



HOUSING CHOICE VOUCHER NEW OWNER PACKET

Dear Prospective Landlord:

Thank you for your interest in the St. Petersburg Housing Authority. In order to process your file the information and documents listed below are required. All information must be complete and returned before you can begin receiving Housing Assistance Payments for your tenant.

1. Proof of ownership of the dwelling (Title, Warranty deed or mortgage deed; settlement statement)
2. Tax statements (property tax)
3. If incorporated, the Incorporation certification/Articles of Incorporation
4. Photo identification
5. Owner information form
6. Owner/Agent Form (this form must be notarized if you designate an agent)
7. W-9 Form (please carefully read the instructions when completing this form as all information pertaining to income is reported to the IRS)
8. Authorization for criminal background check
9. \$24 check or money order payable to St. Petersburg Housing Authority

Please return documents by mail to:

Attention: Compliance Department
P.O. Box 12849
St. Petersburg, FL 33733

Or in person to:

300 – 10th Street South
St. Petersburg, FL 33705

NOTE: THE PHA WILL NOT APPROVE THE TENANCY ON ANY PROPERTY WHERE PRIOR YEARS TAXES ARE IN ARREARS. IF YOU HAVE QUESTIONS REGARDING ANY OF THESE FORMS OR THE HOUSING CHOICE VOUCHER PROGRAM, PLEASE CONTACT THE OFFICE AT (727) 323-3171.

P.O. Box 12849 * St. Petersburg, FL 33733
(727) 323-3171 * (727) 328-6699 Fax
www.stpeteha.org



OWNER INFORMATION FORM

Property Address:

State _____ Street Address _____ City _____
Zip _____

Year Built: _____ # of Bedrooms: _____ Square Feet: _____

Tenant's Name:

Structure Type: ☐ apartment ☐ mobile ☐ single family ☐ high rise ☐ low rise ☐ townhouse

Ownership of Assisted Unit:

I certify that I am the legal owner, or legally designated agent, for the above referenced unit and that the tenant has no ownership interest in this dwelling unit.

Approved Residents of Assisted Unit:

I understand that the family members listed on the Dwelling Lease Agreement approved by the Housing Authority are the only individuals permitted to reside in the unit. Unauthorized occupants must be reported promptly to the Housing Authority. I also understand that I am not permitted to live in the unit while I am receiving Housing Assistance Payments.

Housing Quality Standards:

I understand my obligations in the Housing Assistance Payments Contract to perform necessary maintenance in order to comply with Housing Quality Standards.

Tenant Rent Payment:

I understand that the amount of the tenant portion of the Contract Rent is determined by the Housing Authority. Any other item not specified in the Lease must have specifically approved by the Housing Authority.

Reporting Vacancies to the Housing Authority:

I understand that it is my responsibility to notify the Housing Authority in writing in the event that the assisted unit is vacated.

Administrative Criminal Actions for Intentional Violations:

I understand that failure to comply with the terms and responsibilities of the Housing Assistance Payments Contract is cause for termination of participation in the Section 8 Program. I understand that intentionally supplying false, incomplete or inaccurate information is punishable under Federal or state criminal law.

_____ Name of Owner	_____ SSN or Federal ID
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_____ Street Address Number	_____ City	_____ State	_____ Zip Code	_____ Telephone
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_____ Name of Agent (if applicable)	_____ SSN or Federal ID
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_____ Street Address Number	_____ City	_____ State	_____ Zip Code	_____ Telephone
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_____ Signature of Person Making Certification	_____ Date
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_____ Witness	_____ Date
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OWNER - AGENT FORM

TO: THE HOUSING AUTHORITY OF THE CITY OF ST. PETERSBURG, FLORIDA

FROM: _____
Name of Owner Street Address

City State Zip Code Phone Number

I, _____ hereby authorize and designate

Name of Authorized Person Social Security Number

Address _____ Phone _____

To act as _____ to sign all Lease and Contract with the Housing Authority of the City of St. Petersburg, Florida, for the property(ies) listed below:

NAMES OF TENANTS

PROPERTY ADDRESS

1. _____	_____
2. _____	_____
3. _____	_____
4. _____	_____

The Housing Assistance Payments check should be made payable to: _____

_____ and mailed to: _____
_____ until I otherwise advise the Housing Authority in writing.

Signature of Owner Social Security of Owner

State of Florida
County of _____

Subscribed to and sworn before me this _____ day of _____
_____ 200__

_____, Who is personally known to me, or has produced the following as identification _____

Notary Public



CHANGE OF OWNERSHIP

ASSIGNMENT OF HOUSING ASSISTANCE PAYMENTS

I, _____ the legal owner of the
property(ies)
known as:

Address

Name of Tenant

1. _____
2. _____
3. _____
4. _____
5. _____

accept the Housing Assistance Payments Contract(s).

originally signed by: _____

and understand that this assignment is binding to all of the original owner's obligations and duties under the provisions of said contract(s). The provisions of this assignment shall bind and insure to the benefit of said owner and respective successors, legal representatives, and assigns.

I also agree to provide the Housing Authority of the City of St. Petersburg, Florida, with a copy of the recorded warranty deed within sixty (60) days of the date of the sale of the property and understand that I must supply evidence of ownership as an interim measure to receive Housing Assistance Payments.

Signature

Witness

Date

CHECKS TO BE MADE PAYABLE TO :

Name

SSN or TAX I.D. #

Street City State Zip Code

Phone (home) _____ Phone (work) _____



**SECTION 8- RENTAL ASSISTANCE PROGRAM
VERIFICATION OF OWNERSHIP**

NAME _____

STREET ADDRESS _____

CITY _____ STATE _____ ZIP CODE _____

SOCIAL SECURITY NUMBER OR TAX ID NUMBER _____

PROPERTY ADDRESS(ES) _____

1. Are you an employee or elected official of the City of St. Petersburg? _____
If yes, in what capacity? _____

2. Have you ever participated in any Section 8 Program? (Section 8, Certificate Voucher, or Moderate Rehabilitation Program) If **YES**, state name and location of the housing agency involved. _____

3. Have you been involved in the formulation of policies or decisions directly or indirectly affecting any Section 8 Program during the past year? _____
If **YES**, state where, when and in what capacity. _____

4. Have you ever been prohibited from participation in any housing assistance program? _____

5. Have you ever been cited for any property code violations? If **YES**, please explain: _____

6. Are you the current owner of record for the above listed property? _____
If you are a new buyer and/or assuming ownership of the above property, do you agree to honor all obligations and duties as stipulated in the existing Housing Assistance Program Contract? _____
If **NO**, please explain. _____

7. Will you appoint a local agent to manage your property? _____
If **YES**, provide the name, address, and phone number of your local agent.

I HEREBY CERTIFY THAT THE INFORMATION PROVIDED ABOVE IS TRUE
TO THE BEST OF MY KNOWLEDGE.

Signature of Owner

Date

WARNING: TITLE 18, SECTION 1001 OF THE UNITED STATES CODES,
STATES THAT A PERSON IS GUILTY OF A FELONY FOR KNOWINGLY AND
WILLINGLY MAKING FALSE OR FRADULENT STATEMENTS TO ANY
DEPARTMENT OR AGENCY OF THE UNITED STATES OR THE
DEPARTMENT OF HOUSING AND URBAN DEVELOPMENT.



VERIFICATION OF OWNER HOUSING ASSISTANCE PAYMENT

To: The Housing Authority of the City of St. Petersburg, Florida

From: _____
Name of Owner

Street Address City State Zip
Code

E-mail Address

Tenant's Name

The Housing Assistance Payment check should be made payable to the following unless I advise the Housing Authority otherwise in writing:

Payee Name

Street Address

City State Zip
Code

() _____

Telephone SSN or TIN Number of Payee

Signature of Owner Date

RENT REASONABLENESS

What is Rent Reasonableness?

The Housing Authority (HA) is required to make a determination and certify that every rent approved for the Section 8 Housing Choice Voucher Program is reasonable. Reasonable rent means that **the rent may not exceed the rent that is charged for a comparable unit, with similar amenities, in the same or a similar location in the private, unassisted rental market.**

The HA collects and maintains data on rental rates of all types (single family, multi-family, etc.) and sizes of unassisted housing within all areas of our jurisdiction. At least two comparable units are used in determining the maximum allowable rent for a unit. For multi-family properties, the rent roll for the property is used.

How to Request the Proposed Rent for Your Unit:

On the Request for Tenancy Approval form provided to you by your prospective tenant, or current tenant if a lease renewal, please indicate the most recent rent that was charged for your unit. If the rent that you are proposing is different than the most recent rent charged, you must indicate why it is different.

How Is the Rent for Your Unit Determined?

In determining if your proposed rent is reasonable, the HA will inspect the unit, and determine if the unit meets Housing Quality Standards (HQS), determine the number and type of amenities in the unit, and their condition. The HA will also compare your proposed rent to that of at least two similar unassisted units in the same or a similar neighborhood (non-apartment complexes). (Units in apartment complexes will be compared to non-assisted units of the same type and size in the same complex as taken from the rent roll provided by the management office).

The amenities in your unit are noted as are their condition, and this may also be used in determining the rent for your unit. For example, a two bedroom single-family house with wall to wall carpet in fair condition, a dishwasher in fair condition, and wall unit air conditioning units, would rent for less than the same size and type unit with new wall to wall carpeting, a new dishwasher and central heat and air conditioning.

Neighborhood and site conditions, e.g. lawn, driveway, etc., are also very important factors in determining the reasonable rent for a unit. Rents in some neighborhoods are much less than rents in other neighborhoods. For example, a three bedroom, single-family house which meets HQS, but is located in a non-kept, higher crime neighborhood, and with no grass or landscape on the site, would rent for less than the same house located in a well maintained, lower-crime neighborhood, with a well kept yard.

For apartment communities, rent rolls are required. The rent charged to unassisted tenants for the same unit size and type in the same apartment complex is the maximum reasonable rent for a Section 8 assisted unit.

What are Fair Market Rents (FMR's)?

According to HUD, FMR's are "gross rent" estimates that include both shelter rent paid by the tenant to the landlord, and the cost of tenant-paid utilities. Housing Authorities do not establish/set the contract rent or the reasonable rent using the FMR's. Housing Authorities use the FMR's to determine payment standard amounts for the Housing Choice Voucher program. Payment Standards are used by HA staff to calculate the tenant's portion of rent.