

To maintain eligibility for housing assistance, your family must abide by the obligations listed below. Violation of any family obligation may result in your termination from the program and loss of your voucher. **The family must:**

COOPERATE

Allow HRHA to determine eligibility, level of benefits, and true circumstances as part of regularly scheduled and interim reexaminations, including attending scheduled appointments, supplying requested information - including verification of Social Security numbers and evidence of citizenship or eligible immigration status - and completing and signing forms and releases.

REPORT INCOME & HOUSEHOLD CHANGES

Report all income from all sources. Report any income changes in writing (change form) within 10 business days. Report household changes due to the birth, adoption, or court-awarded custody of a child, and report when a person moves out of the unit, in writing (change form) within 10 business days. Request HRHA written approval before adding any other person to the household.

COMPLY WITH LEASE / WRITTEN NOTICES

Provide HRHA and the owner with written notice (30 days, or more if required by the lease) prior to moving out of the unit or terminating the lease. Promptly provide HRHA a copy of any owner eviction or termination notice.

RESIDE IN UNIT

The unit must be the family's only residence, and must be used, by the family, for residential purposes.

REPORT ABSENCES

Supply any information requested by HRHA to verify the family is living in the unit, or to document an authorized absence. Promptly notify HRHA of absences. Submit a written request prior to any absence exceeding 30 days. Absences over 30 days that are not approved in writing by HRHA, and any absence over 180 days, will result in termination of assistance.

INSPECTIONS & UTILITIES

Allow HRHA to inspect the unit. Failure to reschedule a missed inspection, or missing two inspections, is grounds for termination of assistance. Pay utility bills and provide and maintain any tenant-provided appliances per the lease.

RESPECT PROPERTY

Maintain the rental unit and pay the owner for tenant-related damages, both during and after the assisted tenancy. Assisted units must be left in good condition, without any damages, as indicated on the lease. Failure to abide will result in termination of assistance and being ineligible to reapply for two (2) years from the date of termination.

REPORT PRIOR HOUSING ASSISTANCE

Disclose receipt of any previous Federal housing assistance and whether or not any money is owed.

The following actions are prohibited and are grounds for termination. **The family must not:**

COMMIT SERIOUS / REPEATED LEASE VIOLATIONS

Eviction for any serious or repeated violations of the lease will result in termination of assistance.

UNAUTHORIZED PERSONS / VISITOR POLICY

Overnight guests cannot exceed 14 calendar days in the lease year. Do not allow unauthorized persons to stay in the unit.

DAMAGE UNIT

Damaging the unit or premises beyond normal wear and tear (see lease) by the family or guests may result in termination.

COMMIT FRAUD

Fraud, bribery, or any other corrupt or criminal act in connection with any federal housing program is prohibited.

BREACH PAYMENT AGREEMENTS

Breaching an agreement with HRHA to pay amounts owed to HRHA, or to reimburse HRHA for amounts paid to an owner under a HAP contract for rent, damages, or other amounts owed under the lease, is prohibited. Owing rent or other amounts to HRHA or another PHA in connection with a housing assistance program may lead to termination of assistance.

SUBLET, TRANSFER, HAVE INTEREST IN UNIT

The family must not sublease, let, or transfer the unit or assign the lease. Family members must not own or have any interest in the unit.

THREATEN HRHA PERSONNEL

Family members must not threaten or engage in abusive or violent behavior toward HRHA personnel.

DUPLICATE ASSISTANCE

The family may not receive assistance under this program while receiving another housing subsidy, for the same or another unit, under any other housing assistance program.

DRUG-RELATED & VIOLENT CRIMINAL ACTIVITY / ALCOHOL & DRUG ABUSE

The family must not commit drug-related or violent criminal activity, or illegally use a controlled substance, abuse alcohol, or engage in any other criminal activity which may interfere with the health, safety, or right to peaceful enjoyment of the premises by other residents.

RENT FROM FAMILY

The family cannot receive housing assistance in a unit is owned by a parent, child, grandparent, grandchild, sister or brother of any member of the family (except as a documented, approved reasonable accommodation request).

CERTIFICATIONS

PRIOR ASSISTANCE

I certify that for any previous assistance, I did not commit any fraud, knowingly misrepresent any information or vacate the unit in violation of the lease.

TRUE AND COMPLETE - CRIMINAL AND ADMINISTRATIVE ACTIONS FOR FALSE INFORMATION

I certify that all information on the corresponding certification/application regarding household composition, income, assets, allowances, and deductions, is true, correct, accurate, and complete to the best of my knowledge. I understand that knowingly supplying false, incomplete or inaccurate information is punishable under Federal or State criminal law, and is also grounds for termination of housing assistance and/or tenancy.

By signing below, I certify that I have read and understand these obligations and agree to abide by them. I understand that if I, or any member of my family, fail to comply with one or more of these obligations, I may be terminated from the program and lose my housing assistance subsidy.

SIGNATURE AND DATE OF HOUSEHOLD ADULTS

_____	_____	_____
Head of Household Name	Signature	Date
_____	_____	_____
Other Adult Name	Signature	Date
_____	_____	_____
Other Adult Name	Signature	Date
_____	_____	_____
Other Adult Name	Signature	Date