DHA HOUSING CHOICE VOUCHER

CHANGE OF OWNERSHIP / MANAGEMENT PACKET

Mailing Address: P.O. Box 40305, Mile High Station, Denver, CO 80204-0305

Phone: (720) 932-3255 **Fax**: (720) 932-3171 • **Email**: VendorChanges@denverhousing.org

Date: _____

NEW (CURRENT) OWNER / MANAGEMENT:

Owner: _____

Management: _____

Address: _____

_____

PHONE: _____

Email Address:_____

OLD (PREVIOUS) OWNER / MANAGEMENT:

Owner: _____

Management: _____

Address: _____

_____

PHONE: _____

Participants/Unit Address(s): _____

_____

Payments go to: Owner ☐ Management ☐ **Paperwork goes to:** Owner ☐ Management ☐

1099 goes to: Owner ☐ Management ☐ Other_____

All documents must be received prior to execution of change.

REQUIRED DOCUMENTS FOR OWNERSHIP CHANGE

- ☐ Proof of Ownership (Recorded/Warranty/ Other Deed)
- ☐ Assignment of HAP Contract (Complete and sign)
- ☐ Housing Provider Participant Relationship Certification (Complete and sign)
- ☐ Housing Provider Acknowledgement form (Complete and sign one for each building)
- ☐ W-9 (Complete and sign based on IRS filing information – link provided on last page)
- ☐ Copy of Taxpayer Identification Number (TIN) Letter or Social Security card
- ☐ Proof of Homeownership Insurance
- ☐ Lead Based Paint form (Copy of form signed at sale)

REQUIRED DOCUMENTS TO ADD/CHANGE MANAGEMENT CHANGE

- ☐ Documentation of Management responsibilities (Copy of Management Agreement)
- ☐ Housing Provider Participant Relationship Certification (Complete and sign)
- ☐ Housing Provider Acknowledgement form (Complete and sign one for each building)
- ☐ W-9 (Complete and sign based on IRS filing information)
- ☐ Copy of Taxpayer Identification Number (TIN) Letter or Social Security card
- ☐ TO **REMOVE** MANAGEMENT COMPANY – Please provide a letter from the owner.

OFFICE USE ONLY		
Documents Received		Processed By:
Processed Effective Date		Notes:

DHA HOUSING CHOICE VOUCHER

ASSIGNMENT of HOUSING ASSISTANCE PAYMENT (HAP) CONTRACT

PREVIOUS OWNER:

I, _____, hereby assign the HAP contract held with the Denver Housing Authority on behalf the assisted Section 8/Housing Choice Voucher Participant, _____, the assisted unit is located at _____, Denver, CO_____, to the new owner, _____.

CURRENT OWNER:

I, _____, have purchased the assisted property listed above. I the assignee, agree to comply with the terms of the HAP Contract.

I am aware that the Denver Housing Authority may deny approval to assign the HAP Contract to a new owner (in whole or part) if an owner is debarred, suspended, or subject to a limited denial of participation. If HUD informs the DHA that the federal government has instituted an administrative or judicial action against the owner for a violation of the Fair Housing Act or other federal equal opportunity requirements and such action is pending; if Conflicts of Interest are present.

Please see additional regulations related to the Assignment of HAP contract in the Code of Federal Regulations Part 24 Section 982.

I certify that none of the above prohibitions apply to me and I am qualified to participate in the Housing Choice Voucher program.

Under penalty of perjury, all information in the form is true to the best of my knowledge. Misrepresentation is a criminal offense (28 U.S.C. Section 1001)…. (a) Except as otherwise provided in this section, whoever, in any matter within the jurisdiction of the executive, legislative, or judicial branch of the Government of the United States, knowingly and willfully - (1) falsifies, conceals, or covers up by any trick, scheme, or device a material fact; (2) makes any materially false, fictitious, or fraudulent statement or representation; or (3) makes or uses any false writing or document knowing the same to contain any materially false, fictitious, or fraudulent statement or entry; shall be fined under this title, imprisoned not more than 5 years or, if the offense involves international or domestic terrorism (as defined in section 2331), imprisoned not more than 8 years, or both.

_____ _____

Signature of Current Owner **Date**

HOUSING CHOICE VOUCHER (HCV)
Housing Provider Participant Relationship Certification

RE: HCV Subsidized Unit(s): _____

Under penalties of perjury, I certify that:

The owner of the unit is not a relative of the any of the families to be assisted, unless approving such a tenancy would provide reasonable accommodation for a disabled family member (must be approved by the DHA). Prohibited owner-family relationships include parent, child, grandparent, grandchild, sister, or brother of any member of the assisted family.

None of the following parties have a current interest or will have an interest for one year thereafter: Present or former member or officer of the DHA, except a participant commissioner; Employee of the DHA or any contractor, subcontractor, or agent of the DHA who formulates policy or influences program decisions; Public official, member of a governing body, or state or local legislator who exercises functions or responsibilities related to the programs; or Member of the U.S. Congress.

Under penalty of perjury, the above is true to the best of my knowledge. WARNING! Willful misrepresentation is a criminal offense (28 U.S.C. Section 1001) and is grounds for termination from the Section 8 program. This information is collected to determine eligibility, and will be used to manage the programs covered by this form, protect the government's interest and verify accuracy of information. It will be released to the appropriate Federal, State, and Local agencies when relevant and to civil, criminal, or regulatory investigators or prosecutors. HUD is authorized to ask for this information by the U.S. Housing Act of 1937, as amended, 42 U.S.C. 1437 et seq.

_____
Housing Provider Printed Name

_____ _____
Housing Provider Signature Date

HOUSING CHOICE VOUCHER (HCV)
HOUSING PROVIDER ACKNOWLEDGMENT

Please list EACH Section 8/HCV participant in building

Participant Name(s):
Address of Subsidized Unit:

Ownership of Assisted Unit:
I certify that I am the legal owner or the legally designated agent for the above referenced unit.

Eligibility to Participate in a Federally-Funded Program

I certify that I am eligible to participant in and receive monies from the Housing Choice Voucher program. I have not been notified of disbarment for any violations under the Code of Federal Regulations at **24 CFR §982.306 - PHA disapproval of owner**.

Approved Participant of Assisted Unit and Reporting Vacancies:
I understand that the family members listed on the lease agreement as approved by the Denver Housing Authority (DHA) are the only individual(s) permitted to reside in the unit. I understand that I am not permitted to live in the unit while receiving Housing Assistance Payments (HAP). I also understand that should the assisted unit become vacant, I am responsible to notify the DHA in writing immediately.

Housing Quality Standards (HQS):
I understand my obligations in compliance with the Housing Assistance Payment Contract to perform necessary maintenance so the unit continues to comply with HQS.

Security Deposit and Participant Rent Payments:
I understand that I can charge a security deposit. It must be reasonable and comparable to similar unsubsidized units. I also understand that the Participant's portion of rent charged for the Section 8/Housing Choice Voucher programs are determined by the DHA and that it is illegal to charge any additional amounts for rent which have not been specifically approved by the DHA.

Administrative and Criminal Action for Intentional Violations:
I understand that failure to comply with the terms and responsibilities of the HAP Contract are grounds for termination of participant in the program. I understand that knowingly falsifying material facts is a violation of State and Federal law.

_____ _____

Signature of Housing Provider/Agent Date

DHA HOUSING CHOICE VOUCHER

IRS form W-9

To obtain a W-9 form, please follow this link to the Internal Revenue Service website:
http://www.irs.gov/pub/irs-pdf/fw9.pdf

Lead-Based Paint Disclosure form

If you do not have a copy of the Lead-Based Paint Disclosure form from the sale transaction, you may follow this link to the HUD website:

https://www.hud.gov/sites/documents/DOC_12345.PDF

This form must be completed, signed and dated by all parties.