the applicant's name shall be removed from the waiting list;
  - The waiting list update conducted by management does not relieve applicant(s) of the responsibility to notify management of a change in address or a change in other critical aspects of the application.
  - Applicant(s) will be allowed to refuse the first offer of a unit for any reason but will be advised that if he or she refuses a second offer, the applicant's name shall be removed from the waiting list. If the second refusal is due to a disability or an extenuating circumstance, however, then another offer will be made as a reasonable accommodation. Applicants who refuse a unit a second time shall be advised that they can reapply, but that their application will be treated as a new application for waiting list priorities.

FILLING VACANCIES

Upon vacancy, the applicant first on waiting list is contacted by the Property Manager by phone as every effort is made to contact applicant. Property Manager contacts all telephone numbers listed on application, including emergency contacts. Applicant is called a minimum of four times within 24 to 48 hours. If the applicant cannot be reached the next applicant is contacted.

An applicant is contacted when a unit is available, the Property Manager will contact the applicant by phone to set up an application interview. The applicant will also be instructed to bring with him or her to this interview certain financial and medical expense documentation, a social security card and a picture ID (either a driver's license or a state-issued photo ID).

Management shall simultaneously initiate the process to obtain the verifications necessary to certify the proposed household's income and assets in accordance with HUD regulations and to determine the applicant's compliance with the tenant selection criteria set forth below.

NOTE: *If the next available unit is to be leased to an extremely low-income applicant, the applicant's income should be re-verified. If the income has changed, and the applicant is no longer extremely low-income, he or she should be put back on the list and the application documented as to why the applicant(s) was passed over. Management shall then move on to the next extremely low-income application and follow the same income verification procedure. If that applicant is still considered extremely low-income, management shall proceed with the application interview.*

ENTERPRISE INCOME VERIFICATION SYSTEM (EIV)

Park Place & Westgate LLC will utilize the Department of Housing and Urban Development's (HUD) Enterprise Income Verification (EIV) system during the occupancy process. The EIV system is a source of information for verifying employment and household income. Data will include income from such sources as Social Security, Social Security Disability, SSI, Wages, Unemployment Compensation, Medicare/Medicaid, etc. for each family member. EIV will also show whether an applicant or any member of the applicant household is currently receiving HUD assistance. (See Single Residence/Subsidy Criteria above).

An existing tenant search report shall be run prior to offering an applicant a unit to determine if applicant is currently receiving HUD housing assistance. For existing tenants, EIV information will be reviewed on an annual basis at each annual certification. Failure of any household member to report accurate income, employment status, or current status as a HUD housing assistance recipient constitutes a material lease violation and may result in penalties up to and including eviction and pursuit of fraud charges. In addition, the household member will be required to reimburse HUD for assistance paid in error.

Tenants shall be notified of any discrepancies in the EIV data and given an opportunity to dispute and discuss the findings. The data contained and provided by the EIV system is subject to the provisions of the Federal Privacy Act (5 U.S.C. § 552 as amended) and other regulations governing the privacy of information. All EIV originals shall be retained during the term of the tenancy and for at least three (3) years thereafter, at which time they shall be destroyed by shredding.

INTERVIEW TOPICS

At the applicant(s) interview, the Property Manager shall:

- Confirm and update all information provided on the application.
- Explain program requirements, verification procedures, and penalties for false information. The penalties include eviction, loss of assistance, fines up to $10,000 and imprisonment for up to five (5) years.
- Obtain family income and composition information and other data needed to certify eligibility and compute the tenant's share of rent.
- Review the financial information on the application and specifically ask the applicant whether any member of the proposed household:
  - Receives any types of income (e.g., self-employment income, unemployment compensation, income maintenance payments).
  - Has any assets.
- Sign the release of information consent portion of the Authorization for Release of Information (Forms HUD 9887 & 9887A) and any other necessary verification required. These forms are signed by all individual's 18 years of age or older who will reside in the unit.
- Obtain consent forms for verification for all household members as appropriate.
- Require the applicant and any individual who will reside in the unit to disclose and document all social security numbers.
- Advise the family that HUD will compare the information families' supply with information federal, state, or local agencies have on those families' income and household composition.
- Inform the applicant(s) that final decision on eligibility cannot be made until all verifications are complete.
- Provide each tenant with a copy of the appropriate HUD fact sheet, which describes how the tenant's rent is calculated.
- Inform applicants that the Executive Director has the responsibility for taking reasonable steps to provide meaningful access to the community's programs and activities and that they will need to complete the tenants' request for reasonable accommodation if they require a change in rules, policies or procedures or modification to a unit to insure their use and enjoyment of the community.
- Inform all applicant(s) about the rules on owning pets.

- ❖ Inform applicant(s) that if documents requested are not returned in their entirety by the deadline specified, management will process the next applicant.

PET AGREEMENT

Applicant(s)/tenant(s) 62 years of age and older or disabled can have pets but management must pre-approve all pets before the pet is allowed in any apartment or on the property. There is a maximum of one (1) pre-approved pet per household with a maximum weight of thirty (30) lbs. Please refer to the attached Pet Agreement for further guidelines.

UNIT TRANSFER REQUEST

After tenancy commences, if a household wishes to transfer to a different apartment due to change in family composition or for a reasonable accommodation, certified by a qualified individual, based on the need for an accessible unit or due to a request for a reasonable accommodation, the transfer will be granted when the appropriate unit becomes available. These transfers will take priority over applicant(s) on the waiting list. The household must meet occupancy requirements for the unit. After move-in if the unit becomes underutilized or overcrowded due to changes in family size, the management will require the family to move to an appropriately sized unit when one becomes available:

- ❖ Unit transfer may be requested based on the need for an accessible unit.
- ❖ The tenant must submit a transfer request form to the Property Manager.
- ❖ At the time the tenants' request is made and approved it is placed on the top of the waiting list and when a unit becomes available, the tenant will be contacted.
- ❖ A unit inspection will be done for both the move-out and move-in.
- ❖ Security deposit will transfer to the new unit number less any cost of current unit damages.
- ❖ There will be a limit of one (1) approved transfer during your tenancy.
- ❖ The tenant is responsible for any payment due for damages to the unit at time of move-out.
- ❖ Any change in monthly rent will be due at the time the keys are issued for the new unit.
- ❖ The tenant has three (3) days to move to the designated unit of transfer.
- ❖ If the tenant declines a unit that becomes available that is suitable and meets his or her needs, they will no longer be eligible to request for another transfer during his or her tenancy.
- ❖ Unit transfers will not be allowed for better view, larger unit, or different floor etc.
- ❖ Unit transfers will not be allowed in the first (1) year of tenancy.

PROTECTIONS PROVIDED UNDER THE VAWA

Please see the Property VAWA Policy for a more detailed explanation of the process used to assist you in exercising protections provided under VAWA.

The Violence Against Women Act (VAWA) provides protections to women or men who are applicant to or tenants of any "covered housing program" and who are the victims of domestic violence, dating violence, sexual assault and/or stalking – collectively referred to as VAWA crimes. The owner/agent understands that, regardless of whether state or local laws protect victims of VAWA crimes, people who have been victims of violence have certain rights under federal fair housing regulation.

This policy is intended to support or assist victims of VAWA crimes and protect victims, as well as affiliated persons, from being denied housing or from losing their HUD assisted housing as a consequence of their status as a victim of VAWA crimes.

VAWA protections are provided to affiliated persons which are defined as follows:

1. A spouse, parent, brother, sister, or child of the victim, or a person to whom the victim stands in the place of a parent or guardian (for example, the affiliated individual is a person in the care, custody, or control of the victim); or
2. Any individual, tenant/applicant, or lawful occupant living in the household of that individual.

Other than what is described above, VAWA protections are not provided to guests, unauthorized tenants, or service providers (including live-in aides) hired by the tenant.

VAWA ensures that victims are not denied housing and housing assistance is not terminated solely because the person is a victim of a VAWA crime.

Unless such requirements interfere with protections provided under the VAWA, being a victim of a VAWA crime is not reason to change the screening requirements set forth in the Tenant Selection Plan.

For example: An owner/agent may waive the requirement to review landlord history for an applicant if the victim has provided necessary documentation to certify their status as a victim of a VAWA crime and if contacting a previous landlord would put the applicant's location at risk of exposure to the accused perpetrator/imminent danger. Eligibility requirements for housing programs cannot be modified. Being a victim of a VAWA crime does not automatically make a person eligible for housing assistance.

Being a victim of a VAWA crime is not reason to waive requirements set forth in the HUD Model Lease or in any lease attachment or HUD approved lease addendum unless being a victim of a VAWA crime was the cause of the lease violation.

For example: An owner/agent may waive the requirement for a 30-day notice to vacate if the victim has provided necessary documentation to certify their status as a victim of a VAWA crime and the tenant wishes to move to elude the accused perpetrator.

When applicable, the tenant will be required to work with the owner/agent to reduce the likelihood of future lease violations.

The owner/agent will not assume that any act is a result of abuse covered under the Violence Against Women Act. In order to receive the protections outlined in the VAWA, the applicant/tenant must specify that he/she wishes to exercise these protections. If any applicant or tenant wishes to exercise the protections provided in the VAWA, he/she should contact the owner/agent or the property staff immediately. *(Note from RBD – while this statement is correct, OAs must decide if they want to include this statement in the final policy. You should make sure that appropriate notices include information about VAWA protections. Please delete this note before completing your policy)*

CONFIDENTIALITY

The owner/agent is committed to ensuring that the Privacy Act is enforced in this and all other situations.

HUD Form 5380 *Notice of Occupancy Rights under the Violence Against Women Act* provides notice to the tenant/applicant of the confidentiality of information about a person seeking to exercise VAWA protections and the limits thereof. The identity of the victim and all information provided to the owner/agent relating to the incident(s) of abuse covered under the VAWA will be retained in confidence.

Information will not be entered into any shared database nor provided to a related entity, except to the extent that the disclosure is

1. Requested or consented to by the victim in writing for a limited period of time; or
2. Required for use in an eviction proceeding or termination of assistance; or
3. Otherwise required by applicable law.

The owner/agent will retain all documentation relating to an individual's domestic violence, dating violence, sexual assault and/or stalking in a separate file that is kept in a separate secure location from other applicant or tenant files.

REQUESTS & CERTIFICATION

The person seeking VAWA protections may make a request for a VAWA accommodation in any reasonable manner. The tenant/applicant may:

- Complete a VAWA Request Form provided by the owner/agent
- Submitted a written request *(including email but not texting)*
- Make a personal (oral) request either in person or via phone/Facetime, etc.

Once a request is made, the owner/agent requires that the applicant certifies their status as a victim of a VAWA crime or as a person affiliated with a victim of a VAWA crime using one of the following methods. Applicants and tenants decide which of the following methods is used to certify their status as a victim of a VAWA crime or as someone affiliated with a victim of a VAWA crime.

Option 1: When the owner/agent responds to a request to exercise protections provided under the VAWA, the owner/agent will request that an individual provide HUD Form 5382 *Certification as a Victim of Domestic Violence, Dating Violence, Stalking or Sexual Assault* to certify status as a VAWA victim or as a person affiliated with a VAWA Victim. The person seeking VAWA protections may obtain this form from the property staff or from HUD's web site.

The owner/agent understands that the delivery of the certification form to the applicant/tenant via mail may place the victim at risk, (e.g., the accused perpetrator may monitor the mail). The owner/agent will work with the applicant/tenant in making acceptable delivery arrangements.

Option 2: Alternatively, if the applicant/tenant has sought assistance in addressing domestic violence, dating violence, sexual assault and/or stalking from a federal, state, tribal, territorial jurisdiction, local police or court, the tenant may submit written proof of this outreach in lieu of the certification form.

The owner/agent will accept a federal, state, tribal, territorial, or local police record or court record other official record documenting status as a victim of a VAWA crime or a person affiliated with a victim of a VAWA crime a defined in this policy.

Option 3: The owner/agent will also accept a document signed and attested to by a professional *(employee, agent or volunteer of a victim service provider, an attorney, medical personnel, etc.)* from whom the person seeking VAWA protections has sought assistance in addressing domestic violence, dating violence, sexual assault and/or stalking or the effects of the abuse. This document must be signed by the applicant/tenant.

The signatory attests under penalty of perjury that he/she believes it is the occurrence of the incident of domestic violence, dating violence, sexual assault, or stalking that is the ground for protection and remedies under the VAWA, and that the incident meets the applicable definition of domestic violence, dating violence, sexual assault, or stalking.

Based on HUD's instruction above, the written statement must be signed, dated, and notarized or witnessed, and must include the following language:

Name of person seeking protections has worked with me to receive assistance in addressing domestic violence, dating violence, sexual assault and/or stalking or the effects of the abuse.

Name of professional providing documentation believe it is the occurrence of the incident of domestic violence, dating violence, sexual assault, or stalking that is the ground for protection and remedies under the VAWA, and that the incident meets the applicable definition of domestic violence, dating violence, sexual assault, or stalking

Title 18, Section 1001 of the U.S. Code states that a person is guilty of a felony for knowingly and willingly making false or fraudulent statements to any department of the United States Government, HUD, the PHA and any owner (or any employee of HUD, the PHA or the owner) may be subject to penalties for unauthorized disclosures or improper uses of information collected based on the consent form. Use of the information collected based on this verification form is restricted to the purposes cited above. Any person who knowingly or willfully requests, obtains, or discloses any information under false pretenses concerning an applicant or participant may be subject to a misdemeanor and fined not more than $5,000. Any applicant or participant affected by negligent disclosure of information may bring civil action for damages, and seek other relief, as may be appropriate, against the officer or employee of HUD, the PHA or the owner responsible for the unauthorized disclosure or improper use. Penalty provisions for misusing the social security number are contained in the Social Security Act at 208 (a) (6), (7) and (8). Violation of these provisions are cited as violations of 42 U.S.C. 408 (a) (6), (7) and (8).

The information provided above is true and is based on my knowledge of incidents involving domestic violence, dating violence, sexual assault, or stalking.

Signed and dated by person providing certification: _____

I acknowledge that submission of false information is a basis for denial of admission, termination of assistance, or eviction. In addition, providing false information may prompt the owner/agent to notify HUD and pursue civil action related to fraud based on HUD requirements. I am requesting to exercise protections provided through the VAWA because I am a victim of

domestic violence, dating violence, stalking and/or sexual assault (VAWA crimes) or I am a person affiliated with someone who is a victim of a VAWA crime as defined in this document.

Signed and dated by person seeking VAWA protections: _____

The owner/agent can provide you with a form that can be used to fulfill this requirement.

If the person seeking VAWA protections cannot provide any of the documents described above, the person should contact the property management staff or the owner/agent to discuss acceptable alternatives. If the documents above cannot be provided, the owner/agent will be the final decision maker regarding acceptable alternatives.

The victim is not required to name his/her accused perpetrator if doing so would result in imminent threat or if the victim does not know the name of his/her accused perpetrator.

The person seeking VAWA protections will have thirty (30) calendar days from the date of the written request to provide certification using any of the options above

This certification may be submitted in an equally effective manner, as a reasonable accommodation, if there is the presence of a disability.

If the owner/agent receives documentation that contains conflicting information *(including certification forms from two or more members of a household each claiming to be a victim and naming one or more of the other petitioning household members as the perpetrator)*, the owner/agent will require an applicant or tenant to submit third-party documentation, as described above in Option 2 or Option 3, within thirty (30) calendar days of the date of the request for the third-party documentation.

To ensure that a person is not wrongly accused of committing an act covered under the VAWA, the owner/agent will carefully evaluate abuse claims as to avoid denial, termination of assistance, termination of tenancy or eviction based on false or unsubstantiated accusations.

The owner/agent will review and respond to requests to exercise protections provided under the VAWA as quickly as possible but within no more than ten (10) business days of receiving all required documentation. The owner/agent may provide the response in any manner acceptable to the victim and the owner/agent. Responses include:

- Approval of the Request for a specific VAWA accommodation
- Denial of the Request for a specific VAWA accommodation
- Request for additional information or Request to Meet

If the request is denied, the person seeking VAWA protections will have the right to appeal. Requests to appeal must be received within ten (10) business days of the date of the denial. When requested, the appeal will be held with someone who was not involved in the original decision to deny. The owner/agent will grant a reasonable accommodation when there is the presence of a disability.

LEASE BIFURCATION

If the owner/agent determines that physical abuse caused by a tenant is clear and present, the law provides the owner/agent the authority to bifurcate a lease *(i.e., remove, evict, or terminate housing assistance to any accused perpetrator*), while allowing the victim, who lawfully occupies the home, to maintain tenancy.

The owner/agent may attempt to evict the accused perpetrator, but tenants should know that state/local tenant/landlord laws prevail, and the owner/agent must comply with such laws. The owner/agent cannot guarantee that a court will award or enforce an eviction.

The tenant must keep in mind that eviction of or termination action must be in accordance with the procedures prescribed by federal, state, and local law. The owner/agent is committed to attempting to assist the victim and persons affiliated with the victim, however, evictions are generally carried out through the court system and the owner/agent cannot override or circumvent a legal decision.

In the event that one household member is removed from the unit because of engaging in acts of domestic violence, dating violence, sexual assault and/or stalking against another household member, an appropriate certification will be processed reflecting the change in household composition. Special consideration will be given if the remaining household members are not qualified to remain in the unit as a "remaining household member".

LEGAL ACTION

Victims are encouraged to seek police/legal protection from their accused perpetrator. In some cases, the owner/agent may file a restraining order against the accused perpetrator to prevent the accused perpetrator from entering the property.

The VAWA does not limit the authority of an owner/agent, when notified of a court order, to comply with a court order with respect to:

- The rights of access or control of property, including civil protection orders issued to protect a victim of domestic violence, dating violence, sexual assault, or stalking; or
- The distribution or possession of property among members of a household.

TERMINATION OF TENANCY OR TERMINATION OF ASSISTANCE

The VAWA does not limit an owner/agent's authority to deny, evict or terminate assistance to a tenant/applicant for any violation that is not the result of an act of domestic violence, dating violence, sexual assault, or stalking.

The owner/agent will not subject the tenant/applicant, who is or has been a victim of domestic violence, dating violence, sexual assault, or stalking, or is affiliated with an individual who is or has been a victim of domestic violence, dating violence, sexual assault, or stalking, to a more demanding standard than other tenant/applicants in determining whether to evict or terminate assistance.

The VAWA does not limit an owner/agent's authority to deny, terminate assistance to, or evict a tenant/applicant under a covered housing program when the owner/agent can demonstrate an actual and imminent threat *(to other tenant/applicants or those employed at or providing service to property of the covered housing provider)* would be present if that tenant/applicant or lawful occupant is not evicted/terminated. In this context, words, gestures, actions, or other indicators will be considered an "actual and imminent threat" if they meet the standards provided in the definition of "actual and imminent threat".

Note: ***Actual and imminent threat*** *refers to a physical danger that is real, would occur within an immediate time frame, and could result in death or serious bodily harm. In determining whether an individual would pose an actual and imminent threat, the factors to be considered include: The duration of the risk, the nature and severity of the potential harm, the likelihood that the potential harm will occur, and the length of time before the potential harm would occur.*

Determinations about the presence of imminent danger will not be based on stereotypes but will be tailored to particularized concerns about individual tenants.

The owner/agent will take into account individual circumstances when making a determination to terminate tenancy; such circumstances might include, among other things, the seriousness of the offending action, the extent of participation by the leaseholder in the offending action, and whether the leaseholder, if not the wrongdoer, took all feasible steps to prevent the offending action from occurring and has removed the offending person from the lease or otherwise banned the offending person from the premises in the future.

Any eviction or termination of assistance will be initiated only when there are no other actions that could be taken to reduce or eliminate the threat. Examples of such action include, but are not limited to:

- Transferring the victim to a different unit when doing so would reduce or eliminate the threat – *Also see Addendum A for information about VAWA Emergency Transfers,*
- Barring the perpetrator from the property,
- Contacting law enforcement to increase police presence
- Develop other plans to keep the property safe, or
- Seeking other legal remedies to prevent the perpetrator from acting on a threat

LEASE ADDENDUM

The HUD approves lease addendum will be implemented and provided in accordance with HUD guidance.

VAWA EMERGENCY TRANSFERS

The OWNER/AGENT is concerned about the safety of tenants and applicants, and such concern extends to tenants and applicants who are victims of domestic violence, dating violence, sexual assault, or stalking – collectively referred to as VAWA crimes.

The owner/agent has developed a VAWA Emergency Transfer (VET) Plan that allows victims of VAWA crimes or people associated with victims of VAWA crimes to request a VET. Please refer to the property's VAWA Policy and VET Policy for more detailed information.

DEFINITIONS

Please be aware of the following definitions:

Internal VAWA emergency transfer refers to an emergency relocation of a tenant to another unit where the tenant would not be categorized as a new applicant (usually referred to as a unit transfer); that is, the tenant may reside in the new unit without having to undergo an application process. If a unit is available, the tenant must be eligible for the unit based on the requirements set forth by the governing agency. The tenant should discuss unit transfer

eligibility requirements with the owner/agent and/or property staff to fully understand the requirements.

External VAWA emergency transfer refers to an emergency relocation of a tenant to another unit where the tenant would be categorized as a new applicant; that is the tenant must undergo apply and be eligible in order to reside in the new unit. The applicant may be required to meet the eligibility requirements and/or screening requirement set forth by the agencies that govern the housing program and by the property's owner/agent.

Safe unit refers to a unit that the victim of domestic violence, dating violence, sexual assault, or stalking believes is safe.

VAWA EMERGENCY TRANSFER (VET)

In accordance with the Violence Against Women Act (VAWA), THE OWNER/AGENT allows tenants who are victims of VAWA crimes or people who are affiliated with victims of VAWA crimes to request a VAWA Emergency Transfer from the tenant's current unit to another unit that is part of this property (internal transfer). Tenants' who request and qualify for a VAWA Emergency Transfer will receive equal preference to any other tenant who requests and qualifies for any other emergency unit transfer. Selection will be based on date and time the completed request and all required documents are received.

Tenants may request a VAWA Emergency Transfer from the tenant's current unit to another unit that is part of another property (external transfer). Tenants may also request assistance if they wish to request a VAWA Emergency Transfer to a unit that is part of this property (external transfer).

Regardless of whether the tenant/applicant is applying for an internal VAWA Emergency Transfer or an external VAWA Emergency Transfer, tenants/applicants requesting a VET must qualify for the new unit based on the requirements set forth by the governing agency.

When requesting an external VAWA Emergency Transfer, the tenant/applicant should understand that they may also be subject to other screening requirements set forth by the owner/agent responsible for the other property.

The tenant or applicant is responsible for paying for any expenses associated with the move.

The U.S. Department of Justice (DOJ) administers programs that provide funding for victims covered by VAWA, and the Victims Crime Fund could be used to pay for relocation expenses of these victims, or to provide other sources of support, which could free up funding to pay for moving costs. Information about the Crime Victims Fund is available at: https://www.ovc.gov/about/victimsfund.html. Information about Office of Violence Against Women grants is available at www.justice.gov/ovw/grant-programs.

ELIGIBILITY FOR VAWA EMERGENCY TRANSFERS

(*Note from RBD –This language is mandatory in your Emergency Transfer Plan but not necessarily mandatory in the TSP. Please delete this note before completing your policy*) A tenant/applicant is eligible for a VAWA Emergency Transfer (VET) when:

1. The person making the request is a victim of a VAWA crime or are a person affiliated with a victim of a VAWA crime
2. There is a request for a VAWA Emergency Transfer; and
3. The tenant reasonably believes that there is a threat of imminent harm if the tenant remains within the same unit; or

If the tenant is a victim of sexual assault, the tenant may be eligible to transfer if the sexual assault occurred on the premises within the 90-calendar day period preceding a request for a VAWA Emergency Transfer.

This is true even if the tenant is not a tenant in good standing.

A tenant/applicant requesting a VAWA Emergency Transfer (VET) must expressly request the transfer in accordance with the procedures described in the property VET Policy.

SAFETY AND SECURITY OF APPLICANTS AND TENANTS

Victims of VAWA crimes and/or any person affiliated with a victim of a VAWA crime are urged to take all reasonable precautions t

PRIVACY POLICY

It is the policy of the property to guard the privacy of individuals to ensure the protection of such individuals' records maintained by the property. Therefore, the property shall not disclose any personal information contained in its records to any individual or agency unless the individual about whom such information is requested provides written consent to such disclosure (as permitted in the Authorization for Release Information Form). Staff are to limit the use or disclosure of, and requests for, PHI to the minimum necessary to accomplish the

intended purpose. Internal and external auditors, surveyors, and program monitors from federal funding sources (HUD) are authorized to access PHI as applicable.

This privacy policy in no way limits the property's ability to collect needed information to determine eligibility and to compute rent. Consistent with the intent of Section 504 of the Rehabilitation Act of 1973, any information obtained on the handicapped or disability of an individual will be treated in a confidential manner.

SECTION 504 & FAIR HOUSING COMPLIANCE

It is the policy of Park Place & Westgate LLC to provide housing on an equal opportunity basis in compliance with all applicable nondiscrimination and equal opportunity laws, including without limitation the following laws, as amended from time to time: Title VI of the Civil Rights Act of 1964; Title VIII and Section 3 of the Civil Rights Act of 1968 (as amended by the Community Development Act of 1974 and the Fair Housing Amendments Act of 1988); Executive Order 11603; Section 504 of the Rehabilitation Act of 1973; The Age Discrimination Act of 1975; Americans with Disabilities Act of 1990; and the Florida Fair Housing Act:

- In carrying out this Tenant Selection Plan: Park Place & Westgate LLC, will not discriminate against any person because of race, color, religion, sex, disability, familial status, national origin, sexual orientation, gender identity or marital status. Park Place & Westgate LLC does not discriminate based on disability status in the admission or access to, or treatment or employment in, its federally assisted programs and activities. Individuals with disabilities have the right to request reasonable accommodations.
- The Chief Compliance/QA Officer has been designated to coordinate compliance with the non-discrimination requirements contained in HUD's regulations implementing Section 504 (24 CRF part 8 dated June 2, 1988). The Chief Compliance/QA Officer can be reached at 903-791-2270 or 6101 North State line Ave. Texarkana, Texas 75503 orlyoung@oppinc.org
- The property shall not...
  - Deny any family the opportunity to apply for housing, nor deny any eligible applicant the opportunity to lease housing suitable to its needs; or
  - Provide housing which is different from that provided to others; or
  - Subject an individual to segregation or disparate treatment; or
  - Restrict an individual's access to any benefit enjoyed by others in connection with the housing program; or
  - Treat an individual differently in determining eligibility or other requirements for admission.
  - Deny an individual access to the same level of services; or
  - Falsely deny the availability of a unit.
- Applicant(s)/tenant(s) with disabilities or limited English proficiencies and reasonable accommodations. Park Place & Westgate LLC will make reasonable accommodations in

policies or reasonable modification of common or unit premises for all applicant(s)/tenant(s) with special needs including those who are physically challenged, hearing or visually impaired, or with limited English proficiency who require such changes to have equal access to any aspect of the application process or to the housing community and its programs and services. The owner will, for example, arrange for sign language interpreters or other communication aides for interviews during the application process. In addition, the property may add special design features to a unit, such as additional grab bars in the bathtub/shower, specially designed hand-held shower, strobe lighting, etc.

- In reaching a reasonable accommodation with, or performing modifications for, otherwise qualified individuals with special needs, the property is not required to:
  - Make alterations that require the removal or alteration of a load-bearing structural member; or
  - Provide an elevator for achieving accessibility; or
  - Provide support services that are not already part of its housing programs; or
  - Take action that would result in a fundamental alteration of the nature of the program's service; or
  - Take any action that would result in an undue financial administrative burden for the property.
- To learn more about the policies and procedures regarding reasonable accommodations under the Fair Housing Act, applicant(s)/tenant(s) should consult the Reasonable Accommodation Policy adopted by the project and posted in the site office.
- Appointments for an application or for reasonable accommodations, including materials in alternate formats, may be made by contacting the site office.

GRIEVANCE/APPEAL PROCEDURE

Applicants who believe they have been discriminated against or treated unfairly or who dispute a decision made by management in the application process may file a complaint in accordance with the property's Section 504 Grievance Procedure.

An applicant(s)/tenant(s) may, at any time, exercise his or her right to appeal a decision or file a complaint through the HUD-FHEO office at:

Office of Multi-Family Housing - Ft. Worth Regional Center
800 Cherry Street Suite 2500 Unit #45
Ft. Worth, TX. 76102
Ph.: 713.718.3142
Fax: 713.718.3272

Individuals with disabilities or limited English proficiency may request a reasonable accommodation to assist them with the Grievance/Appeal Process.

UPDATING THE TENANT SELECTION PLAN

Park Place & Westgate LLC reserves the right to amend this Tenant Selection Plan from time to time but at a minimum annually when it is reasonably necessary to ensure that it accurately reflects current operating practices, program priorities, and HUD requirements.