



117 Lane Drive Ste. 18 | Rosenberg, TX 77471 | 281.342.1456 P | www.rosenbergha.org

Property Manager:

The Housing Authority of City of Rosenberg's (RHA) jurisdiction covers Fort Bend County. Thank you for your interest in leasing to a Housing Choice Voucher Program (HCV) participant. Once you have determined that a tenant is a suitable candidate to lease from you, please adhere to the following steps to determine whether the client will be eligible to receive subsidized assistance at your unit:

Step 1: Return RTA Packet to the Rosenberg Housing Authority

You must complete all the documents from the attached Request for Tenancy Approval (RTA) Packet:

- (1) Request for Tenancy Approval
 - Box 8 "Date Unit Available for Inspection" should have a date at least 15 calendar before the Requested Lease Date in Box 3. **If the date is in Box 8 is less than 15 calendar days, the lease may not start on the Requested Lease Date.**
 - Must be signed by both the owner and the HCV client.
- (2) Landlord Certification
- (3) Completed W-9 for the Owner
- (4) Lead-based Paint Disclosure for pre-1978 Units

In addition, If you have never participated in the HCV program with the RHA, you must provide the following documents located in the back of this Packet:

- (1) New Owner Identification Form
- (2) Warranty Deed (filed and recorded - all pages)
- (3) Proof of Owner's Social Security number or EIN number (Form SS-4)
- (4) Copy of Valid Government Issued ID



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All of the documents listed above must be returned to the Rosenberg Housing Authority before the deadline on the front of this packet. Please note that the name and EIN/Social Security number listed on the owner's W-9 must match the warranty deed. When the RTA Packet and the other documents listed above are returned, RHA staff will review them for completeness and accuracy. If the contents of the packet are not complete or not consistent, the packet will not be accepted. If the documents have been completed correctly, the Inspector will contact you to schedule an inspection to be conducted within 10-15 business days. If you still reside in the unit, then RHA will not be able to perform the inspection.

Step 2: Prepare the Unit for Inspection

The unit that you list in the enclosed RTA Packet will be inspected to ensure that it meets the federal standards for subsidized units on the Housing Choice Voucher Program. Your unit must pass this inspection, known as the Housing Quality Standard (HQS) Inspection, before the Authority can execute a Housing Assistance Payment (HAP) Contract with you. Enclosed in this packet is a document called "The Top Reasons Why Units Fail HQS Inspection" (see pg. 3-4) that you can refer to as a guide to ensuring that your unit is ready for the HQS inspection.

Step 3: Wait for the HAP Contract

If your unit passes the HQS inspection, the proposed rent that you listed on Box 6 of the RTA Packet will be reviewed by the Authority's market analysts for reasonableness. You may be contacted to resolve any discrepancies related to the rent amount. After the appropriate rent amount is established, the RTA will be forwarded to an occupancy technician for the execution of the HAP Contract. The HAP contract will not be completed until you and the tenant supply a lease with the move-in date.

Step 4: Allow the Client to Move In

On the effective date of your executed HAP contract and lease agreement (they must match), you should allow the client to move into the unit. If you allow a client to move in on the date your unit passes inspection, or any other date before the HAP contract is executed, the client will be responsible for the full rent. You will receive your first HAP payment within 15-20 days of the execution of your HAP Contract. All subsequent payments will be made on, or around, the 5th business day of each month.



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THE TOP REASONS WHY UNITS FAIL HQS INSPECTION

Owners should pay particular attention to the following items when preparing their units for inspection. Use of this document will help you pass the HQS Inspection

Windows

- Severe deterioration or windows allowing drafts and weather inside the unit.
- Broken and missing windowpanes or boarded up windows.
- No window in the living room.
- The bedroom doesn't have at least one window that opens.
- Bathroom does not have either a working vent fan or a window that opens.
- No locks on 1st floor windows or other windows accessible from the ground.
- If windows have multiple locks, all locks must work. No safety locks.

Doors

- Lack of weather-stripping.
- Inoperable locks or locks installed that require a key to open from the inside, including security doors.
- Doors that do not close properly preventing the lock from working.

Walls and Ceilings

- Bulging plaster or wallboard, damp plaster from leaks, holes.

Paint (units built before 1978 and occupied by child under age 6)

- Peeling, chipping, flaking, chalking paint on any painted surface in unit, common areas or exterior.
- Rotting or deteriorated substrate under painted surface.

Electricity

- Outlets and overhead/wall mounted fixtures that do not work or were improperly installed.
- Missing covers on outlets and switches. Exposed, cracked, frayed wiring or wiring not properly secured.
- Electrical boxes missing knockouts or open spaces in boxes without breakers or blanks.
- Utilities are not turned on.
- Electric outlet(s) with open ground.

Safety

- Unit lacks an operable smoke detector in one or more sleeping room or other required spaces, such as common areas.
- Presence of gas leaks or fumes.



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Floors, Decks, Porches and Exteriors

- Holes in floors allowing drafts or entry by vermin.
- Tripping hazards, such as protruding nails or holes in carpets.
- Roof leaks.
- Fences or garages that are unsound and have safety hazards.

Plumbing Leaks

- Leaking faucets, toilets, or fixture drain pipes.

Appliances

- Missing appliances that are listed as “provided by owner” in the lease.
- Stoves and refrigerators that do not work or are missing manual shut off for gas range.
- Stove burners that do not work or have missing knobs.
- Oven not working or oven door not closing properly.
- Stove temperature knobs not readable
- Stove not level
- Drip pan and burner not flush and secure

Handrails and Guardrails

- No handrails on steps with 4” or more risers.
- No guardrails around decks or porches that are 30” or more inches off ground level.

Water Heaters and Heating Equipment

- No pressure relief valve or no discharge line within 6” of ground on the hot water heater. No manual shut off valves on heating and hot water equipment fired by fuel.

Exterior

- Wooden fencing is broken
- Missing slab.
- Front & Back yards not mowed

General

- Some fixtures or facilities within the unit are not clean.
- Trash and/or debris in yard or premises.
- No screens on windows and doors when refrigerated air is not available.
- Apartment numbers not visible



EXHIBIT 16-2: CERTIFICATION OF DOMESTIC VIOLENCE, DATING VIOLENCE, SEXUAL ASSAULT, OR STALKING AND ALTERNATE DOCUMENTATION, FORM HUD-5382

CERTIFICATION OF DOMESTIC VIOLENCE, DATING VIOLENCE, SEXUAL ASSAULT, OR STALKING, AND ALTERNATE DOCUMENTATION

U.S. Department of Housing and Urban Development

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

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

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

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

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

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

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



TO BE COMPLETED BY OR ON BEHALF OF THE VICTIM OF DOMESTIC VIOLENCE, DATING VIOLENCE, SEXUAL ASSAULT, OR STALKING

1. Date the written request is received by victim: _____
2. Name of victim: _____
3. Your name (if different from victim's): _____
4. Name(s) of other family member(s) listed on the lease: _____

5. Residence of victim: _____
6. Name of the accused perpetrator (if known and can be safely disclosed): _____

7. Relationship of the accused perpetrator to the victim: _____
8. Date(s) and times(s) of incident(s) (if known): _____

10. Location of incident(s): _____

In your own words, briefly describe the incident(s):

This is to certify that the information provided on this form is true and correct to the best of my knowledge and recollection, and that the individual named above in Item 2 is or has been a victim of domestic violence, dating violence, sexual assault, or stalking. I acknowledge that submission of false information could jeopardize program eligibility and could be the basis for denial of admission, termination of assistance, or eviction.

Signature _____ Signed on (Date) _____

Public Reporting Burden: The public reporting burden for this collection of information is estimated to average 1 hour per response. This includes the time for collecting, reviewing, and reporting the data. The information provided is to be used by the housing provider to request certification that the applicant or tenant is a victim of domestic violence, dating violence, sexual assault, or stalking. The information is subject to the confidentiality requirements of VAWA. This agency may not collect this information, and you are not required to complete this form, unless it displays a currently valid Office of Management and Budget control number.



OWNER NOTIFICATION OF RIGHTS AND OBLIGATIONS

Rosenberg Housing Authority

NOTIFICATION OF YOUR RIGHTS AND OBLIGATIONS

UNDER THE VIOLENCE AGAINST WOMEN ACT (VAWA)

VAWA provides protections for Section 8 Housing Choice Voucher (HCV) and PBV applicants, tenants, and participants from being denied assistance on the basis or as a direct result of being a victim of domestic violence, dating violence, sexual assault and stalking.

Purpose

Many of VAWA's protections to victims of domestic violence, dating violence, sexual assault and stalking involve action by the public housing agency (PHA), but some situations involve action by owners of assisted housing. The purpose of this notice (herein called "Notice") is to explain your rights and obligations under VAWA, as an owner of housing assisted Rosenberg Housing Authority HCV program. Each component of this Notice also provides citations to HUD's applicable regulations.

Denial of Tenancy

Protections for applicants: Owners cannot deny tenancy based on the applicant having been or currently being a victim of domestic violence, dating violence, sexual assault, or stalking. However, the applicant must be otherwise eligible for tenancy. (See 24 Code of Federal Regulations (CFR) 982.452(b)(1).)

Eviction

Protections for HCV participants: Incidents or threats of domestic violence, dating violence, sexual assault, or stalking will not be considered a serious or repeated lease violation by the victim, or good cause to terminate the tenancy of the victim (24 CFR 5.2005(c)). Protection also applies to criminal activity related directly to domestic violence, dating violence, sexual assault, or stalking, conducted by a member of a tenant's household or any guest or other person under the tenant's control, if the tenant or an affiliated individual of the tenant is the victim or threatened victim of such domestic violence, dating violence, sexual assault, or stalking (24 CFR 5.2005(b)(2)).

Limitations of VAWA protections:

a. Nothing in the VAWA Final Rule limits the authority of an owner, when notified of a court order, to comply with a court order with respect to (24 CFR 5.2005(d)(1)):

1) 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

2) The distribution or possession of property among members of a household in a case.

b. Nothing in the VAWA Final Rule limits an owner from evicting a victim of domestic violence, dating violence, sexual assault, or stalking for a lease violation that is not premised on an act of domestic violence, dating violence, sexual assault, or stalking, as long as the owner does not subject the victim to more demanding standards than other tenants when deciding whether to evict. (See 24 CFR 5.2005(d)(2).)

c. Nothing in the VAWA Final Rule limits an owner from evicting a tenant (including the victim of domestic violence, dating violence, sexual assault, or stalking) if the owner can demonstrate an actual and imminent threat to other tenants or those employed at or providing services to the HCV property would be present if the tenant or lawful occupant is not evicted. (See 24 CFR 5.2005(d)(3).)



i. In this context, words, gestures, actions, or other indicators will be considered an “actual and imminent threat” if they meet the following standards: An actual and imminent threat consists of 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. (See 24 CFR 5.2003.)

ii. Any eviction due to “actual and imminent threat” should be utilized by an owner only when there are no other actions that could be taken to reduce or eliminate the threat, including, but not limited to, transferring the victim to a different unit, barring the perpetrator from the property, contacting law enforcement to increase police presence or develop other plans to keep the property safe, or seeking other legal remedies to prevent the perpetrator from acting on a threat. Restrictions predicated on public safety cannot be based on stereotypes, but must be tailored to particularized concerns about individual residents. (See 24 CFR 5.2005(d)(4).)

Documentation of Domestic Violence, Dating Violence, Sexual Assault, or Stalking

If an applicant or tenant requests VAWA protection based on status as a victim of domestic violence, dating violence, sexual assault, or stalking, the owner has the option to request that the victim document or provide written evidence to demonstrate that the violence occurred. However, nothing in HUD’s regulation requires a covered housing provider to request this documentation. (See 24 CFR 5.2007(b)(3).)

If the owner chooses to request this documentation, the owner must make such request in writing. The individual may satisfy this request by providing any one document type listed under 24 CFR 5.2007(b)(1):

- a. Form HUD-55383 (Self-Certification Form); or
- b. A document: 1) Signed by an employee, agent, or volunteer of a victim service provider, an attorney, or medical professional or a mental health professional (collectively, “professional”) from whom the victim has sought assistance relating to domestic violence, dating violence, sexual assault, or stalking, or the effects of abuse:
 - 2) Signed by the applicant or tenant; and
 - 3) That specifies, under penalty of perjury, that the professional believes in the occurrence of the incident of domestic violence, dating violence, sexual assault, or stalking that is the ground for protection and remedies under 24 CFR part 5, subpart L, and that the incident meets the applicable definition of domestic violence, dating violence, sexual assault, or stalking under 24 CFR 5.2003; or
- c. A record of a Federal, State, tribal, territorial or local law enforcement agency, court, or administrative agency; or
- d. At the discretion of a covered housing provider, a statement or other evidence provided by the applicant or tenant.

The owner must accept any of the above items (a – c). The owner has discretion to accept a statement or other evidence (d).

The owner is prohibited from requiring third-party documentation of the domestic violence, dating violence, sexual assault, or stalking, unless the submitted documentation contains conflicting information.



If the owner makes a written request for documentation, the owner may require submission of that documentation within 14 business days after the date that the individual received the written request for documentation. (24 CFR 5.2007(a)(2)). The owner may extend this time period at its discretion. During the 14 business day period and any granted extensions of that time, no adverse actions, such as evictions or terminations, can be taken against the individual requesting VAWA protection.

Once a victim provides documentation of domestic violence, dating violence, sexual assault, or stalking, the owner is encouraged to acknowledge receipt of the documentation in a timely manner.

If the applicant or tenant fails to provide documentation that meets the criteria in 24 CFR 5.2007 within 14 business days after receiving the written request for that documentation or within the designated extension period, nothing in VAWA Final Rule may be construed to limit the authority of the covered housing provider to:

- a. Deny admission by the applicant or tenant to the housing or program;
- b. Deny assistance under the covered housing program to the applicant or tenant;
- c. Terminate the participation of the tenant in the covered housing program; or
- d. Evict the tenant, or a lawful occupant that commits a violation of a lease.

An individual's failure to timely provide documentation of domestic violence, dating violence, sexual assault, or stalking does not result in a waiver of the individual's right to challenge the denial of assistance or termination, nor does it preclude the individual's ability to raise an incident of domestic violence, dating violence, sexual assault, or stalking at eviction or termination proceedings.

Moves

A victim of domestic violence, dating violence, sexual assault, or stalking may move in violation of their lease if the move is required to protect their safety. If a move results in the termination of the Housing Assistance Payment Contract, the lease is automatically terminated.

Lease Bifurcation

Owners may choose to bifurcate a lease, or remove a household member from a lease in order to evict, remove, terminate occupancy rights, or terminate assistance to such member who engages in criminal activity directly relating to domestic violence, dating violence, sexual assault, or stalking against an affiliated individual or other individual. (See 24 CFR 5.2009(a).) If an owner chooses to bifurcate the lease, the owner must comply with the reasonable time to establish eligibility under the covered housing program or find alternative housing following lease bifurcation provision in 24 CFR 5.2009(b). VAWA protections, including bifurcation, do not apply to guests or unreported members of a household or anyone else residing in a household who is not a tenant.

Eviction, removal, termination of occupancy rights, or termination of assistance must be effected in accordance with the procedures prescribed by federal, state, or local law for termination of leases.

To avoid unnecessary delay in the bifurcation process, HUD recommends that owners seek court-ordered eviction of the perpetrator pursuant to applicable laws. This process results in the underlying lease becoming null and void once the owner regains possession of the unit. The owner would then execute a new lease with the victim.



Evictions Due to “Actual and Imminent Threat” or Violations Not Premised on Abuse

The VAWA Final Rule generally prohibits eviction on the basis or as a direct result of the fact that the applicant or tenant is or has been a victim of domestic violence, dating violence, sexual assault, or stalking, if the applicant or tenant otherwise qualifies for assistance, participation or occupancy. (See 24 CFR 5.2005.)

However, the VAWA Final Rule does not prohibit an owner from evicting a tenant for any violation not premised on an act of domestic violence, dating violence, sexual assault, or stalking that is in question against the tenant or an affiliated individual of the tenant. Nor does the VAWA Final Rule prohibit an owner from evicting a tenant if the owner can demonstrate an actual and imminent threat to other tenants or those employed at or providing services to property of the owner would be present if that tenant or lawful occupant is not evicted or terminated from assistance. (See 5.2005(d)(2) and (3).)

In order to demonstrate an actual and imminent threat to other tenants or employees at the property, the covered housing provider must have objective evidence of words, gestures, actions, or other indicators that meet the standards in the following definition:

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.

(See 24 CFR 5.2003 and 5.2005(d)(2).)

Confidentiality

Any information submitted to a covered housing provider under 24 CFR 5.2007, including the fact that an individual is a victim of domestic violence, dating violence, sexual assault, or stalking, must be maintained in strict confidence by the covered housing provider. (See 24 CFR 5.2007(c).)

Employees of the owner (or those within their employ, e.g., contractors) must not have access to the information unless explicitly authorized by the owner for reasons that specifically call for these individuals to have access to this information under applicable Federal, State, or local law (e.g., the information is needed by an employee to provide the VAWA protections to the victim).

The owner must not enter this information into any shared database, or disclose this information to any other entity or individual, except to the extent that disclosure is:

- a. Requested or consented to in writing by the individual (victim) in a time-limited release;
- b. Required for use in an eviction proceeding or hearing regarding termination of assistance from the covered program; or
- c. Otherwise required by applicable law.

When communicating with the victim, owners must take precautions to ensure compliance with these confidentiality requirements.

Definitions

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.

Affiliated individual, with respect to an individual, means:

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

Bifurcate means to divide a lease as a matter of law, subject to the permissibility of such process under the requirements of the applicable HUD-covered program and State or local law, such that certain tenants or lawful occupants can be evicted or removed and the remaining tenants or lawful occupants can continue to reside in the unit under the same lease requirements or as may be revised depending upon the eligibility for continued occupancy of the remaining tenants and lawful occupants.

Dating violence means violence committed by a person:

- (1) Who is or has been in a social relationship of a romantic or intimate nature with the victim; and
- (2) Where the existence of such a relationship shall be determined based on a consideration of the following factors:
 - (i) The length of the relationship;
 - (ii) The type of relationship; and
 - (iii) The frequency of interaction between the persons involved in the relationship.

Domestic violence includes felony or misdemeanor crimes of violence committed by a current or former spouse or intimate partner of the victim, by a person with whom the victim shares a child in common, by a person who is cohabitating with or has cohabitated with the victim as a spouse or intimate partner, by a person similarly situated to a spouse of the victim under the domestic or family violence laws of the jurisdiction receiving grant monies, or by any other person against an adult or youth victim who is protected from that person's acts under the domestic or family violence laws of the jurisdiction. The term "spouse or intimate partner of the victim" includes a person who is or has been in a social relationship of a romantic or intimate nature with the victim, as determined by the length of the relationship, the type of the relationship, and the frequency of interaction between the persons involved in the relationship.



Sexual assault means any nonconsensual sexual act proscribed by Federal, tribal, or State law, including when the victim lacks capacity to consent.

Stalking means engaging in a course of conduct directed at a specific person that would cause a reasonable person to:

- (1) Fear for the person's individual safety or the safety of others; or
- (2) Suffer substantial emotional distress.

VAWA means the Violence Against Women Act of 1994, as amended (42 U.S.C. 13925 and 42 U.S.C. 14043e et seq.).

Attached:

Legal services and the domestic violence resources for the Metro area
Form HUD-5382 Certification of Domestic Violence, Dating Violence, Sexual Assault, or Stalking

Rosenberg Housing Authority VAWA Notice of Occupancy



NEW OWNER IDENTIFICATION FORM

ALL Information and requested documents must be supplied on these forms in full or they will be returned for completion, which will delay the Inspection and Assistance Payment process.

TAXPAYER CERTIFICATION AND IDENTIFICATION NUMBER PLEASE PRINT:

NAME: _____
(Must be name of person, company, etc. who is responsible for the IRS reporting—a 1099 is issued in this name at the end of the year.)

ADDRESS: _____
(Address where the check is to be mailed—cannot be tenant's unit.)

Date of Birth: _____

Phone number: _____ E-mail Address _____

If you stated above that your agency is an "LLC", please circle which of the following two options best describes your agency:

- Limited Liability COMPANY
- Limited Liability CORPORATION

If you are providing a P.O. Box for delivery of your check, please provide a residential address:

SOCIAL SECURITY #/FEDERAL I.D. # _____
(Must match above name for 1099 reporting—"on file" not acceptable)

The following information is requested on the person whose tax I.D. number is listed above: MALE: _____ FEMALE: _____

RACE: Black Asian ETHNICITY: Hispanic
 White American Indian Non-Hispanic
 Other

NAME(S) OF ANY OR ALL OTHER PERSON(S) ON DEED OR MORTGAGE: _____

ALL ELECTED OFFICIALS MUST DISCLOSE THEIR POSITIONS IN ORDER TO DETERMINE POSSIBILITY OF CONFLICT OF INTEREST.

ARE YOU (the owner of the property) AN ELECTED OFFICIAL? _____. If YES, please disclose the position you hold: _____

Please provide the following items along with this form:

1. The attached W9 filled out.
 2. Copy of Valid Government Issued ID
 2. Copy of proof of ownership (Deed or Trust, Settlement Statement, Property Tax Statement)
 3. Copy of Social Security Card and/or Copy of IRS Form SS-4 for EIN Number
- All these items can be emailed to kbrown@rosenbergha.org or Faxed to 281-232-2920 ATTN: Kim Brown.
Any questions can be directed to the above email address or call (281)342-1456x13

Request for Taxpayer Identification Number and Certification

Give Form to the
requester. Do not
send to the IRS.

Print or type
See Specific Instructions on page 2.

Name (as shown on your income tax return)	
Business name/disregarded entity name, if different from above	
Check appropriate box for federal tax classification: <input type="checkbox"/> Individual/sole proprietor <input type="checkbox"/> C Corporation <input type="checkbox"/> S Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Trust/estate <input type="checkbox"/> Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=partnership) ▶	
<input type="checkbox"/> Exempt payee	
Address (number, street, and apt. or suite no.)	Requester's name and address (optional)
City, state, and ZIP code	Rosenberg Housing Authority 117 Lane Drive, Suite 18 Rosenberg, TX 77471
List account number(s) here (optional)	

Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on the "Name" line to avoid backup withholding. For individuals, this is your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the Part I instructions on page 3. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN* on page 3.

Social security number																												
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Note. If the account is in more than one name, see the chart on page 4 for guidelines on whose number to enter.

Employer identification number																				
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Part II Certification

Under penalties of perjury, I certify that:

1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me), and
2. I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding, and
3. I am a U.S. citizen or other U.S. person (defined below).

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions on page 4.

Sign Here

Signature of
U.S. person ▶

Date ▶

General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

Purpose of Form

A person who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) to report, for example, income paid to you, real estate transactions, mortgage interest you paid, acquisition or abandonment of secured property, cancellation of debt, or contributions you made to an IRA.

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN to the person requesting it (the requester) and, when applicable, to:

1. Certify that the TIN you are giving is correct (or you are waiting for a number to be issued),
2. Certify that you are not subject to backup withholding, or
3. Claim exemption from backup withholding if you are a U.S. exempt payee. If applicable, you are also certifying that as a U.S. person, your allocable share of any partnership income from a U.S. trade or business is not subject to the withholding tax on foreign partners' share of effectively connected income.

Note. If a requester gives you a form other than Form W-9 to request your TIN, you must use the requester's form if it is substantially similar to this Form W-9.

Definition of a U.S. person. For federal tax purposes, you are considered a U.S. person if you are:

- An individual who is a U.S. citizen or U.S. resident alien,
- A partnership, corporation, company, or association created or organized in the United States or under the laws of the United States,
- An estate (other than a foreign estate), or
- A domestic trust (as defined in Regulations section 301.7701-7).

Special rules for partnerships. Partnerships that conduct a trade or business in the United States are generally required to pay a withholding tax on any foreign partners' share of income from such business. Further, in certain cases where a Form W-9 has not been received, a partnership is required to presume that a partner is a foreign person, and pay the withholding tax. Therefore, if you are a U.S. person that is a partner in a partnership conducting a trade or business in the United States, provide Form W-9 to the partnership to establish your U.S. status and avoid withholding on your share of partnership income.

DIRECT DEPOSIT AUTHORIZATION

PLEASE COMPLETE THIS FORM AND RETURN TO: Rosenberg Housing Authority
117 Lane Dr. Ste 18
Rosenberg, TX 77471

PART 1: Transaction Type

<input type="checkbox"/> New setup	<input type="checkbox"/> Change financial institution
<input type="checkbox"/> Cancellation <i>(Leave Part 4 blank)</i>	<input type="checkbox"/> Change account number
	<input type="checkbox"/> Change account type

PART 2: Payee Identification

I would like to receive correspondence via e-mail.

Tax ID <i>(Social Security Number or Employer Identification Number)</i>		Work Phone Number	Home Phone Number	
Name		E-mail Address		
Address	City	State	ZIP Code	

PART 3: Authorization for Setup, Changes, or Cancellation

I hereby request and authorize the Rosenberg Housing Authority to deposit payments by electronic funds transfer into the account specified below and, if necessary, debit entries and adjustments for any amounts deposited electronically in error. I recognize that, if I fail to provide complete and accurate information on this authorization form, the processing of the form may be delayed or that my payments may be erroneously transferred electronically.

This authorization will remain in effect until written notice to terminate is given. The undersigned must allow a reasonable amount of time for initiating or terminating Direct Deposit and is responsible for notification of any change in financial institution information.

Authorized Signature	Printed Name	Date
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PART 4: Financial Institution *(Contact your financial institution for this information, if necessary.)*

Financial Institution Name		City	State	ZIP Code
Routing Transit Number	Customer Account Number		Type of Account	
Representative Name <i>(Please print)</i>		Title	<input type="checkbox"/> Consumer Checking	
Representative Signature			<input type="checkbox"/> Consumer Savings	
			<input type="checkbox"/> Corporate Checking	
			<input type="checkbox"/> Corporate Savings	



DIRECT DEPOSIT AUTHORIZATION

INSTRUCTIONS

PART 1: Transaction Type

Check the appropriate box(es).

NOTE: The payee must review Part 2 and complete Part 3 for all transaction types.

- **NEW SETUP** - Select if payee is not currently on direct deposit.
 - The payee or financial institution representative must complete Part 4.
- **CANCELLATION** - Select if payee wishes to stop direct deposit.
 - Do not complete Part 4.
- **CHANGE FINANCIAL INSTITUTION**
 - The payee or new financial institution representative must complete Part 4.
- **CHANGE ACCOUNT NUMBER**
 - The payee or financial institution representative must complete Part 4.
- **CHANGE ACCOUNT TYPE**
 - The payee or financial institution representative must complete Part 4.

PART 2: Payee Identification

The payee must review this section to confirm that all information is accurate. Any changes should be noted in the space provided.

PART 3: Authorization for Setup, Changes, or Cancellation

The individual authorizing must sign, print their name and date the form.

NOTE: No alterations to the text in this section will be allowed.

PART 4: Financial Institution

This section must be completed by the payee or a financial institution representative.

NOTE: Alterations to routing and/or account number must be initialed by the payee.

