

Request for Tenancy Approval

Housing Choice Voucher Program

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

OMB Approval No. 2577-0169
(exp. 4/30/2014)

Public reporting burden for this collection of information is estimated to average .08 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. This agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless that collection displays a valid OMB control number. Assurances of confidentiality are not provided under this collection. Eligible families submit this information to the Public Housing Authority (PHA) when applying for housing assistance under Section 8 of the U.S. Housing Act of 1937 (42 U.S.C. 1437f). The PHA uses the information to determine if the family is eligible, if the unit is eligible, and if the lease complies with program and statutory requirements. Responses are required to obtain a benefit from the Federal Government. The information requested does not lend itself to confidentiality.

1. Name of Public Housing Agency (PHA) <div style="text-align: center; font-weight: bold; font-size: 1.2em;">GAINESVILLE HOUSING AUTHORITY</div>	2. Address of Unit: (street address, apartment number, city, State & zip code)
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3. Requested Beginning Date of Lease	4. Number of Bedrooms	5. Year Constructed	6. Proposed Rent	7. Security Deposit Amt.	8. Date Unit Available for Inspection
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9. Type of House/Apartment

Single Family Detached
 Semi-Detached / Row House
 Manufactured Home
 Garden / Walkup
 Elevator / High-Rise

10. If this unit is subsidized, indicate type of subsidy

Section 202
 Section 221(d)(3)(BMIR)
 Section 236 (Insured or noninsured)
 Section 515 Rural Development

Home
 Tax Credit

Other (Describe Other Subsidy, Including Any State or Local Subsidy) _____

11. Utilities and Appliances

The owner shall provide or pay for the utilities and appliances indicated below by an "O". The tenant shall provide or pay for the utilities and appliances indicated below by a "T". Unless otherwise specified below, the owner shall pay for all utilities and appliances provided by the owner.

Item	Specify fuel type	Provided by	Paid by
Heating	<input type="checkbox"/> Natural gas <input type="checkbox"/> Bottle gas <input type="checkbox"/> Oil <input type="checkbox"/> Electric <input type="checkbox"/> Coal or Other		
Cooking	<input type="checkbox"/> Natural gas <input type="checkbox"/> Bottle gas <input type="checkbox"/> Oil <input type="checkbox"/> Electric <input type="checkbox"/> Coal or Other		
Water Heating	<input type="checkbox"/> Natural gas <input type="checkbox"/> Bottle gas <input type="checkbox"/> Oil <input type="checkbox"/> Electric <input type="checkbox"/> Coal or Other		
Other Electric	[REDACTED]		
Water			
Sewer			
Trash Collection			
Air Conditioning			
Refrigerator			
Range/Microwave			
Other (specify)			

12. **Owner's Certifications.**

a. The program regulation requires the PHA to certify that the rent charged to the housing choice voucher tenant is not more than the rent charged for other unassisted comparable units. **Owners of projects with more than 4 units must complete the following section for most recently leased comparable unassisted units within the premises.**

	Address and unit number	Date Rented	Rental Amount
1.			
2.			
3.			

b. The owner (including a principal or other interested party) is not the parent, child, grandparent, grandchild, sister or brother of any member of the family, unless the PHA has determined (and has notified the owner and the family of such determination) that approving leasing of the unit, notwithstanding such relationship, would provide reasonable accommodation for a family member who is a person with disabilities.

c. **Check one of the following:**

____ Lead-based paint disclosure requirements do not apply because this property was built on or after January 1, 1978.

____ The unit, common areas servicing the unit, and exterior painted surfaces associated with such unit or common areas have been found to be lead-based paint free by a lead-based paint inspector certified under the Federal certification program or under a federally accredited State certification program.

____ A completed statement is attached containing disclosure of known information on lead-based paint and/or lead-based paint hazards in the unit, common areas or exterior painted surfaces, including a statement that the owner has provided the lead hazard information pamphlet to the family.

13. **The PHA has not screened the family's behavior or suitability for tenancy. Such screening is the owner's own responsibility.**

14. The owner's lease must include word-for-word all provisions of the HUD tenancy addendum.

15. The PHA will arrange for inspection of the unit and will notify the owner and family as to whether or not the unit will be approved.

Print or Type Name of Owner/Owner Representative		Print or Type Name of Household Head	
Signature		Signature (Household Head)	
Business Address		Present Address of Family (street address, apartment no., city, State, & zip code)	
Telephone Number	Date (mm/dd/yyyy)	Telephone Number	Date (mm/dd/yyyy)

Gainesville Housing Authority Rent Reasonableness Form
(Complete this form for the Section 8 renter)

Tenant's Name _____ Voucher # _____ Size _____

Unit Address & Zip _____ Complex _____

Owner/Management Company Name _____

Phone _____ E-mail _____

Type of unit (check one):

- House Apartment complex mobile home-single wide
 2-6 attached units Apartment complex with elevator access mobile home-double wide

Date Built (MM/YY) _____ Date Renovated _____ Approx. Sq. Feet _____

Bedrooms _____ # Baths _____ Rent Requested \$ _____

Check all that is included in the unit:

- Refrigerator _____
- Oven/stove _____
- Microwave _____
- Dishwasher _____
- Disposal _____
- Washer _____
- Dryer _____
- Central air _____
- Window a/c _____
- Central heat _____
- Ceiling fans _____
- Fireplace _____
- Window coverings on all the windows _____
- Separate pantry _____
- Den/family room (extra room) _____
- Screen doors _____
- Storm doors _____
- Window screens _____
- Double pane windows _____
- Private patio/deck/porch/balcony _____
- 1 car Garage _____
- 2 car Garage _____
- Car Port _____
- Assigned parking for multifamily unit _____

Utilities included in rent:

- Electricity/natural gas _____
- Water/sewer _____
- Trash pickup _____

Check all that are applicable to the unit:

- Water dryer hookup or laundry facility (if no washer/dryer in unit) _____
- Cable hook up _____
- New carpet within the last year _____
- Security system/patrol _____
- Playground _____
- Pool _____
- Clubhouse/rec center _____
- External storage facility _____
- Fenced yard _____
- Maintenance provided by owner**
- On-going exterior _____
- On-going interior _____
- Yard/grounds _____
- Regular pest control service _____
- Handicap features**
- Entry ramp _____
- Handicap accessible doorways _____
- Rails/grab bars _____
- Handicap accessible appliances _____
- Type of utility used for:**
- Heating: Electric _____
- Natural gas _____
- Other _____
- Hot water:** Electric _____
- Natural gas _____
- Other _____
- Cooking:** Electric _____
- Natural gas _____
- Other _____

RTS bus stop within 2 blocks _____