

## **ANNUAL RECERTIFICATION**

<b>Member Name:</b>	
<b>Unit#:</b>	
<b>OIC:</b>	PETS <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<b>Date of Recertification:</b>	
<b>Number of Occupants:</b>	
<b>Completed By:</b>	
<b>Inspection Date:</b>	
<b>Inspection Completed By:</b>	

- Please make sure and complete all forms.
- If you have any questions or need assistance, please contact the office.
  - Return to office when complete.

*Thank you!*



## HOUSEHOLD COMPOSITION AND CHARACTERISTICS

**1. List the Head of Household and all other members who will be living in the unit.**

	Household Members	Relation to Member	Date of Birth	Social Security #	Gender (M/F)	School Name (If attending)
1						
2						
3						
4						
5						
6						

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 termination of my Membership and occupancy. I also understand that such action may result in criminal penalties.

**Section 1001, Title 18, U.S.C., "Fraud and False Statements", provides, among other things, that whoever knowingly and willingly makes or uses a document or writing containing any false, fictitious, or fraudulent statement or entry, in any matter within the jurisdiction of any department or agency of the United States, shall be fined not more than \$10,000 or imprisoned for not more than five years, or both.**

Member Signature:	Phone#:	Date:
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Concord Village, Inc. 631 E. Lexington Place Tempe, AZ 85281 (480)946-4271





## PENALTIES FOR FALSE INFORMATION

**WARNING:** 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.

I hereby certify I have read and received the HUD handout about supplying false information and understand as the Member/Occupant, if false information is submitted regarding but not limited to income, family composition, or any other data requested in this application for Membership or at time of recertification, the Corporation, at its discretion, may impose the following penalties :

1. Terminate the Membership in compliance with Article 13.
2. Terminate the assistance, and with HUD approval, require the Member to pay the higher HUD approved Over Income rate for the unit for as long as the Member remains in the project. In addition, the Member could become subject to penalties available under Federal Law. Those penalties include fines up to \$5,000 and imprisonment for up to two (2) years.

Signed under the pains and penalties of perjury,

Member Signature: _____	Date: _____
Occupant: _____	Date: _____
Occupant: _____	Date: _____
Occupant: _____	Date: _____
Occupant: _____	Date: _____



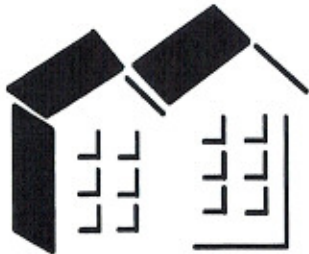
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U.S. Department of Housing and Urban Development

Office of Public and Indian Housing (PIH)



**RHIP**

**RENTAL HOUSING INTEGRITY IMPROVEMENT PROJECT**

## ***What You Should Know About EIV***

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

#### **What is EIV?**

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

#### **What are my responsibilities?**

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

**February 2010**

Remember, you must notify your PHA if a household member dies or moves out. You must also obtain the PHA's approval to allow additional family members or friends to move in your home prior to them moving in.

### What are the penalties for providing false information?

Knowingly providing false, inaccurate, or incomplete information is **FRAUD** and a **CRIME**.

If you commit fraud, you and your family may be subject to any of the following penalties:

1. Eviction
2. Termination of assistance
3. Repayment of rent that you should have paid had you reported your income correctly
4. Prohibited from receiving future rental assistance for a period of up to 10 years
5. Prosecution by the local, state, or Federal prosecutor, which may result in you being fined up to \$10,000 and/or serving time in jail.

**Protect yourself by following HUD reporting requirements.** When completing applications and reexaminations, you must include all sources of income you or any member of your household receives.

If you have any questions on whether money received should be counted as income or how your rent is determined, **ask your PHA**. When changes occur in your household income, **contact your PHA immediately** to determine if this will affect your rental assistance.

### What do I do if the EIV information is incorrect?

Sometimes the source of EIV information may make an error when submitting or reporting information about you. If you do not agree with the EIV information, let your PHA know.

If necessary, your PHA will contact the source of the information directly to verify disputed income information. Below are the procedures you and the PHA should follow regarding incorrect EIV information.

**Debts owed to PHAs and termination information** reported in EIV originates from the PHA who provided you assistance in the past. If you dispute this information, contact your former PHA directly in writing to dispute this information and provide any documentation that supports your dispute. If the PHA determines that the disputed information is incorrect, the PHA will update or delete the record from EIV.

**Employment and wage information** reported in EIV originates from the employer. If you dispute this information, contact the employer in writing to dispute and request correction of the disputed employment and/or wage information. Provide your PHA with a copy of the letter that you sent to the employer. If you are unable to get the employer to correct the information, you should contact the SWA for assistance.

**Unemployment benefit information** reported in EIV originates from the SWA. If you dispute this information, contact the SWA in writing to dispute and request correction of the disputed unemployment benefit information. Provide your PHA with a copy of the letter that you sent to the SWA.

**Death, SS and SSI benefit information** reported in EIV originates from the SSA. If you dispute this information, contact the SSA at (800) 772-1213, or visit their website at: [www.socialsecurity.gov](http://www.socialsecurity.gov). You may need to visit your local SSA office to have disputed death information corrected.

**Additional Verification.** The PHA, with your consent, may submit a third party verification form to the provider (or reporter) of your income for completion and submission to the PHA.

You may also provide the PHA with third party documents (i.e. pay stubs, benefit award letters, bank statements, etc.) which you may have in your possession.

**Identity Theft.** Unknown EIV information to you can be a sign of identity theft. Sometimes someone else may use your SSN, either on purpose or by accident. So, if you suspect someone is using your SSN, you should check your Social Security records to ensure your income is calculated correctly (call SSA at (800) 772-1213); file an identity theft complaint with your local police department or the Federal Trade Commission (call FTC at (877) 438-4338, or you may visit their website at: <http://www.ftc.gov>). Provide your PHA with a copy of your identity theft complaint.

### Where can I obtain more information on EIV and the income verification process?

Your PHA can provide you with additional information on EIV and the income verification process. You may also read more about EIV and the income verification process on HUD's Public and Indian Housing EIV web pages at: <http://www.hud.gov/offices/pih/programs/pih/eiv.cfm>.

**The information in this Guide pertains to applicants and participants (tenants) of the following HUD-PIH rental assistance programs:**

1. Public Housing (24 CFR 960); and
2. Section 8 Housing Choice Voucher (HCV), (24 CFR 982); and
3. Section 8 Moderate Rehabilitation (24 CFR 882); and
4. Project-Based Voucher (24 CFR 983)

**My signature below is confirmation that I have received this Guide.**

Signature

Date

# Race and Ethnic Data Reporting Form

U.S. Department of Housing and Urban Development  
Grants Management and Oversight Division

OMB Approval No. 2535-0113  
(exp. 07-31-2022)

HUD COOPERATIVE

Program Title:

Member Name:

Grantee/Recipient Name:

CONCORD VILLAGE, INC.

Grantee Reporting Organization:

Reporting Period From (mm/dd/yyyy): \_\_\_\_\_ To (mm/dd/yyyy): \_\_\_\_\_

Racial Categories	Total Number of Race Responses	Total Number of Hispanic or Latino Responses
American Indian or Alaska Native		
Asian		
Black or African American		
Native Hawaiian or Other Pacific Islander		
White		
American Indian or Alaska Native <i>and</i> White		
Asian <i>and</i> White		
Black or African American <i>and</i> White		
American Indian or Alaska Native <i>and</i> Black or African American		
* Other multiple race combinations greater than one percent: [Per the form instructions, write in a description using the box on the right]		
Balance of individuals reporting more than one race		
<b>Total:</b>		
* If the aggregate count of any reported multiple race combination that is not listed above exceeds 1% of the total population being reported, you should separately indicate the combination. See detailed instructions under "Other multiple race combinations."		

Public reporting burden for this collection is estimated to average 0.50 hours per response, including the time for reviewing instructions, searching existing data sources, gathering the data needed, and completing and reviewing the information collection instrument. HUD may not collect this information, and you are not required to complete this form unless it displays a currently valid OMB control number.



**EMERGENCY CONTACT INFORMATION**

<b><u>Member Info</u></b>		
Member Name:		
Address:		
Home Phone#:	Cell #	Work#
<b><u>Emergency Contact's</u></b>		
Name:		Relationship:
Address:		
Home Phone#:	Cell #	Work#
Name:		Relationship:
Address:		
Home Phone#:	Cell #	Work#





## VEHICLE REGISTRATION FORM

Unit# \_\_\_\_\_

Please list all drivers in the household below:	Phone #:

	VEHICLE 1	VEHICLE 2	VEHICLE 3	VEHICLE 4
Make:				
Model:				
Color:				
Year:				
License plate#				
Check if motorcycle:				
Decal#:				

### ATTACH THE FOLLOWING DOCUMENTS

- Copy of each vehicle's registration

**IMPORTANT: VEHICLE(S) MAY BE TOWED AT OWNER'S/TENANT'S EXPENSE IF NOT REGISTERED AND/OR A PARKING DECAL PERMIT IS NOT DISPLAYED ON THE VEHICLE. I HAVE READ AND AGREE TO COMPLY WITH THE CONCORD VILLAGE POLICY, RULES AND REGULATIONS WHICH APPLY TO THE PARKING AND OPERATION OF VEHICLES WITHIN THE COMMUNITY.**

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_







## CRIME FREE OCCUPANCY AGREEMENT ADDENDUM

In consideration for the execution or renewal of your occupancy agreement of the dwelling unit identified in the occupancy agreement, Manager or Owner and Member agree as follows: Member, any member(s) of the Member's household, a guest or any other person affiliated with the Member, at or near the Member premises:

1. Shall not engage in criminal activity, including drug-related criminal activity, on or near the said premises. "Drug related criminal activity" means the illegal manufacture, sale, distribution, use, or possession with intent to manufacture, sell, distribute, or use an illegal or controlled substance (as defined in Section 102 of the Controlled Substance Act [21 U.S.C. 802]).
2. Shall not engage in any act intended to facilitate criminal activity.
3. Will not permit the dwelling unit to be used for, or to facilitate criminal activity.
4. Shall not engage in the unlawful manufacturing, selling, using, storing, keeping or giving of an illegal or controlled substance as defined in A.R.S. 13-3451, at any locations, whether on or near the dwelling unit premises.
5. Shall not engage in any illegal activity, including, but not limited to prostitution as defined in A.R.S. 13-3211, criminal street gang activity as defined in A.R.S. 13-105 and A.R.S. 13-2308, threatening or intimidating as prohibited in A.R.S. 13-1202, assault as prohibited in A.R.S. 13-1203, including but not limited to the unlawful discharge of a weapon, on or near the dwelling unit premises, or any breach of the occupancy agreement that otherwise jeopardizes the health, safety and welfare of the landlord, his agent, or other tenant, or involving imminent or actual serious property damage, as defined in A.R.S.33-1368.
6. VIOLATION OF THE ABOVE PROVISIONS SHALL BE A MATERIAL AND IRREPARABLE VIOLATION OF THE OCCUPANCY AGREEMENT AND GOOD CAUSE FOR IMMEDIATE TERMINATION OF TENANCY. A single violation of any of the provisions of this added addendum shall be deemed a serious violation, and a material and irreparable non-compliance. It is understood that a single violation shall be good cause for immediate termination of the occupancy agreement under A.R.S. 33-1377, as provided in A.R.S. 33-1368. Unless otherwise provided by law, proof of violation shall not require a criminal conviction, but shall be by a preponderance of the evidence.
7. In case of conflict between the provisions of this addendum and any other provisions of the occupancy agreement, the provisions of this addendum shall govern. I hereby authorize management to use all police generated reports as direct evidence in all eviction hearings against me.
8. This OCCUPANCY AGREEMENT ADDENDUM is incorporated into the occupancy agreement executed or renewed this day between Concord Village, Inc. and

Member Signature: _____	Date: _____
Occupant: _____	Date: _____
Occupant: _____	Date: _____
Occupant: _____	Date: _____
Occupant: _____	Date: _____



Concord Village, Inc. 631 E. Lexington Place Tempe, AZ 85281 (480)946-4271





**NOTIFICATION OF ENFORCEMENT OF CRIME FREE ADDENDUM  
TO OCCUPANCY AGREEMENT- MARIJUANA**

Arizona recently passed a Medical Marijuana law that permits the limited use of Medical Marijuana in specific and limited circumstances. The State of Arizona has adopted rules that govern the manner of establishing the regulations for the use of medical marijuana.

Despite Arizona’s new law, the federal Controlled Substance Act (CSA) categorizes marijuana as a Schedule 1 substance and the manufacture, distribution, or possession of marijuana is a federal criminal offense. See 21 U.S.C. 801 et seq. Furthermore, the U.S. Department of Housing and Urban Development has sent out a Memorandum that specifically states that the use of marijuana for medical purpose violates federal law and that federal and state nondiscrimination laws do not require landlords to accommodate requests by current or prospective residents with disabilities to use medical marijuana. See Medical Use of Marijuana and Reasonable Accommodation in Federal Public and Assisted Housing dated January 20, 2011.

Concord Village, Inc has determined that the use, possession, distribution or manufacture of marijuana in any unit or common area has been determined to interfere with the health, safety, welfare and right to peaceful enjoyment of the premises by other Members. As such, the Board and management hereby informs and reminds all Members and Occupants that they signed a Crime Free Addendum when they moved in and, pursuant to that addendum and the supporting federal laws, any use of marijuana ( medical or otherwise ) by Members, occupants, or their guests will result in an immediate termination of occupancy. By signing this form, you understand and agree the Board and Management may take appropriate legal action to enforce the Crime Free Addendum and this agreement, including termination of your membership in the event you, other occupants or guests, or others associated with you violate such Occupancy agreement and Addendums.

If you have any questions or concerns about this policy, please speak to management.

Member Signature:	Date:
Occupant:	Date:
Occupant:	Date:
Occupant:	Date:
Occupant:	Date:





## PET RENEWAL

Concord village Inc. requires all Members wishing to bring pets into the community to read, understand and abide by the rules outlined in the rules and regulations and pet addendum. These policies consider the needs of management, pet owning members and non-pet owning members, as well as the needs of the pets themselves. The intent of this policy is to create a harmonious co-existence of all in our community living situation by fostering an attitude of respect, cooperation, and consideration.

### **Provide the following information:**

#### **Pet# 1**

Type of pet: \_\_\_\_\_

Name: \_\_\_\_\_

Age: \_\_\_\_\_

Description: \_\_\_\_\_ Breed: \_\_\_\_\_

Is this a new pet?  Yes  No

#### **Pet# 2**

Type of pet: \_\_\_\_\_

Name: \_\_\_\_\_

Age: \_\_\_\_\_

Description: \_\_\_\_\_ Breed: \_\_\_\_\_

Is this a new pet?  Yes  No

#### **• Emergency pet caretaker #1:**

Name: \_\_\_\_\_

Phone: (h) \_\_\_\_\_ (w) \_\_\_\_\_

CHECK BOX IF YOU HAVE EQUAL ACCESS REQUIREMENTS (Additional Form Required)

Member Name (printed) \_\_\_\_\_

Member Signature \_\_\_\_\_ Date \_\_\_\_\_

Management Signature \_\_\_\_\_ Date \_\_\_\_\_





## PET ADDENDUM

This pet addendum is an amendment to the occupancy agreement between (Member) \_\_\_\_\_ and Concord Village, Inc. covering Unit# \_\_\_\_\_.

1. Member has read, understands, and agrees to abide by all Rules and Regulations pertaining to pets.
2. Member has completed a Pet Application Form and has been granted permission by Concord Village, Inc. to keep the pet(s) specified under the following terms and conditions as well as those outline in the Rules and Regulations:
  - a. That the pet will be allowed out of the pet owner's unit or yard only under the complete control of a responsible human companion and on a hand-held leash or in a pet carrier.
  - b. That any damage to the exterior or interior of the premises, grounds, flooring, walls, trim, finish, tiles, carpeting, or any stains, etc., caused by the pet will be the full financial responsibility of the Member and that Member agrees to pay all costs involved in the restoration to its original condition. If because of any such stains, etc., said damage is such that it cannot be removed, then Member hereby agrees to pay the full expense of replacement.
  - c. That the Member will provide adequate and regular veterinary care, as well as ample food and water, and will not leave pets unattended for any undue length of time. Member will diligently maintain cleanliness of litter boxes as well as pet sleeping and feeding areas. Member will prevent pets from engaging in behaviors or creating excessive noise at a level that disturbs neighbors, including, but not limited to, barking, jumping, and running.
  - d. That if there is reasonable cause to believe an emergency exists with respect to the pet, and if efforts to contact the Member and emergency caretaker are unsuccessful, the Manager or the manager's agents may contact the local animal control authority and assist its staff in entering the Member's unit. Examples of an emergency include suspected abuse, abandonment, fire or other disaster, or any prolonged disturbance. If it becomes necessary for the pet to be boarded, any and all costs incurred will be the sole responsibility of the Member.
  - e. Pets will not be left unattended on back patios while Member is not home.
  - f. Member agrees to indemnify, hold harmless, and defend Concord Village, Inc, Sunrise Property Management or manager's agents against all liability, judgments, expenses (including attorney's fees), or claims by third parties for any injury to any person or damage to property of any kind whatsoever caused by the Member's pet(s).

Member Name (printed) \_\_\_\_\_

Member Signature \_\_\_\_\_ Date \_\_\_\_\_

Management Signature \_\_\_\_\_ Date \_\_\_\_\_



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**THE FOLLOWING PAGES ARE FOR YOUR RECORDS (READ ONLY) AND MAY BE REMOVED FROM THIS PACKET.**



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REPORT OF FINDINGS

Law/Crandall Project 702.24-50242

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**CONCORD VLLAGE**  
**Tempe, Arizona**

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Prepared for:

CONCORD VILLAGE, NC.  
631 East Lexington Place  
Tempe, Arizona

August 1995



**LAW/CRANDALL, NC.**

ENGINEERING AND ENVIRONMENTAL SERVICES

*ONE OF THE LAW COMPANIES*

The MAP-3 XRF analyzer is calibrated to measure both the K-shell and the L-shell X-ray emission lines of lead. During our testing, only K-shell readings were recorded. The K-shell line is normally used for paint analysis because it measures lead in all layers of paint films, including the lower levels where higher concentrations of lead are usually found.

Results of LAW's lead-based paint testing are shown in the Appendices of this report. Relevant testing specifications are described in Appendix A. Separate detail sheets for testing at each unit, common areas and exterior surfaces are presented in Appendix B.

## 2.2 Quality Control

To assure that the spectrum analysis equipment was working properly, various quality tests were performed before, during, and after our on-site work. At the beginning of every work period (start of shift upon return from lunch breaks), five test calibration measurements were made using the calibration check standard that is associated with particular testing equipment being used. This painted standard contains a known quality of lead allows the XRF operator to determine the accuracy and precision to which the testing equipment is operating. In addition to the five start-up tests, hourly tests were also performed using the same calibration check standard. This serves as additional verification of the accuracy and precision of the testing equipment.

## 2.3 Qualifications of Testing

HUD regulations promulgated under 24 CFR Part 200, Subpart O require that all units, common areas, or exterior surfaces be tested, as applicable, if lead-based paint is found in any unit, common area, or exterior surface. The scope of our testing included only random of applicable surfaces in a limited number of units, and is preliminary in nature. Our scope of services expressly excluded the testing of all surfaces from which lead-based paint was determined by preliminary testing.

## 3.0 FINDINGS OF LEAD-BASED PAINT TESTING

A total of 438 components were tested at the site. Tests were performed on components from exterior and common areas, and on interior components from 10 randomly selected dwelling units. XRF testing indicated all components tested were negative for the presence of lead per HUD regulations. Of the total number of interior surfaces tested, no test sites were determined by XRF spectrum analysis to have a reading of 1.0 mg/cm<sup>2</sup> or higher based on a reading taken in the "test" mode. Test readings of 1.0 mg/cm<sup>2</sup> or higher using an XRF are considered by HUD regulations to be "positive" for the presence of lead.

## 4.0 RECOMMENDATIONS

Of the components tested by XRF, none were found to contain lead above levels determined by HUD. We recommend no further testing at this present time.





# 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:



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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. 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



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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](mailto:Hotline@hudoig.gov). You can write the Hotline at:

HUD OIG Hotline, GFI  
451 7<sup>th</sup> Street, SW  
Washington, DC 20410



December 2005

 Concord Village, Inc. 631 E. Lexington Place Tempe, AZ 85281 (480)946-4271



Rev.9/21

# FACT SHEET

## For HUD ASSISTED RESIDENTS

### Rent Supplement

## “HOW YOUR RENT IS DETERMINED”

Office of Housing

**\*\*June 2007\*\***

*This Fact Sheet is a general guide to inform the Owner/Management Agents (OA) and HUD-assisted residents of the responsibilities and rights regarding income disclosure and verification.*

### Why Determining Income and Rent Correctly is Important

Department of Housing and Urban Development studies show that many resident families pay incorrect rent. The main causes of this problem are:

- Under-reporting of income by resident families, and
- OAs not granting exclusions and deductions to which resident families are entitled.

OAs and residents all have a responsibility in ensuring that the correct rent is paid.

#### OAs' Responsibilities:

- Obtain accurate income information
- Verify resident income
- Ensure residents receive the exclusions and deductions to which they are entitled
- Accurately calculate Tenant Rent
- Provide tenants a copy of lease agreement and income and rent determinations Recalculate rent when changes in family composition are reported
- Recalculate rent when resident income decreases
- Recalculate rent when resident income increases by \$200 or more per month
- Provide information on OA policies upon request
- Notify residents of any changes in requirements or practices for reporting income or determining rent

#### Residents' Responsibilities:

- Provide accurate family composition information
- Report all income
- Keep copies of papers, forms, and receipts which document income and expenses
- Report changes in family composition and income occurring between annual recertifications
- Sign consent forms for income verification
- Follow lease requirements and house rules

### Income Determinations

A family's anticipated gross income determines not only eligibility for assistance, but also determines the rent a family will pay and the subsidy required. The anticipated income, subject to exclusions and deductions the family will receive during the next twelve (12) months, is used to determine the family's rent.

#### What is Annual Income?

Gross Income – Income Exclusions = Annual Income

#### What is Adjusted Income?

Annual Income – Deductions = Adjusted Income

### Determining Tenant Rent

#### Rent Supplement Rent Formula:

The rent a family will pay is the **higher** of the following amounts:

- 30% of the family's monthly adjusted income
- 30% of Gross Rent.

If this is a move-in or initial certification, the family is only eligible if their total tenant payment is less than 90% of Gross Rent.

## Income and Assets

HUD assisted residents are required to report **all** income from all sources to the Owner or Agent (OA).

Exclusions to income and deductions are part of the tenant rent process.

When determining the amount of income from assets to be included in annual income, the actual income derived from the assets is included except when the cash value of all of the assets is in excess of \$5,000, then the amount included in annual income is the higher of 2% of the total assets or the actual income derived from the assets.

### Annual Income Includes:

- Full amount (before payroll deductions) of wages and salaries, overtime pay, commissions, fees, tips and bonuses and other compensation for personal services
- Net income from the operation of a business or profession
- Interest, dividends and other net income of any kind from real or personal property (See Assets Include/Assets Do Not Include below)
- Full amount of periodic amounts received from Social Security, annuities, insurance policies, retirement funds, pensions, disability or death benefits and other similar types of periodic receipts, including lump-sum amount or prospective monthly amounts for the delayed start of a periodic amount **\*\***(except for deferred periodic payments of supplemental security income and social security benefits, see Exclusions from Annual Income, below)**\*\***
- Payments in lieu of earnings, such as unemployment and disability compensation, worker's compensation and severance pay **\*\***(except for lump-sum additions to family assets, see Exclusions from Annual Income, below)**\*\***
- Welfare assistance
- Periodic and determinable allowances, such as alimony and child support payments and regular

contributions or gifts received from organizations or from persons not residing in the dwelling

- All regular pay, special pay and allowances of a member of the Armed Forces (except for special pay for exposure to hostile fire)
- **\*\***For Section 8 programs only, any financial assistance, in excess of amounts received for tuition, that an individual receives under the Higher Education Act of 1965, shall be considered income to that individual, except that financial assistance is not considered annual income for persons over the age of 23 with dependent children or if a student is living with his or her parents who are receiving section 8 assistance. For the purpose of this paragraph, "financial assistance" does not include loan proceeds for the purpose of determining income.**\*\***

### Assets Include:

- Stocks, bonds, Treasury bills, certificates of deposit, money market accounts
- Individual retirement and Keogh accounts
- Retirement and pension funds
- Cash held in savings and checking accounts, safe deposit boxes, homes, etc.
- Cash value of whole life insurance policies available to the individual before death
- Equity in rental property and other capital investments
- Personal property held as an investment
- Lump sum receipts or one-time receipts
- Mortgage or deed of trust held by an applicant
- Assets disposed of for less than fair market value.

### Assets Do Not Include:

- Necessary personal property (clothing, furniture, cars, wedding ring, vehicles specially equipped for persons with disabilities)
- Interests in Indian trust land
- Term life insurance policies
- Equity in the cooperative unit in which the family lives
- Assets that are part of an active business
- Assets that are not effectively owned by the applicant or are held in an individual's name but:
  - The assets and any income they earn accrue to the benefit of someone else who is not a member of the household, and
  - that other person is responsible for income taxes

incurred on income generated by the assets

- Assets that are not accessible to the applicant and provide no income to the applicant (Example: A battered spouse owns a house with her husband. Due to the domestic situation, she receives no income from the asset and cannot convert the asset to cash.)
- Assets disposed of for less than fair market value as a result of:
  - Foreclosure
  - Bankruptcy
  - Divorce or separation agreement if the applicant or resident receives important consideration not necessarily in dollars.

#### **Exclusions from Annual Income:**

- Income from the employment of children (including foster children) under the age of 18
- Payment received for the care of foster children or foster adults (usually persons with disabilities, unrelated to the tenant family, who are unable to live alone)
- Lump-sum additions to family assets, such as inheritances, insurance payments (including payments under health and accident insurance and worker's compensation), capital gains and settlement for personal or property losses
- Amounts received by the family that are specifically for, or in reimbursement of, the cost of medical expenses for any family member
- Income of a live-in aide
- \*\*Subject to the inclusion of income for the Section 8 program for students who are enrolled in an institution of higher education under Annual Income includes, above,\*\* the full amount of student financial assistance either paid directly to the student or to the educational institution
- The special pay to a family member serving in the Armed Forces who is exposed to hostile fire
- Amounts received under training programs funded by HUD
- Amounts received by a person with a disability that are disregarded for a limited time for purposes of Supplemental Security Income eligibility and benefits because they are set aside for use under a Plan to Attain Self-Sufficiency (PASS)
- Amounts received by a participant in other publicly assisted programs which are specifically for or in reimbursement of out-of-pocket expenses incurred (special equipment, clothing, transportation, child

care, etc.) and which are made solely to allow participation in a specific program

- Resident service stipend (not to exceed \$200 per month)
- Incremental earnings and benefits resulting to any family member from participation in qualifying State or local employment training programs and training of a family member as resident management staff
- Temporary, non-recurring or sporadic income (including gifts)
- Reparation payments paid by a foreign government pursuant to claims filed under the laws of that government by persons who were persecuted during the Nazi era
- Earnings in excess of \$480 for each full time student 18 years old or older (excluding head of household, co-head or spouse)
- Adoption assistance payments in excess of \$480 per adopted child
- Deferred periodic payments of supplemental security income and social security benefits that are received in a lump sum amount or in prospective monthly amounts
- Amounts received by the family in the form of refunds or rebates under State or local law for property taxes paid on the dwelling unit
- Amounts paid by a State agency to a family with a member who has a developmental disability and is living at home to offset the cost of services and equipment needed to keep the developmentally disabled family member at home

#### **Federally Mandated Exclusions:**

- Value of the allotment provided to an eligible household under the Food Stamp Act of 1977
- Payments to Volunteers under the Domestic Volunteer Services Act of 1973
- Payments received under the Alaska Native Claims Settlement Act
- Income derived from certain submarginal land of the US that is held in trust for certain Indian Tribes
- Payments or allowances made under the Department of Health and Human Services' Low-Income Home Energy Assistance Program
- Payments received under programs funded in whole or in part under the Job Training Partnership Act
- Income derived from the disposition of funds to the Grand River Band of Ottawa Indians
- The first \$2000 of per capita shares received from judgment funds awarded by the Indian Claims Commission or the US. Claims Court, the interests

of individual Indians in trust or restricted lands, including the first \$2000 per year of income received by individual Indians from funds derived from interests held in such trust or restricted lands

- Amounts of scholarships funded under Title IV of the Higher Education Act of 1965, including awards under the Federal work-study program or under the Bureau of Indian Affairs student assistance programs
- Payments received from programs funded under Title V of the Older Americans Act of 1985
- Payments received on or after January 1, 1989, from the Agent Orange Settlement Fund or any other fund established pursuant to the settlement in *In Re Agent-product liability litigation*
- Payments received under the Maine Indian Claims Settlement Act of 1980
- The value of any child care provided or arranged (or any amount received as payment for such care or reimbursement for costs incurred for such care) under the Child Care and Development Block Grant Act of 1990
- Earned income tax credit (EITC) refund payments on or after January 1, 1991
- Payments by the Indian Claims Commission to the Confederated Tribes and Bands of Yakima Indian Nation or the Apache Tribe of Mescalero Reservation
- Allowance, earnings and payments to AmeriCorps participants under the National and Community Service Act of 1990
- Any allowance paid under the provisions of 38U.S.C. 1805 to a child suffering from spina bifida who is the child of a Vietnam veteran
- Any amount of crime victim compensation (under the Victims of Crime Act) received through crime victim assistance (or payment or reimbursement of the cost of such assistance) as determined under the Victims of Crime Act because of the commission of a crime against the applicant under the Victims of Crime Act
- Allowances, earnings and payments to individuals participating under the Workforce Investment Act of 1998.

## **Deductions:**

- \$480 for each dependent including full time students or persons with a disability
- \$400 for any elderly family or disabled family

- Unreimbursed medical expenses of any elderly family or disabled family that total more than 3% of Annual Income. Family income expenditure is applied only one time
- Unreimbursed reasonable attendant care and auxiliary apparatus expenses for disabled family member(s) to allow family member(s) to work that total more than 3% of Annual Income
- If an elderly family has both unreimbursed medical expenses and disability assistance expenses, the family's 3% of income expenditure is applied only one time
- Any reasonable child care expenses for children under age 13 necessary to enable a member of the family to be employed or to further his or her education.

## **Reference Materials**

### **Regulations:**

- General HUD Program Requirements; 24 CFR Part 5

### **Handbook:**

- 4350.3, Occupancy Requirements of Subsidized Multifamily Housing Programs

### **Notices:**

- "Federally Mandated Exclusions" Notice 66 FR 4669, April 20, 2001

### **For More Information:**

Find out more about HUD's programs on HUD's Internet homepage at <http://www.hud.gov>