### Voucher

Moving to Work Housing Choice Voucher Program Housing Authority of the City of Atlanta, Georgia



### **Housing Program**

### Program Move

Moving To Work		Notice to Va	cate
Please read entire document before completing form Fill in all blanks below. Type or print clearly	Voucher Number 33371 1. Unit Size 3		
Insert unit size in number of bedrooms. (This is the qualifies and is used in determining the amount of Family to the owner.)			
Date Voucher Issued (mm/dd/yyyy)     Insert actual date the Voucher is issued to the Fan	2. Issue Date (mm/dd/yyyy) 01/17/2023		
3. Date Voucher Expires (mm/dd/yyyy) Insert date sixty days after the date Voucher is iss	3. Expiration Date (mm/dd/yyyy) 03/18/2023		
Date Extension Expires (if applicable) (mm/dd/yyyy)     (See Section 6 of this form.)		4. Date Extension Expires (mm/dd/yyyy) 05/17/2023	
5. Name of Family Representative	6. Signature of Family Representative	•	Date Signed (mm/dd/yyyy)
JOSEPH WATSON	Joseph Watson	υ	January 18, 2023
7. Name of Public Housing Agency (PHA)	59A1DDA0584B4C4		
Housing Authority of the City of	Atlanta		
8. Name and Title of PHA Official	9. Signature of BHA Official		Date Signed (mm/dd/yyyy)
Denise Andrews Housing Services Administrator	Britary Thompson		January 17, 202

### 1. Housing Choice Voucher Program

- A. The public housing agency (PHA) has determined that the above named family (item 5) is eligible to participate in the Housing Choice Voucher Program. Under this program, the family chooses a decent, safe, and sanitary unit to live in. If the owner agrees to lease the unit to the family under the Housing Choice Voucher Program, and if the PHA approves the unit, the PHA will enter into a Housing Choice Rental Assistance Agreement, HCRAA, (formally referred to as the HAP Contract) with the owner to make monthly payments to the owner to help the family pay the rent.
- B. The PHA determines the amount of the monthly housing assistance payment to be paid to the owner. Generally, the monthly housing assistance payment by the PHA is the difference between the applicable payment standard and 30 percent of monthly adjusted family income. In determining the maximum initial housing assistance payment for the family, the PHA will use the payment standard in effect on the date the tenancy is approved by the PHA. The actual amount of the PHA's assistance payment will be determined using the gross rent for the unit selected by the family.

### 2. Voucher

- A. When issuing this voucher the PHA expects that if the family finds an approvable unit, the PHA will have the money available to enter into a HCRAA contract with the owner. However, the PHA is under no obligation to the family, to any owner, or to any other person, to approve a tenancy. The PHA does not have any liability to any party by the issuance of this voucher.
- B. The voucher does not give the family any right to participate in the PHA's Housing Choice Voucher Program. The family becomes a participant in the PHA's Housing Choice Voucher Program when the HCRAA between the PHA and the owner takes effect.
- C. During the initial or any extended term of this voucher, the PHA may require the family to report progress in leasing a unit at such intervals and times as determined by the PHA.

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

- A. When the family finds a suitable unit where the owner is willing to participate in the program, the family must give the PHA the request for tenancy approval (on the form supplied by the PHA), signed by the owner and the family including the AH prescribed tenancy addendum. Note: Both documents must be given to the PHA no later than the expiration date stated in item 3 or 4 on top of page one in this voucher.
- B. The family must submit these documents in the manner that is required by the PHA. PHA policy may prohibit the family from submitting more than one request for tenancy approval at a time.
- C. The lease must include, word-for-word, all provisions of the HCRA Lease addendum supplied by the PHA. This is done by adding the HCRA Lease addendum to the lease used by the owner. If there is a difference between any provisions of the HCRA Lease addendum and any provisions of the owner's lease, the provisions of the HCRA Lease addendum shall control.
- D. After receiving the request for tenancy approval, the PHA will inspect the unit. The PHA may not give approval for the family to lease the unit or execute the HCRAA contract until the PHA has determined that all the following program requirements are met; the unit is eligible; the unit has been inspected by the PHA and passes AH's Enhanced Housing Quality Standards; the rent is reasonable; and the landlord and tenant have executed the HCRAA Lease Addendum.
- E. If the PHA approves the unit, the PHA will notify the family and the owner, and will furnish a copy of the HCRAA & HCRA Lease Addendum to the owner.
  - 1. The owner and the family must execute the lease & HCRA Lease Addendum
  - The owner must sign the HCRAA & HCRA Leases Addendum and must furnish to the PHA a copy of the executed HCRA Lease Addendum and executed HCRAA.
  - The PHA will execute the HCRAA and return an executed copy to the owner
- F. If the PHA determines that the unit cannot be approved for any reason, the PHA will notify the owner and the family that:
  - The proposed unit is disapproved for specified reasons, and
  - If the conditions requiring disapproval are remedied to the satisfaction of the PHA on or before the date specified by the PHA, the unit will be approved.

### 4. Obligations of the Family

This section states the obligations of a participant household in Atlanta Housing's (AH) Housing Choice Voucher Program (HCVP). Each member of the participant household is required to comply with these obligations at all times during the household's participation in the HCVP in order for the household to receive and remain eligible to receive housing rental assistance. Failure by household members to comply with these obligations may result in termination of housing rental assistance and participation in the HCVP. Reference to the "household" includes each member of the household.

### (1) Supplying Required Information

- a) The household must supply any information that AH or HUD determines is necessary in the administration of the program, including submission of required evidence of citizenship or eligible immigration status. "Information" includes any requested certification, release, or other documentation.
- b) The household must supply any information requested by AH or HUD for use in a regularly scheduled reexamination or interim reexamination of household income and composition in the time period specified and required by AH.
- c) The household must disclose and verify social security numbers and must sign and submit consent forms for obtaining information in the time period specified and required by AH.
- Any information supplied by the household must be true and complete.
- e) The assisted household must promptly report changes in household income between annual reexaminations. Required reporting must be done within 10 days of the date of the change income. Failure to report required changes in income within the 10 day grace period will result in a Repayment Agreement and/or termination from the program. Failure to report income will constitute misrepresentation on the part of the family and may result in termination as required by the AH or HUD.
- f) Debt to the PHA: The PHA shall have the right to recover all costs associated with the collection effort including court costs, reasonable attorney fees, and prejudgment interest at the legal rate. In addition, the PHA reserves the right to notify any and all credit service organizations of such a delinquency.

### (2) Allowing AH inspection

The household must allow AH to inspect the unit at reasonable times and after reasonable notice, as determined by AH.

## (3) Breach of AH inspection standards caused by household

The household is responsible for a breach of AH's inspection standards caused by the household, including but not limited to any of the following:

- The household fails to maintain any utilities that the owner is not required to pay for, but which are to be paid by the tenant;
- The household fails to provide and maintain any appliances that the owner is not required to provide, but which are to be provided by the tenant; and/or
- Any member of the household or guest damages the dwelling unit or premises beyond ordinary wear and tear

d) If an AH inspection standard breach caused by the household is life threatening, the household must correct the defect within no more than 24 hours. For other household caused defects, the family must correct the defect within no more than 30 calendar days (or any AH-approved extension).

### (4) Violation of lease

The household may not commit any serious or repeated violation(s) of the lease.

### (5) Payment of rent

The household is responsible for paying rent to the owner in the amount approved by AH.

### (6) Household notice of move or lease termination

The household must notify AH in writing 30 days before the household moves out of the unit and must notify the owner pursuant to the terms of the Lease.

### (7) Eviction notice

The household must give AH a copy of any eviction notice within 5 business days after receiving the eviction notice.

### (8) Use and occupancy of unit

- The household must use the assisted unit for the residence of AH-authorized members of the household.
- The unit must be each household member's only residence.
- c) The composition of the assisted household residing in the unit must be approved by AH. The household must promptly inform AH of the birth, adoption, or a court's award of custody of a child, within 7 business days of the birth, adoption, or court's award of a child. The household must request AH approval to add any other person as a member of the household. No other person may reside in the unit.
- d) The household must promptly notify AH, within 7 business days, if any household member no longer resides in the unit.
- e) If AH has given approval, a foster child or a live-in aide may reside in the unit. AH has the discretion to adopt reasonable policies concerning residence by a foster child or a live-in aide, and defining when AH consent may be given or denied.
- f) Members of the household may engage in legal profitmaking activities in the unit with prior written approval of owner, but only if such activities are incidental to primary use of the unit for residence by members of the household.
- g) The household must not sublease or let the unit.
- The household must not assign the lease or transfer the unit.

- The household must not damage the assisted unit or premises (other than, damage from ordinary wear and tear) or permit any guest to damage the unit or premises.
- The household must not receive HCVP assistance while receiving another housing subsidy for the same unit or a different unit under any other Federal, State, or local housing assistance program.
- The household must not receive HCVP assistance while residing in a unit owned by a spouse, parent, child, grandparent, grandchild, sister, or brother of any member of the family, unless the AH has determined (and has notified the owner and the family of such determination in writing) that approving rental of the unit, notwithstanding such relationship, would provide reasonable accommodation for a family member who is a person with disabilities.

#### (9) Absence from unit

The household must supply any information or certification requested by AH to verify that the household is living in the unit, or relating to household absence from the unit, including any AH-requested information or certification on the purposes of household absences. The household must cooperate with AH for this purpose. The household must notify AH in writing if any member of the household is absent from the unit for a period of 30 calendar days. The household must provide written notice on or before the 30th day of absence.

### (10) Interest in unit

The household must not own or have any interest in the unit (other than in a cooperative, or the owner of a manufactured home leasing a manufactured home space).

### (11) Fraud and other program violation

The members of the household must not commit fraud, bribery, or any other corrupt or criminal act in connection with AH programs.

### (12) Criminal Activity

The members of the household may not engage in:

- a) Drug-related criminal activity
- b) Violent criminal activity
- Other criminal activity that threatens the health, safety, or right to peaceful enjoyment of other residents and persons.

The members of the household must not allow guests to engage in criminal activity on or near the assisted unit.

### (13) Alcohol abuse by household members

The members of the household must not abuse alcohol in a way that threatens the health, safety, or right to peaceful

enjoyment of other residents and persons.

### (14) Threatening behavior

Neither household members nor their guests may engage in threatening, abusive, or violent behavior toward AH personnel.

### (15) Work / Program Participation Requirement

At least one adult member in the household must be either legally and gainfully employed on a full-time basis for at least 20 hours per week (with income at least equivalent to minimum wage) at all times while participating in the Housing Choice Voucher Program OR be legally and gainfully self-employed in a legitimate business enterprise for at least 20 hours per week, and such employment must be appropriately documented in accordance with AH's requirements. All other adults in the household must be either:

- a) 18 to 61 years old, and legally and gainfully employed or self-employed (as defined below) on a full-time basis at least 20 hours per week;
- b) 18 to 61 years old and a full-time student at an AHrecognized school or institution;
- c) 18 to 61 years old and employed (but not selfemployed) on a part-time basis and either attending an AH-recognized school or institution on a parttime basis or participating in an AH-approved training program for a combined minimum total of 20 hours per week for employment and education/training;
- d) Elderly; or
- e) Disabled

Self-employment income claimed by applicants and/or participants must be verified by submission of filed federal tax returns, filed W9s, IRS Tax transcript, federal tax form 1099, profit and loss statement certified by a Certified Public Accountant, business licenses, or other methods approved by AH. Yearly earnings from self-employment must be equivalent to 20 hours per week for 52 weeks per year at federal minimum wage.

## (16) Required Participation in Human Development Services Program

Household members must participate in AH's human development services program which requires cooperation with a case manager's requirements and the requirements of any and all plans designed to connect the household members to services and resources.

### 5. Illegal Discrimination

If the family has reason to believe that, in its search for suitable housing, it has been discriminated against on the basis of age, race, color, religion, sex disability, national origin, or familial status, the family may file a housing discrimination complaint with any HUD Field Office in person, by mail or by telephone. The PHA will give the family information on how to fill out and file a complaint.

### 6. Expiration and Extension of Voucher

The voucher will expire on the date stated in item 3 on the top of page one of this voucher unless the family requests an extension in writing and the PHA grants a written extension of the voucher in which case the voucher will expire on the date stated in item 4. At its discretion, the PHA may grant a family's request for one or more extensions of the initial term.

### 7. Termination of Housing Assistance

Housing Assistance under this voucher will be terminated if the family fails to comply with any of the family obligations described in Section 4; if 30% of the family's monthly adjusted income exceeds the rent to owner; or, if the PHA determines that funding is not available to pay the housing assistance.

### Voucher

Moving to Work Housing Choice Voucher Program Housing Authority of the City of Atlanta, Georgia



### Housing Program

### Program Move

Moving To Work		Notice to Va	acate
Please read entire document before completing form. Fill in all blanks below. Type or print clearly		Voucher Number 33371	
Insert unit size in number of bedrooms. (This is the number of bedrooms for which the Family qualifies and is used in determining the amount of assistance to be paid on behalf of the Family to the owner.)		1. Unit Size 3	
Date Voucher Issued (mm/dd/yyyy)     Insert actual date the Voucher is issued to the Family.		2. Issue Date (mm/dd/yyyy) 01/17/2023	
3. Date Voucher Expires (mm/dd/yyyy) Insert date sixty days after the date Voucher is issued. (See Section 6 of this form.)  4. Date Extension Expires (if applicable) (mm/dd/yyyy) (See Section 6 of this form.)		3. Expiration Date (mm/dd/yyyy) 03/18/2023 4. Date Extension Expires (mm/dd/yyyy) 05/17/2023	
JOSEPH WATSON			
7. Name of Public Housing Agency (PHA)			•
Housing Authority of the City of	Atlanta		
8. Name and Title of PHA Official	Name and Title of PHA Official 9. Signature of PHA Official		Date Signed (mm/dd/yyyy)
Denise Andrews Housing Services Administrator			

### 5. Housing Choice Voucher Program

- C. The public housing agency (PHA) has determined that the above named family (item 5) is eligible to participate in the Housing Choice Voucher Program. Under this program, the family chooses a decent, safe, and sanitary unit to live in. If the owner agrees to lease the unit to the family under the Housing Choice Voucher Program, and if the PHA approves the unit, the PHA will enter into a Housing Choice Rental Assistance Agreement, HCRAA, (formally referred to as the HAP Contract) with the owner to make monthly payments to the owner to help the family pay the rent.
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- H. The family must submit these documents in the manner that is required by the PHA. PHA policy may prohibit the family from submitting more than one request for tenancy approval at a time.
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- K. If the PHA approves the unit, the PHA will notify the family and the owner, and will furnish a copy of the HCRAA & HCRA Lease Addendum to the owner.
  - 4. The owner and the family must execute the lease & HCRA Lease Addendum
  - The owner must sign the HCRAA & HCRA Leases Addendum and must furnish to the PHA a copy of the executed HCRA Lease Addendum and executed HCRAA.
  - 6. The PHA will execute the HCRAA and return an executed copy to the owner
- L. If the PHA determines that the unit cannot be approved for any reason, the PHA will notify the owner and the family that:
  - The proposed unit is disapproved for specified reasons, and
  - If the conditions requiring disapproval are remedied to the satisfaction of the PHA on or before the date specified by the PHA, the unit will be approved.

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h) If an AH inspection standard breach caused by the household is life threatening, the household must correct the defect within no more than 24 hours. For other household caused defects, the family must correct the defect within no more than 30 calendar days (or any AH-approved extension).

### (4) Violation of lease

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- m) The unit must be each household member's only residence.
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- The household must promptly notify AH, within 7 business days, if any household member no longer resides in the unit.
- p) If AH has given approval, a foster child or a live-in aide may reside in the unit. AH has the discretion to adopt reasonable policies concerning residence by a foster child or a live-in aide, and defining when AH consent may be given or denied.
- q) Members of the household may engage in legal profitmaking activities in the unit with prior written approval of owner, but only if such activities are incidental to primary use of the unit for residence by members of the household.
- r) The household must not sublease or let the unit.
- The household must not assign the lease or transfer the unit.

- t) The household must not damage the assisted unit or premises (other than, damage from ordinary wear and tear) or permit any guest to damage the unit or premises.
- The household must not receive HCVP assistance while receiving another housing subsidy for the same unit or a different unit under any other Federal, State, or local housing assistance program.
- v) The household must not receive HCVP assistance while residing in a unit owned by a spouse, parent, child, grandparent, grandchild, sister, or brother of any member of the family, unless the AH has determined (and has notified the owner and the family of such determination in writing) that approving rental of the unit, notwithstanding such relationship, would provide reasonable accommodation for a family member who is a person with disabilities.

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- i) Elderly; or
- i) Disabled

Self-employment income claimed by applicants and/or participants must be verified by submission of filed federal tax returns, filed W9s, IRS Tax transcript, federal tax form 1099, profit and loss statement certified by a Certified Public Accountant, business licenses, or other methods approved by AH. Yearly earnings from self-employment must be equivalent to 20 hours per week for 52 weeks per year at federal minimum wage.

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### 7. Termination of Housing Assistance

Housing Assistance under this voucher will be terminated if the family fails to comply with any of the family obligations described in Section 4; if 30% of the family's monthly adjusted income exceeds the rent to owner; or, if the PHA determines that funding is not available to pay the housing assistance.



### REQUEST FOR TENANCY APPROVAL

PARTICIPANT NAME JOSEPH WATSON TENANT CODE t1212697

#### VENDOR AND PAYEE INFORMATION

(Please indicate who will be receiving payments (Payee))

☐ PROPERTY OWNER -	· NAME	VENDOR CODE	□Paye
☐ MANAGEMENT -	NAME	_ VENDOR CODE	□Paye

### PROCESS OVERVIEW

Thank you for your interest in Atlanta Housing's (AH) Housing Choice Voucher Program (HCVP)! The following information will assist you in accurately completing the Request for Tenancy Approval (RTA). Our goal is to efficiently execute a contract in as little time as possible from the receipt of an accurately completed RTA. The sooner we execute a contract, the better for both you and the renter. Our ability to execute a contract within a timely manner is heavily dependent upon your unit being ready at the initial inspection and your timely submission of requested documents. Below are five key steps to executing a contract successfully and receiving your payments:

1. Your timely submission of documents - This application will undergo an underwriting process. When AH requests additional documents, please provide accurate documentation promptly (i.e. within 48 hours of request) via the Property Owner Portal or by email to the person making the request to avoid cancellation.

Note: All documentation supporting a request for consideration of rent comparables or an appraisal to substantiate a square footage that differs from the tax assessor's website record must be submitted with the RTA (no exceptions). Submissions during the underwriting process will not be honored and subsequent appeals will not be processed.

- 2. Your property passing the initial inspection You will be contacted to schedule your initial inspection. To ensure your property passes the inspection, follow the steps outlined in the AH's Enhanced Inspection Standards Checklist. Your property must be rent ready, completely vacant (including free of furniture), and all utilities must be on for the inspection to be conducted.
- 3. Your acceptance of the rent offer After you pass your initial inspection, the rent determination will begin. Upon AH's approval and your agreement of rent for your property, we will email the initial confirmation notice which outlines the terms of the Housing Choice Rental Assistance (HCRA) Agreement.
- 4. Your timely return of a signed HCRA Agreement Within 48 hours, the final HCRA Agreement and Lease Addendum will be submitted to you via Electronic Signature software which outlines key terms such as agreed upon rent amount, contract period, approved household members and utility responsibilities. Please read and sign the HCRA Agreement and HCRA Lease Addendum within 48 hours for payment to be executed. Please note that AH will not pay housing assistance to the Landlord or Participant until there is an executed HCRA Agreement in place. Under no circumstance is a Housing Choice Participant to move into your unit prior to having a signed and executed HCRA Agreement with AH.
- 5. Enforce your lease- After you sign your HCRA Agreement, it is important that you manage your property in accordance with this agreement and enforce your lease. The lease is between you and your new renter. AH's role is to provide rental assistance to you on behalf of the renter. If your renter does not comply with your lease, they may no longer be eligible to participate in the HCVP.

Thank you for your interest in partnering with Atlanta Housing to provide quality affordable housing for the betterment of the community!

HCO6002 t1212697 **PFILE** 

Revised 08/2021 Page 1 of 7

### REQUEST FOR TENANCY APPROVAL

INCOMPLETE PACKAGES WILL NOT BE ACCEPTED

### REQUEST FOR TENANCY APPROVAL FORMS GUIDE

Please note if you are a <u>new</u> property owner to AH's HCVP, you will be required to attend a mandatory Property Owner's Briefing and complete a Property Owner Application. If you are a current property owner, you <u>may</u> be required to update your application and attend a briefing on an annual basis or upon request.

- **RECORDED DEED-** A recorded deed is required at all RTA submittals. If a property has been purchased in the last 90 days, an unrecorded deed, along with the receipt from the Court Clerk or an unrecorded deed along with the settlement statement, will be acceptable.
  - AH will check the Georgia Superior Court Clerks' Cooperative Authority (GSCCCA) to validate ownership through our underwriting process.
- **SETTLEMENT STATEMENT -** A settlement statement (i.e. HUD-1) is required for cash sales, for properties without a current mortgage, or if the deed has not yet been recorded..
- CURRENT MORTGAGE STATEMENT- A current mortgage statement is required for all single family units; for multi-family communities with 5 or more units that have a rent schedule, it is only needed when the community first applies to participate on program. In addition, exceptions may be made at the Director level as it relates to single family owners that own multiple units that are all tied to the same loan. The mortgage statement must show the mortgagee name, property address, and that it is paid to date with no previous or unpaid balance.
  - If a bank statement is unavailable, a signed letter on bank letterhead including bank personnel contact information with the above information is acceptable.
  - Properties involved in a loan modification will generally not be approved for the HCVP; special approval will be required.
  - If there is no mortgage, a Settlement Statement showing a cash purchase, cancellation of security deed recorded on GSCCCA, title search or letter on bank letterhead as specified above stating loan is satisfied are acceptable.
- LEAD-BASED PAINT DISCLOSURE NOTICE If the property was built before 1978, the form must be completed in its entirety by the Landlord and Participant with all the appropriate boxes checked, initialed and signed.
- MULTI-FAMILY COMMUNITIES (5 UNITS OR MORE) If the property has 5 units or more and has a rent schedule, additional information may be required when the community initially applies for participation..

  For new multi-family communities, a current rent roll must be provided that supports the rental amount(s) being requested
- AUTHORIZATION TO TRANSACT (IF APPLICABLE) Form must be submitted for any property manager, management company, third party individual or business not listed on the Property Owner Application who will be conducting business with AH on behalf of the owner.
- HOMEOWNER'S ASSOCIATION VERIFICATION If there is an active Homeowner's Association in the community, the owner must be in compliance with the rules and regulations of the covenants. AH will require the owner to self-certify that it is permissible to lease the unit in the community. In addition, the owner will need to send documentation that all HOA dues, fees and utilities are current.

NOTE: IF ALL OF THE REQUIRED DOCUMENTS THAT ARE APPLICABLE TO THE SUBJECT UNIT ARE NOT PROVIDED, AH WILL RETURN THE POA/RTA TO THE SUBMITTERREQUESTING THE APPLICABLE DOCUMENTS. FAILURE TO PROVIDE THE REQUESTED DOCUMENTATION COULD RESULT IN THE CANCELLATION OF YOUR RTA.

# REQUEST FOR TENANCY APPROVAL INCOMPLETE PACKAGES WILL NOT BE ACCEPTED

PARTICIPANT INFORMATION				
Participant Name JOSEPH WATSON Ten  Does the Participant require Reasonable Accommodations d	nant Code <u>t1212697</u> lue to a disability?			
Unit is Inspection Ready	CERTIFICATION			
INSPECTION REQUIREMENT: By initialing, the owner or owner's authorized representative is certifying that the AH Enhanced Inspections Checklist was used to prepare the unit for inspection and it is (all must be checked):  □ Vacant □ Active Utilities □ Free of furniture □ Inspection Ready PRIOR to submitting this Request for Tenancy Approval. Units NOT ready on initial visit may be subject to rejection without further notice from AH.  I certify that the unit is READY for inspection:(initial) Date:/				
PROPERTY INFORM	MATION			
1. Has this property/unit been rented to AH Housing Choice Voucher Participants before? ☐ Yes ☐ No  If yes, when was your last Housing Assistance Payment: MonthYear  2. Is there a mortgage on the property? ☐ Yes ☐ No If yes, when was your last payment made: MonthYear  3. Is the property involved in a loan modification? ☐ Yes ☐ No  4. Is there a Homeowner's Association for the property? ☐ Yes ☐ No  If yes, I certify by initialing below that the following are true and correct: ☐ I have permission from the HOA to lease the unit in the community. Initials ☐ I have attached documents to support that all dues and utilities (if part of the HOA dues) are current. Initials  Warning! Title 18, Section 1001 of the U.S. Code states that a person is guilty of a felony for knowingly making false statements or misrepresentation to any department or agency of the United States. I understand that if statement is in any way falsified, I could also be subject to termination from the AH Program. Initials				
Unit Street Address Apt #	City State Zip			
	ATLANTA GA			
Community or Subdivision Name  Bedroom size must match voucher (NO EXCEPTIONS)  # of Bedroom(s)  # of Bathroom(s)  Square Footage  *AH will verify with Tax Assessor  Year Built				

Revised 08/2021 Page 3 of 7

HCO6002 **PFILE** t1212697

# REQUEST FOR TENANCY APPROVAL INCOMPLETE PACKAGES WILL NOT BE ACCEPTED

Single Family: $\square$ House $\square$	Duplex Triplex Quadruplex
Multi-Family: Small (5 to	o 24 units) Large (25 or more units)
Single Room Occupancy (SF	RO): Total Number of Rooms for Lease:
If property is and SRO, I certi	fy by checking the boxes and initialing below, that the following are true and correct:
☐ I have complied with all that are not of the same far	City of Atlanta Zoning requirements to lease rooms to multiple tenants in the same dwelling
	mily. Initials ents (Special Use Permit) from the City of Atlanta Zoning Department to support approval of
the SRO dwelling. Initials	
4 Amid 40 G. d 1	
Warning! Title 18, Section 1 statements or misrepresenta	.001 of the U.S. Code states that a person is guilty of a felony for knowingly making false ation to any department or agency of the United States. I understand that if statement is in any
	subject to termination from the AH Program. Initials
If the count is subsidized indi-	anta tuna af autoridu.
If the unit is subsidized, indic	ale type of substay:  \[ \sum_ DCA Home LIHTC/NSP \] \[ \sum_ ADA/URFA \] \[ \sum_ Tax Credit \] \[ \sum_ Other - Describe:
□ COA/ποιιιε/CDBG/N1 S	□ DCA Home LITTC/NSF □ ADA/UKFA □ Tax Creati □ Other - Describe.
**************************************	10 · - · · · · · · · · · · · · · · · · ·
If Multi-Family Property	/Complex: Total # of Units in Property/Complex:
Is this community designs	ated for:  □ Elderly (senior) □ Disabled □ Supportive Housing
• 0	t one): Sole Proprietor (Individual) LLC Corporation Partnership Trust
Type of Ownership (selec	t one): USole Proprietor (Individual) ULLC UCorporation UPartnership UTrust U
Type of Ownership (selec	t one): □Sole Proprietor (Individual) □LLC □Corporation □Partnership □ Irust □
Type of Ownership (selec	RENT AMOUNT
Type of Ownership (selec	
Type of Ownership (selec Estate	RENT AMOUNT
Type of Ownership (select Estate  **Requested Monthly Re *If you do not agree with the tax of the selection	RENT AMOUNT  ***Proposed Move-in Date  assessor's square footage, an appraisal must be submitted with this RTA reflecting the requested change.
Type of Ownership (select Estate  **Requested Monthly Re *If you do not agree with the tax of the way and the selection of th	RENT AMOUNT
Type of Ownership (select Estate  **Requested Monthly Re *If you do not agree with the tax of the way and the selection of th	RENT AMOUNT  ***Proposed Move-in Date  assessor's square footage, an appraisal must be submitted with this RTA reflecting the requested change. the payment standard for voucher/bedroom size for subject unit. To determine the payment standard, visit AH's

Revised 08/2021 Page 4 of 7

HCO6002 **PFILE** t1212697

## REQUEST FOR TENANCY APPROVAL

INCOMPLETE PACKAGES WILL NOT BE ACCEPTED				
	Ų	UTILITY RESPONSIBILITY (REQUIRED)		
	Payment Responsibility: T=Tenant O=Owner			
Heating				
Cooking	☐ Natural Gas ☐ Elect	ric		
Water Heating	☐ Natural Gas ☐ Elect	ric Oil Heat Pump		
Other Electric:	(outlets, lights, general elec	etricity)		
Electric	☐ Individually Metered	☐ Master Metered		
Gas	☐ Individually Metered	☐ Master Metered		
Water	☐ Individually Metered	Master Metered		
Sewer	☐ Individually Metered	☐ Master Metered		
Air Conditioning	g Central A/C	☐ Window Unit A/C		
Trash (City)	Note: Responsibility f	or trash is always Owner		0
Other (Specify)	ı			
	esting consideration for an Ener ng consideration for an Energy F	Efficiency Rent Boost for the following:		
Enongr		ENERGY EFFICIENCY RENT BO	0818	
Energy Efficiency Rent Boost Level	Description	Minimum Requirement		ntion/Verification Required (all eriteria must be met)
Level 1 – Silver - \$50	Upgraded Lighting System, Low Flow Water Upgrades, Upgraded Insulation	Replacement of incandescent bulbs with LED Bulbs, Low Flow faucet aerators and Toilet(s) that use 1.28 gallons or less per flush, installing insulation to meet or exceed an R-38 value in the attic and for unconditioned basement or crawl space install floor insulation to meet or exceed R-19	AH Inspector	Verification
Level 2 – Gold - \$125	All Qualifications for Level 1(Silver), plus: Professional Weather Sealing and Energy Star Appliances (Refrigerator only)	Upgrades to all of the following are required in addition to Level 1 above plus:  • Weather sealing per table 402.1.2 of GA Energy Code  • Energy Star Rated Refrigerator	AH Inspector Verification  Landlord must supply model number and serial number to the inspector  Verification of Energy Star Product at <a href="https://www.energystar.gov/products">https://www.energystar.gov/products</a> Landlord must supply final weather sealing test report or equivalent as approved	
Level 3 – Platinum - \$175	All Qualifications for Level land 2 (Silver & Gold) plus: New/like new or recently replaced HVAC System and Energy Efficient Windows	Upgrades to all of the following are required in addition to Level 1 and Level 2 above plus;  • Furnace and Central A/C or Energy Star Qualified PTAC unit  • 16 Seer or better exterior condenser  • Proper seal of ductwork  • Programmable Thermostat  • Replacement of all single pane windows with Low-E Glass Windows	nu	Verification andlord must supply model amber and serial number to the spector
	in the rent offer, the upgrades describules be provided to the Inspector.	bed above MUST be verified by the Inspector and i	f applicable, requ	nired documentation/

Revised 08/2021 Page 5 of 7 HCO6002 **PFILE** t1212697

## REQUEST FOR TENANCY APPROVAL INCOMPLETE PACKAGES WILL NOT BE ACCEPTED

	COMPARABLE UNITS (IF APPLICAB	(LE)
Current Redacted Leases   FMLS	ble units and am providing the required sup	
consideration in rent offer, comparable unit(s) exceptions). <b>Documentation will not be acc</b>		ns boost <u>MUST</u> be provided at the submission of the RTA
	PROPERTY OWNER DOCUMEN	TS
Property Owner must provide:  Recorded Deed Unrecorded Unrecorded		
Additional Documents (if applicable)  Lead-Based Paint Disclosure At Landlord Briefing Certificate #  City of Atlanta Zoning Documentatio	Homeowner's Association (Dues and Utilities	s current and Self-Certification of Authorization to Lease)
<ul> <li>☐ The unit, common areas servicing lead-based paint-free by a lead-based paint-free paint-fre</li></ul>	based paint inspector certified under the Federic complete and submit the "Lead-Based Paint II, containing disclosure of known information of ainted surfaces, including a statement that the t. Please complete and submit the "Lead-Based anta Housing to certify that the rent charged to comparable units. Owners of properties with resisted units within the premises.	Based Paint: built on or after January 1, 1978. ded with such unit or common areas have been found to be eral certification program or under a federally accredited Disclosure Notice". on lead-based paint and/or lead-based paint hazards in the owner has provided the lead hazard information pamphlet
b)	less AH has determined (and has notified to of the unit, notwithstanding such relationship ith disabilities.  oice Participant's behavior or suitability for ten rough the subject property may be submitted for property in the subject property owner. Property owner and Housing Choice Participant as to what Standards Checklist to ensure the unit complies the U.S. Code states that a person is guilty	randparent, grandchild, sister or brother of any member of the owner and the Housing Choice Participant of such, would provide reasonable accommodation for a Housing ancy. Such screening is the owner's own responsibility.
		Revised 08/2021 Page 6 of 7
t1212697	HCO6002	PFILE

### REQUEST FOR TENANCY APPROVAL

INCOMPLETE PACKAGES WILL NOT BE ACCEPTED

Property Owner's Required Documents Checklist and Certifications Continued

UPON APPROVAL OF THIS REQUEST FOR TENANCY APPROVAL, AH WILL MAKE PAYMENT TO THE INIDIVIDUAL OR BUSINESS ENTITY AS AUTHORIZED BY THE OWNER ON THE PROPERTY OWNER APPLICATION. IF YOU WOULD LIKE TO CHANGE THIS INFORMATION, PLEASE SUBMIT A CHANGE OF KEY CONTACT INFORMATION FORM ALONG WITH A COPY OF THE VOIDED CHECK.

### REQUEST FOR TENANCY APPROVAL POINT OF CONTACT

AH will discuss the processing of this Request for Tenancy Approval with the owner or the person designated by the owner as authorized on the Property Owner Application and Authorization to Transact form. If you would like to change this information, please submit an updated Authorization to Transact form.

Print or Type Name of Authorized Owner/Owner Representative		Print or Type Name of Head of Household		
			_	
Signature of Owner/Owner Representative		Signature of Head of Household Docusigned by:		
Street Address		Present Street Address of Fan	59A1DDA0584B4C4	
City	ST Zip	City	ST Zip	
Telephone Number	Mobile Telephone Number	Telephone Number	Mobile Telephone Number	
Email Address	Date	Email Address	Date	

Revised 08/2021 Page 7 of 7



### LEAD-BASED PAINT DISCLOSURE NOTICE Disclosure of Information on Lead-Based Paint and/or Lead-Based Paint Hazards

**Lead Warning Statement:** Housing built before 1978 may contain lead-based paint. Lead from paint, paint chips and dust can pose health hazards if not managed properly. Lead exposure is especially harmful to young children and pregnant women. Before renting pre-1978 housing, lessors must disclose the presence of known lead-based paint and/or lead-based hazards in the dwelling. Lessees must also receive a federally approved pamphlet on lead poisoning prevention. 42 U.S.C. 4582(d)

Owner/Landlord Name	e:	Owner/Landlord Phone:			
Property Name (if app	licable):		Year Βι	ıilt:	
Unit Address:			_ City:	ST:	Zip:
Participant Name:			Participant Cli	ent ID:	
Owner/Landlord Discl		•	s: (Check one held	ow).	
☐ Known lead-based pa		· ·			
Owner/Landlord has	no knowledge of lead	d-based paint and/or	· lead-based paint	hazards in the hou	sing.
2.) Records and reports	available to the Own	er/Landlord: (Check	x <u>only</u> one below)	:	
Owner/Landlord has and/or lead-based pai					
Qwner/Landlord has	no records or reports	pertaining to lead-b	pased paint and/o	r lead-based paint h	nazards in the housing.
Owner/Landlord Ackr	eceived the pamphlet cowledgement: (In is aware of obligation aware of his/her res	: Protect Your Family itial below): ns under 42 U.S.C. 48 ponsibility to ensure	from Lead in You  852(d)which is me compliance.	r Home. ntioned above in th	e Lead Warning
statements or misrepres The following parties h information provided	entation to any deparate reviewed the i	artment or agency of nformation above	of the United Stat	es.	
Owner/Landlord Name _ Participant Name _	OSEPH WATSON	Signatu Signatur	re DocuSigne	d by: Date Date Date Date Date Date Date Date	te January 18, 2023 te
If you require special the need to receive d 892-4700, by email Atlanta, Georgia 30 Service assistance, di	assistance or reasocuments or comm at <a href="https://hcreacc@atlanta">hcreacc@atlanta</a> 0303, Attention:	onable accommoda unications in altern ahousing.org or l	ations due to a d nate formats, ple by mail at 230	isability, including ease contact Hous John Wesley Do	g but not limited to ing Choice at (404) bbs Avenue, N.E.,

t1212697 HCO6003 PFILE



# NEW PROPERTY OWNER APPLICATION SUBMISSION

Welcome and thank you for your interest in Atlanta Housing's (AH) Housing Choice Voucher Program (HCVP).

In order to become an AH Housing Choice property owner, applicants must submit a Property Owner Application (POA) through AH's Property Owner Portal at <a href="https://www.ownerportal.atlantahousing.org">www.ownerportal.atlantahousing.org</a>, where you can submit the application electronically and digitally sign the document.

Before final approval of your application, you must also either attend a Property Owner Briefing in person or view the information online.

To attend in person, you may register at: <a href="https://fs2.formsite.com/PROPERTYOWNERBRIEFING/form2/index.html">https://fs2.formsite.com/PROPERTYOWNERBRIEFING/form2/index.html</a>

To view the information online, visit:

https://fs2.formsite.com/PROPERTYOWNERBRIEFING/so2tl7jru5/index.html

Once complete, you'll receive your Landlord Briefing Attendance Number which confirms your completion of the briefing.

Finally, once you have selected a tenant and completed the Request for Tenancy Approval (RTA), you can upload it to the portal as well, saving you the hassle of traveling to the Atlanta Housing office.

We are so excited that you have chosen to partner with Atlanta Housing to provide quality housing for the betterment of the community.

Sincerely,

AH HCVP Landlord Services
<a href="mailto:hccontractsmailbox@atlantahousing.org">hccontractsmailbox@atlantahousing.org</a>
404-892-4700 (press Option 3 for Housing Choice)

HCO6004 PFILE

\*HCO2049\* \*LLFILE\*