

*Welcome to the
Housing Choice Voucher
Program Briefing*



**HARFORD COUNTY HOUSING &
COMMUNITY DEVELOPMENT**



*Today you will receive
information about the
Housing Choice Voucher
program required by HUD*

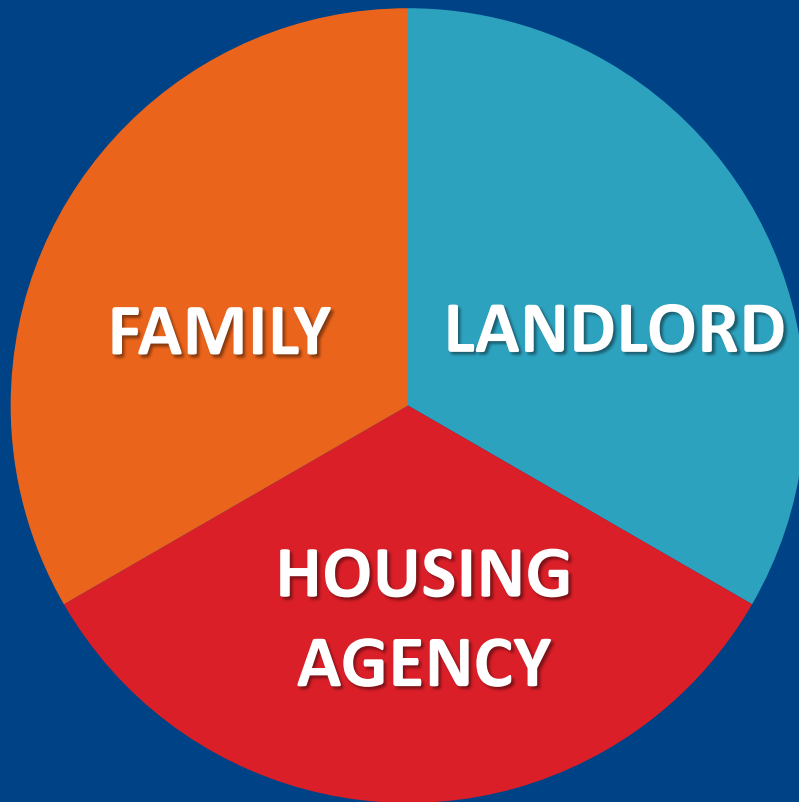
TENANT BRIEFING

The purpose of this briefing is to:

- Give you all of the information you will need to be successful in your search for a housing unit.
- Give you all the information you will need to maintain good standing while you are in the program.

All applicants and household members 18 years of age & older must attend a Briefing

A THREE WAY PARTNERSHIP



Equal
Partnership
Equal
Responsibilities

HUD TERMS

HAP – Housing Assistance Payment.

Payment Standard – an amount used to calculate the HAP based on Fair Market Rent, a rent limit determined annually by HUD.

Gross Rent – Rent plus Utility Allowance.

Adjusted Monthly Income – Adjusted Annual Income divided by 12 months.

Total Tenant Payment (TTP) – 30% of the family's Adjusted Monthly Income (plus any amount over payment standard, if applicable).

Utility Allowance – If the utilities are not included in the rent, the Housing Agency estimates the average monthly utility bills for an energy-conscious household. This amount will vary by type and size of unit and the type of utilities.

RESPONSIBILITIES OF THE FAMILY

- * Give the Housing Agency complete and accurate information.
- * Make your best effort to find a place to live that qualifies for the program and is suitable for your family.
- * Attend all appointments scheduled by the Housing Agency.

RESPONSIBILITIES OF THE FAMILY

- * Take responsibility for the care of your unit.
Includes but not limited to clean food preparation areas and no accumulated trash and rubbish in or around your rental unit.
- * Comply with the terms of your lease with the property owner.
- * Comply with regulations of the Housing Choice Voucher Program.

OBLIGATIONS OF THE FAMILY

A. When the family's unit is approved and the HAP contract is executed, the family must follow the rules listed below in order to continue participating in the Housing Choice Voucher Program.

B. The family must:

1. Supply any information that the PHA or HUD determines to be necessary, including evidence of citizenship or eligible immigration status and information for use in a regularly scheduled reexamination or interim reexamination of family income and composition.

OBLIGATIONS OF THE FAMILY

2. Disclose and verify social security numbers and sign and submit consent forms for obtaining information.
3. Supply any information requested by the PHA to verify that the family is living in the unit or information related to the family absence from the unit.
4. Promptly notify the PHA in writing when the family is away from the unit for an extended period of time in accordance with PHA policies.
5. Allow the PHA to inspect the unit at reasonable times and after reasonable notice.

OBLIGATIONS OF THE FAMILY

6. Notify the PHA and the owner in writing before moving out the unit or terminating the lease.
7. Use the assisted unit for residence by the family. The unit must be the family's only residence.
8. Promptly notify the PHA in writing about the birth, adoption, or court-awarded custody of a child.
9. Request PHA written approval to add any other family member as an occupant of the unit.

OBLIGATIONS OF THE FAMILY

10. Promptly notify the PHA in writing if any member no longer lives in the unit. Give the PHA a copy of any owner eviction notice.

11. Pay utility bills and provide and maintain any appliances that the owner is not required to provide under the lease.

OBLIGATIONS OF THE FAMILY

C. Any information the family supplies must be true and complete.

OBLIGATIONS OF THE FAMILY

D. The family (including each family member) must not:

1. Own or have any interest in the unit (other than in a cooperative, or the owner of a manufactured home leasing a manufactured home space).
2. Commit any serious or repeated violation of the lease.
3. Commit fraud, bribery or any other corrupt or criminal act in connection with the program.

OBLIGATIONS OF THE FAMILY

4. Engage in drug-related criminal activity or violent criminal activity or other criminal activity that threatens the health, safety or right to peaceful enjoyment of other residents and persons residing in the immediate vicinity of the premises.
5. Sublease or let the unit or assign the lease or transfer the unit.
6. Receive housing choice voucher program housing assistance while receiving another housing subsidy, for the same unit or a different unit under any other Federal, State or local housing assistance program.

OBLIGATIONS OF THE FAMILY

7. Damage the unit or premises (other than damage from ordinary wear and tear) or permit any guests to damage the unit or premises.
8. Receive housing choice voucher program housing assistance while residing in a unit owned by a 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 rental of the unit, notwithstanding such relationship, would provide reasonable accommodation for a family member who is a person with disabilities.

OBLIGATIONS OF THE FAMILY

9. Engage in abuse of alcohol in a way that threatens the health, safety or right to peaceful enjoyment of the other residents and persons residing in the immediate vicinity of the premises.

VIOLATION

COMMON VIOLATIONS

- Non-payment or late rent payment
- Not paying utilities
- Unauthorized persons
- Under reporting income
- Tenant damages
- Drug activity
- Threatening behavior toward Housing Agency staff or neighbors
- Sub-leasing
- Side payments
- Missed Appointments
- Not providing required documents

Dear Mr. Name:

At your request, an Informal Hearing has been scheduled for:

January 1, 2000, at 8:20 AM

At the time of the Hearing, the family will be given the opportunity to present evidence and testimony. Pursuant to Federal Regulations 982.555, the family may be represented by an attorney or other representative of their choosing, at the family's expense.

Prior to the Hearing and by appointment only, the family may examine and copy, at their expense, any Housing Agency documents directly relevant to the Hearing. 24 CFR 982.555(e)(2) requires that at that time, the family also provide any documents relevant to the Hearing on their behalf, which the Harford County Housing Agency will copy at its expense. Any documents not made available for examination by either the Housing Agency or the family may not be relied upon at the Hearing. This process is known as Discovery, compulsory disclosure, at a party's request, of information which relates to the litigation.

In accordance with Federal Regulations, the decision of the Hearing Officer will be based solely on the evidence provided at the Hearing.

VOUCHER SIZE

The voucher size indicates the payment standard for which your family is eligible.

PAYMENT STANDARDS
MAXIMUM SUBSIDY STANDARDS
BY HOUSEHOLD SIZE

Voucher Size = Occupancy Standard = 2 per room

1 - 2 PEOPLE = 1 BEDROOM \$ 1,125

3 - 4 PEOPLE = 2 BEDROOM \$ 1,411

5 - 6 PEOPLE = 3 BEDROOM \$ 1,815

7 - 8 PEOPLE = 4 BEDROOM \$ 2,108

Voucher
Housing Choice Voucher Program

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

OMB No. 2577-0169
(exp. 9/30/2002)

Public Reporting Burden for this collection of information is estimated to average 5 minutes 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 collection of information is authorized under Section 8 of the U.S. Housing Act of 1937 (42 U.S.C. 1437f). The information is used to authorize a family to look for an eligible unit and specifies the size of the unit. The information also sets forth the family's obligations under the Housing Choice Voucher Program.

Please read **entire** document before completing form
Fill in all blanks below. Type or print clearly.

		Voucher Number
1. Insert unit size in number of bedrooms. (This is the number of bedrooms for which the Family qualifies, and is used in determining the amount of assistance to be paid on behalf of the Family to the owner.)	1. Unit Size	
2. Date Voucher Issued (mm/dd/yyyy) Insert actual date the Voucher is issued to the Family.	2. Issue Date (mm/dd/yyyy)	
3. Date Voucher Expires (mm/dd/yyyy) Insert date sixty days after date Voucher is issued. (See Section 6 of this form.)	3. Expiration Date (mm/dd/yyyy)	
4. Date Extension Expires (if applicable)(mm/dd/yyyy) (See Section 6. of this form)	4. Date Extension Expires (mm/dd/yyyy)	
5. Name of Family	6. Signature of Family Representative	Date Signed (mm/dd/yyyy)
7. Name of Public Housing Agency (PHA) Harford County Housing Agency	9. Signature of PHA Official	Date Signed (mm/dd/yyyy)

1. Housing Choice Voucher Program

- A. The public housing agency (PHA) has determined that the above named family (item 5) is eligible to participate in the housing choice voucher program. Under this program, the family chooses a decent, safe and sanitary unit to live in. If the owner agrees to lease the unit to the family under the housing choice voucher program, and if the PHA approves the unit, the PHA will enter into a housing assistance payments (HAP) contract with the owner to make monthly payments to the owner to help the family pay the rent.
- B. The PHA determines the amount of the monthly housing assistance payment to be paid to the owner. Generally, the monthly housing assistance payment by the PHA is the difference between the applicable payment standard and 30 percent of monthly adjusted family income. In determining the maximum initial housing assistance payment for the family, the PHA will use the payment standard in effect on the date the tenancy is approved by the PHA. The family may choose to rent a unit for more than the payment standard, but this choice does not change the amount of the PHA's assistance payment. The actual amount of the PHA's assistance payment will be determined using the gross rent for the unit selected by the family.

2. Voucher

- A. When issuing this voucher the PHA expects that if the family finds an approvable unit, the PHA will have the money available to enter into a HAP contract with the owner. However, the PHA is under no obligation to the family, to any owner, or to any other person, to approve a tenancy. The PHA does not have any liability to any party by the issuance of this voucher.

- B. The voucher does not give the family any right to participate in the PHA's housing choice voucher program. The family becomes a participant in the PHA's housing choice voucher program when the HAP contract between the PHA and the owner takes effect.
- C. During the initial or any extended term of this voucher, the PHA may require the family to report progress in leasing a unit at such intervals and times as determined by the PHA.

3. PHA Approval or Disapproval of Unit or Lease

- A. When the family finds a suitable unit where the owner is willing to participate in the program, the family must give the PHA the request for tenancy approval (on the form supplied by the PHA), signed by the owner and the family, and a copy of the lease, including the HUD-prescribed tenancy addendum. **Note: Both documents must be given to the PHA no later than the expiration date stated in item 3 or 4 on top of page one of this voucher.**
- B. The family must submit these documents in the manner that is required by the PHA. PHA policy may prohibit the family from submitting more than one request for tenancy approval at a time.
- C. The lease must include, word-for-word, all provisions of the tenancy addendum required by HUD and supplied by the PHA. This is done by adding the HUD tenancy addendum to the lease used by the owner. If there is a difference between any provisions of the HUD tenancy addendum and any provisions of the owner's lease, the provisions of the HUD tenancy addendum shall control.

Voucher

Housing Choice Voucher Program

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

OMB No. 2577-0169
(exp. 9/30/2012)

Public Reporting Burden for this collection of information is estimated to average 0.05 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. This collection of information is authorized under Section 8 of the U.S. Housing Act of 1937 (42 U.S.C. 1437f). The information is used to authorize a family to look for an eligible unit and specifies the size of the unit. The information also sets forth the family's obligations under the Housing Choice Voucher Program.

Privacy Act Statement. The Department of Housing and Urban Development (HUD) is authorized to collect the information required on this form by Section 8 of the U.S. Housing Act of 1937 (42 U.S.C. 1437f). Collection of family members' names is mandatory. The information is used to authorize a family to look for an eligible unit and specifies the size of the unit. The information also sets forth the family's obligations under the Housing Choice Voucher Program. HUD may disclose this information to Federal, State and local agencies when relevant to civil, criminal, or regulatory investigations and prosecutions. It will not be otherwise disclosed or released outside of HUD, except as permitted or required by law. Failure to provide any of the information may result in delay or rejection of family voucher issuance.

Please read **entire** document before completing form
Fill in all blanks below. Type or print clearly.

	Voucher Number
1. Insert unit size in number of bedrooms. (This is the number of bedrooms for which the Family qualifies, and is used in determining the amount of assistance to be paid on behalf of the Family to the owner.)	1. Unit Size
2. Date Voucher Issued (mm/dd/yyyy) Insert actual date the Voucher is issued to the Family.	2. Issue Date (mm/dd/yyyy)
3. Date Voucher Expires (mm/dd/yyyy) Insert date sixty days after date Voucher is issued. (See Section 6 of this form.)	3. Expiration Date (mm/dd/yyyy)
4. Date Extension Expires (if applicable)(mm/dd/yyyy) (See Section 6. of this form)	4. Date Extension Expires (mm/dd/yyyy)

Vouchers are issued of 60 days.
If you need an extension, you must request it
in writing before the 60 day expiration date.

5. Name of Family Representative	6. Signature of Family Representative	Date Signed
7. Name of Public Housing Agency (PHA)		
8. Name and Title of PHA Official	9. Signature of PHA Official	Date Signed



- D. After receiving the request for tenancy approval and a copy of the lease, the PHA will inspect the unit. The PHA may not give approval for the family to lease the unit or execute the HAP contract until the PHA has determined that all the following program requirements are met: the unit is eligible; the unit has been inspected by the PHA and passes the housing quality standards (HQS); the rent is reasonable; and the landlord and tenant have executed the lease including the HUD-prescribed tenancy addendum.
- E. If the PHA approves the unit, the PHA will notify the family and the owner, and will furnish two copies of the HAP contract to the owner.
 - 1. The owner and the family must execute the lease.
 - 2. The owner must sign both copies of the HAP contract and must furnish to the PHA a copy of the executed lease and both copies of the executed HAP contract.
 - 3. The PHA will execute the HAP contract and return an executed copy to the owner.
- F. If the PHA determines that the unit or lease cannot be approved for any reason, the PHA will notify the owner and the family that:
 - 1. The proposed unit or lease is disapproved for specified reasons, and
 - 2. If the conditions requiring disapproval are remedied to the satisfaction of the PHA on or before the date specified by the PHA, the unit or lease will be approved.

4. Obligations of the Family

- A. When the family's unit is approved and the HAP contract is executed, the family must follow the rules listed below in order to continue participating in the housing choice voucher program.
- B. The family must:
 - 1. Supply any information that the PHA or HUD determines to be necessary including evidence of citizenship or eligible immigration status, and information for use in a regularly scheduled reexamination or interim reexamination of family income and composition.
 - 2. Disclose and verify social security numbers and sign and submit consent forms for obtaining information.
 - 3. Supply any information requested by the PHA to verify that the family is living in the unit or information related to family absence from the unit.
 - 4. Promptly notify the PHA in writing when the family is away from the unit for an extended period of time in accordance with PHA policies.
 - 5. Allow the PHA to inspect the unit at reasonable times and after reasonable notice.
 - 6. Notify the PHA and the owner in writing before moving out of the unit or terminating the lease.
 - 7. Use the assisted unit for residence by the family. The unit must be the family's only residence.
 - 8. Promptly notify the PHA in writing of the birth, adoption, or court-awarded custody of a child.
 - 9. Request PHA written approval to add any other family member as an occupant of the unit.

- 10. Promptly notify the PHA in writing if any family member no longer lives in the unit.
- 11. Give the PHA a copy of any owner eviction notice.
- 12. Pay utility bills and provide and maintain any appliances that the owner is not required to provide under the lease.
- C. Any information the family supplies must be true and complete.
- D. The family (including each family member) must not:
 - 1. Own or have any interest in the unit (other than in a cooperative, or the owner of a manufactured home leasing a manufactured home space).
 - 2. Commit any serious or repeated violation of the lease.
 - 3. Commit fraud, bribery or any other corrupt or criminal act in connection with the program.
 - 4. Engage in drug-related criminal activity or violent criminal activity or other criminal activity that threatens the health, safety or right to peaceful enjoyment of other residents and persons residing in the immediate vicinity of the premises.
 - 5. Sublease or let the unit or assign the lease or transfer the unit.
 - 6. Receive housing choice voucher program housing assistance while receiving another housing subsidy, for the same unit or a different unit under any other Federal, State or local housing assistance program.
 - 7. Damage the unit or premises (other than damage from ordinary wear and tear) or permit any guest to damage the unit or premises.
 - 8. Receive housing choice voucher program housing assistance while residing in a unit owned by a 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 rental of the unit, notwithstanding such relationship, would provide reasonable accommodation for a family member who is a person with disabilities.
 - 9. Engage in abuse of alcohol in a way that threatens the health, safety or right to peaceful enjoyment of the other residents and persons residing in the immediate vicinity of the premises.

5. Illegal Discrimination

If the family has reason to believe that, in its search for suitable housing, it has been discriminated against on the basis of age, race, color, religion, sex, disability, national origin, or familial status, the family may file a housing discrimination complaint with any HUD Field Office in person, by mail, or by telephone. The PHA will give the family information on how to fill out and file a complaint.

6. Expiration and Extension of Voucher

The voucher will expire on the date stated in item 3 on the top of page one of this voucher unless the family requests an extension in writing and the PHA grants a written extension of the voucher in which case the voucher will expire on the date stated in item 4. At its discretion, the PHA may grant a family's request for one or more extensions of the initial term.



OWNER/LANDLORD LEGISLATION

AS OF JANUARY 1, 2021

- ❖ “Source of Income” is now a prohibited form of housing discrimination in Maryland
- ❖ This includes Section 8 vouchers
- ❖ Does not apply to landlords with 3 or less rental units, unless they use a management company

OWNER/LANDLORD RESPONSIBILITIES

- * **THE OWNER APPROVES THE FAMILY**
- * You may be asked to complete an application.
- * There may be an application fee that you will be expected to pay.
- * The property owner may check on your rental history and credit.

OWNER/LANDLORD RESPONSIBILITIES

- * Screen families to determine if they would be good renters.
- * Comply with fair housing laws and not discriminate against any family.
- * Maintain the housing unit by making necessary repairs in a timely fashion.
- * Comply with the terms of the Housing Assistance Payments Contract with the Housing Agency.
- * Collect the rent due from the family and otherwise enforce the provisions of the lease.

OWNER/LANDLORD RESPONSIBILITIES

- * The owner must maintain the unit in accordance with housing quality standards (HQS).
- * The HA must not make any housing assistance payment for a Dwelling that fails to meet the HQS, unless corrected within a period provided by the PHA.
- * The owner is not responsible for a breach of HQS that is not caused by the owner.
- * The HA may terminate your assistance because of the HQS breach caused by you, your children, your guests, unauthorized visitors, or unknown parties.



CALCULATION OF ELIGIBILITY AND ASSISTANCE

REPORT ALL
HOUSEHOLD INCOME

EXAMPLES OF INCOME

- Wages
- Unemployment
- TCA
- TDAP
- SSI and all Social Security Benefits
- Child Support (including arrearages)
- Alimony
- Pensions
- Annuities
- Income from Assets
- Contributions
- Gifts
- Other Support

REPORT CHANGES TO INCOME



REPORT ALL INCOME
CHANGES WITHIN **TEN DAYS,**
IN WRITING.



CALCULATION OF ELIGIBILITY AND ASSISTANCE

REPORT ALL
HOUSEHOLD ASSETS

EXAMPLES OF ASSETS

- Equity in real property
- Amounts in checking accounts
- Amounts in savings accounts
- Stocks
- Bonds
- Money Market Funds
- IRA, Keogh retirement savings

EXAMPLES OF ASSETS

- Cash value of life insurance policies
- Certificate of deposit (CD)
- Lump sum inheritances, lottery winnings, insurance settlements.
- Assets disposed of for less than fair market value during the two years preceding certification or recertification

ADJUSTMENTS TO INCOME

Dependents:

Minors under the age of 18.

Full-time students 18 and older.

Household members with a disability.

Elderly Family:

Head of household or spouse 62 or older.

Person with a disability.

ADJUSTMENTS TO INCOME

Allowable Medical Expenses:

For families with a disabled or elderly (62 yrs. or older) head of household or disabled spouse.

Allowable Disabled Assistance Expenses:

To permit a family member to work.

Allowable Childcare Expenses:

For children 12 and under.

To enable a family member to work or attend school.

HOUSEHOLD MEMBERS

Head of Household must advise the Housing Agency of all persons residing in the unit.



Increases in family composition, other than childbirth, must be approved by the Agency in advance of such changes taking place.



Any absence of a household member from the unit for more than 2 weeks must be reported to the Agency.

UTILITY ALLOWANCES

**U.S. DEPARTMENT OF HOUSING AND URBAN
DEVELOPMENT HOUSING CHOICE VOUCHER
ALLOWANCES FOR TENANT-FURNISHED UTILITIES
AND OTHER SERVICES**

Revised HUD Form 52667
Effective 02/01/2011



LOCALITY: HARFORD COUNTY

UNIT TYPE A: TOWNHOUSES, ROW,
GARDEN, HIGH RISE

UTILITY OR SERVICE

MONTHLY DOLLAR ALLOWANCES

0-BR 1-BR 2-BR 3-BR 4-BR 5-BR




Example

A. Natural Gas

30 40 54 67 81 94

B. Bottle Gas

96 128 173 216 261 304

C. Oil

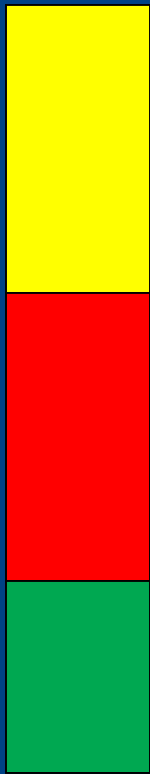
81 108 146 182 220 256

D. Electric

37 49 67 84 101 118

WHO PAYS WHAT

RENT



The Housing Agency portion of the rent equals the Payment Standard minus 30% of the Family's Adjusted Income.

If the Total Rent is equal to the Payment Standard, the Tenant Rent equals 30% of the adjusted income.

If the Total Rent is more than the Payment Standard, the Family must pay the difference plus 30% of their adjusted income.

GROSS RENT =

RENT

PLUS

UTILITY ALLOWANCE

FAMILY CONTRIBUTION TO THE RENT PAYMENT

The family pays:

30% of monthly adjusted income
minus the Utility Allowance
+ PLUS

any rent above the Payment Standard



not to exceed 40% of monthly adjusted income



PORTABILITY

One of the best features of the tenant-based assistance program is that your assistance “moves” with you.

You can use your Housing Choice Voucher anywhere in the United States.



PORTABILITY

Remember, the Housing Office where you want to move may:

- have different rules, policies, and deadlines.
- have a different payment standard.
- have different utility allowances that will affect the amount you pay for rent.
- issue you a different size voucher.
- have different admission policies.



DECIDING WHERE YOU WANT TO LIVE

SECURITY DEPOSIT

Make sure you have made plans to have money available for a security deposit and a deposit for utilities, if applicable.



The Housing Agency does not help with your security deposit.



DECIDING WHERE YOU WANT TO LIVE

When participating in the Housing Choice Voucher Program

- * Families can stay in their present home or move to another unit.
- * The house, apartment, or condo must meet Program requirements.
- * The landlord must agree to participate in the Program.



DECIDING WHERE YOU WANT TO LIVE

What meets your family's needs?

Is the unit you are interested in close to...

- Schools
- Work
- Public Transportation
- Shopping
- Parking for family and guests
- Medical care, hospitals



DECIDING WHERE YOU WANT TO LIVE

*Advantages of a moving to an area
with lower concentration of poverty:*

- * **Increased safety: Low crime, safe area for children to play, adequate lighting**
- * **Good neighborhood condition**
- * **Improved schools for children**
- * **Better quality housing, more responsive landlords**
- * **Improved access to transportation, day care and other neighborhood services**



DECIDING WHERE YOU WANT TO LIVE

LEASING IN PLACE

*You may be eligible to receive assistance
in your present unit if:*

- * **You do not have a financial interest in the unit.**
- * **The unit is not owned by a family member.**
- * **The unit is an appropriate size for your family.**
- * **The unit passes a housing quality standards inspection.**
- * **The unit has a reasonable rent.**
- * **You cannot pay more than 40% of your adjusted monthly income toward your portion of the rent & utilities.**



TIPS TO LOCATE HOUSING

- * Check the classified section of all local newspapers.
- * Ask friends and neighbors.
- * Drive through neighborhoods where you may want to live and look for signs on properties.
- * Check bulletin boards in Laundromats and supermarkets.
- * Check with real estate offices and rental agencies.
- * Look online:
 - www.mdhousingsearch.org (or call 1-877-428-8844)
 - www.gosection8.com
 - www.zillow.com
- * Visit HCHCD office and look at book of current listings.



EVALUATING A UNIT

- * Does the landlord provide pest control?
- * Is the unit clean and ready to occupy?
- * Are there sufficient amenities and facilities for your family?
- * Are there private, secure mail boxes?
- * Are the refrigerator and stove large enough for your family size?
- * Is garbage pick-up available?
- * Are there restrictions on pets? Is there a fee for pets?
- * Is there sufficient parking and storage?
- * Do all windows and doors have locks that work?



EVALUATING A UNIT

ASK QUESTIONS WHEN YOU MEET THE LANDLORD

- * Is there a person to call for routine maintenance and emergency repairs?
- * Does the owner seem interested in maintaining the condition and appearance of the property?
- * When and where can the landlord or agent be reached?

HOUSING PROGRAM DOCUMENTS

Make certain you have the **voucher** and **lease-up papers** with you whenever you search for a housing unit.

WILL THE UNIT MEET THE PROGRAM REQUIREMENTS?

- **The Gross Rent for the unit should be less than or equal to the Payment Standard.**
- **The rent for the unit must be reasonable for the type, size, condition, and location of the unit.**
- **The unit must pass a Housing Quality Standards inspection.**



LEASE

LEASING A UNIT

ADVANCED COPY OF THE LEASE

- If you request a copy of the lease in writing, a landlord must give it to you before you decide whether to rent.
- It must include all terms agreed upon, but it does not have to state your name, move-in date, or identification and rental rate of the unit.
- Before you sign a lease, you should be aware of all terms it includes.
- Pay attention to all the specifics, including when rent is due, late fees, procedures for giving notice at the end of the lease, automatic renewal provisions, etc.
- Make sure you can live with all the rules regarding pets, parking, storage areas, noise, move out procedures, etc.



LEASING A UNIT

**ALL LEASES BEGIN THE
1st DAY OF THE MONTH.**



To ensure a beginning of the month lease-up, submit all paperwork no later than the 15th day of the month prior to the month of the move in.

example: anticipated move in September 1, submit paperwork to HA by August 15

YOUR INFORMATION

If a prospective landlord asks, the Housing Agency will provide the following family information:

- **Current address**
- **Current landlord**
- **Previous address**
- **Rental history**
- **Drug trafficking**
- **Criminal activity**

THE SIGNED LEASE-UP DOCUMENTS

These Lease-up Documents must be submitted before your voucher expires:

1. Request for Tenancy Approval
2. Landlord Certification
3. Smoke Detector Certification
4. Lead Paint Warning Certification
5. Amenities Form



THEY ALL MUST BE COMPLETED AND SIGNED BY BOTH LANDLORD AND TENANT

PROCESSING YOUR DOCUMENTS



*After you have selected a unit and submitted the paperwork, **allow 15 days** to process your request.*

PROCESSING YOUR DOCUMENTS

The Housing Agency will review
the Request for Tenancy Approval.

Including but not limited to:

- * Is the gross rent greater than 40% of your income?*
- * Is the proposed rent within the limits?*

HOUSING QUALITY STANDARDS INSPECTION



If the Request for Tenancy Approval and the proposed lease are in order, the Housing Agency will make an appointment to inspect the unit.



FAIL

IF THE UNIT FAILS THE INITIAL INSPECTION:

- * The unit will be disapproved and you will be given a new lease-up package to find another unit.
- * Rental assistance cannot begin until a unit has been inspected and approved by the Housing Agency inspector.



APPROVED

IF THE UNIT IS APPROVED BY THE HOUSING AGENCY:

- * The Housing Agency will enter into a Housing Assistance Payment Contract with the landlord.
- * Housing Assistance Payments will be made directly to the Landlord on your behalf.

THE HOUSING AGENCY WILL PROVIDE ASSISTANCE AS LONG AS:

- * The rent remains reasonable for the area.**
- * The unit meets Housing Quality Standards (HQS).**
- * You are eligible for assistance.**
- * You reside in the unit.**
- * The owner is in compliance with the Housing Assistance Payment (HAP) Contract.**

REQUIREMENTS



YOU MUST PAY YOUR PORTION OF RENT ON TIME EVERY MONTH.



YOU MUST PAY YOUR UTILITIES ON TIME EVERY MONTH.

You will not be permitted to move with assistance if your rent is not paid, your utilities are not paid, or the unit is damaged.

HOUSING AGENCY

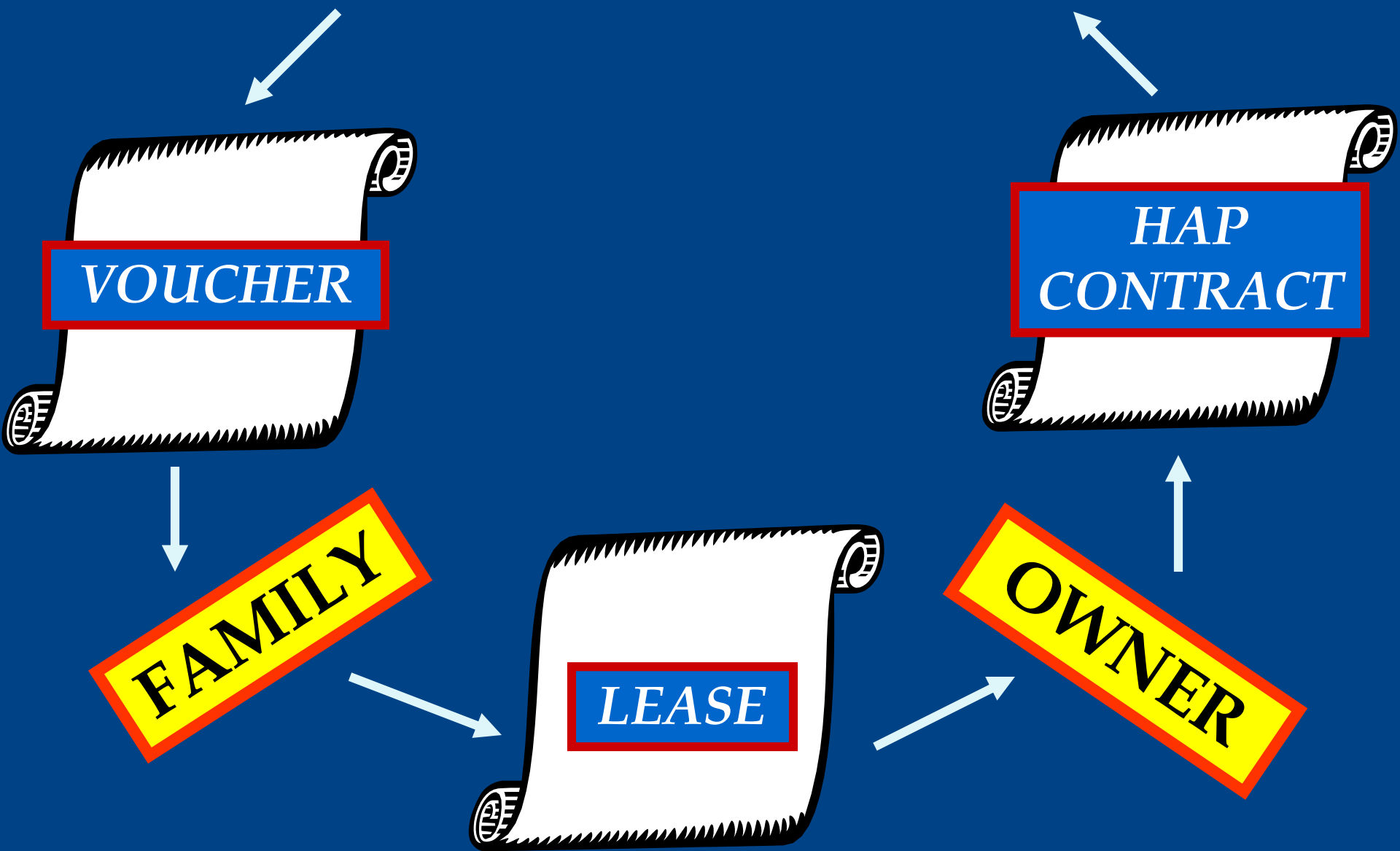
VOUCHER

HAP
CONTRACT

FAMILY

LEASE

OWNER



HOUSING AGENCY RESPONSIBILITIES

- * Determines eligibility.
- * Conducts family briefings.
- * Offers and conducts hearings.

**ISSUES VOUCHERS TO
QUALIFIED FAMILIES.**

FAMILY RESPONSIBILITIES

- * Complies with family obligations under the Housing Choice Voucher Program.
- * Pays their portion of the rent.
- * Complies with the Lease Agreement.
- * Takes care of the rental unit.
- * Reports maintenance problems.
- * Gives proper notice.

**ENTERS INTO A LEASE
WITH THE OWNER.**

PROPERTY OWNER RESPONSIBILITIES

- * Screens families.
- * Maintains unit, except for tenant damage.
- * Makes timely repairs.
- * Enforces the lease.

SIGNS A HOUSING ASSISTANCE PAYMENT CONTRACT WITH THE HOUSING AGENCY.

- * Complies with the HAP Contract.

FAMILY SELF-SUFFICIENCY (FSS) PROGRAM

- * FSS is a voluntary program.
- * Helps Housing Choice Voucher residents achieve economic independence over a five-year period.

**Easy to apply online:
www.harfordhousing.org**

FAMILY SELF-SUFFICIENCY (FSS) PROGRAM

Who is eligible for FSS?

- * All Housing Choice Voucher tenants who desire to achieve economic independence through work.
- * If the head of household agrees to participate, ALL family members 18 years of age or older are also eligible for services.

FAMILY SELF-SUFFICIENCY (FSS) PROGRAM

Participants work with a case manager to:

- * Assess strengths
- * Identify barriers
- * Set goals
- * Help achieve goals

Failure to achieve goals does not jeopardize your Housing Choice Voucher benefits.

FAMILY SELF-SUFFICIENCY (FSS) PROGRAM

*How does the escrow
account work?*

- If FSS participants increase their earned income through work, a savings (escrow) account is set up for them by the Housing Agency.
- When you graduate from the program, you can begin to withdrawal the savings.

FAMILY SELF-SUFFICIENCY (FSS) PROGRAM

**FSS CONTACT:
Monisha Giddings
410-638-3045 x1842**



YOUR APPOINTMENTS

REMEMBER

- * Be prompt for all appointments.
- * Your appointment may be cancelled if you are 15 minutes or more late.
- * Provide all requested documents.
- * Complete all forms **BEFORE** your appointment.

ANNUAL INCOME

IMPORTANT



The family is responsible for reporting **ALL SOURCES OF INCOME** for the household.



ANY CHANGES in income, either up or down, must be reported in writing within **10 days** of the change.

REMEMBER!!!



Your utilities **MUST** be kept current at all time. Failure to keep utilities on will result in your termination from the Program.



Pay rent on time.



Take care of your home.

WHO LIVES IN YOUR UNIT



A frequent overnight visitor will be considered an unauthorized occupant.



Unauthorized occupants will jeopardize your assistance.



Anyone using your address that is not part of your household will be considered an unauthorized occupant.

THINK BEFORE YOU ACT

Be careful what your visitors do. YOU may be held accountable for their actions.



If you violate the program, you may lose your assistance, and it could possibly be a permanent loss.



CONFRONTING HOUSING DISCRIMINATION

- * It is illegal to deny housing to anyone on the basis of race, color, religion, sex, national origin, familial status, or disability.
- * If you believe you have been discriminated against, contact your Housing Agency representative.
- * The Housing Agency will assist you in completing the Housing Discrimination Complaint form included in your briefing packet and refer you to the proper agency

LEAD PAINT

**Protect
Your
Family
From
Lead In
Your
Home**



 EPA United States Environmental Protection Agency

 United States Consumer Product Safety Commission

 United States Department of Housing and Urban Development

Refer to your briefing packet for more information about protecting yourself and your family from lead-based paint in your home.



Who is responsible for
your success?

YOU ARE!



QUESTIONS?



HARFORD COUNTY HOUSING & COMMUNITY DEVELOPMENT

15 South Main Street
Bel Air, Maryland 21014
410-638-3045
www.harfordhousing.org