



**HARRISONBURG
REDEVELOPMENT AND
HOUSING AUTHORITY**
P.O. BOX 1071
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**LIVE-IN AIDE CERTIFICATION
HOUSING CHOICE VOUCHER PROGRAM**

Household Member (participant): _____

Live-In Aide: _____

Qualifications

A live-in aide resides with one or more elderly, near-elderly, or disabled persons, and must meet all of the following criteria:

- Is determined to be essential to the care and well-being of the participant,
- Is not obligated for the support of the participant, and
- Would not be living in the unit except to provide the necessary supportive services.

Rules & Requirements

The live-in aide:

- Is qualified to provide the needed care
- Must meet screening standards and be approved by HRHA
- Has no other reason to reside in the unit than to provide care to the participant
- Was not part of the household before being added as an aide or receiving program assistance
- Will maintain separate finances from the participant - no shared bills or expenses; cannot contribute to the costs of rent or utilities (documentation must be provided, if requested)
- Cannot add his/her family members to reside in the unit unless approved in writing by HRHA
- Has no rights to the voucher and is not party to the lease; must abide by the terms of the lease and the HCV program rules
- Qualify for occupancy only as long as the participant requires the specified care
- Cannot receive assistance or stay in the unit if role as live-in aide terminates (including if the participant moves out or passes away)
- May be terminated if found to be in violation of any of the above-stated rules & requirements.

Required Documents

For a live-in aide request to be processed, the following must be submitted along with this certification:

- Social security card
- Birth certificate
- Photo ID
- Release form

You may also be asked for proof of separate finances and/or documentation of your standing with your prior landlord

I INTEND TO ACT AS A LIVE-IN AIDE FOR THE HOUSEHOLD MEMBER LISTED ABOVE. I CERTIFY THAT I MEET ALL THE QUALIFICATIONS OF A LIVE-IN AIDE, AND I UNDERSTAND AND WILL ABIDE BY THE RULES AND REQUIREMENTS IN MY ROLE AS A LIVE-IN AIDE.

Signature of Live-In Aide

Date

WARNING: Section 1001 of Title 18 of the U.S. Code makes it a criminal offense to make willful false statements or misrepresentations to any Department or Agency of the United States as to any matter within its jurisdiction.

EQUAL HOUSING OPPORTUNITY PROVIDER