
Change of Ownership/Management Instructions

Prior Owner

- Complete and sign Addendum to HAP Contract – Change of Ownership
(*This is required even if you are changing management of your unit.*)

New Owner

- **Complete Landlord Information page.**
- **Complete W-9 (This is who will receive payment)**
- **Direct Deposit Authorization (Mandatory)**
- **(Voided Check) must be attached**
- **Provide proof of ownership (copy of deed or settlement statement)**
- **Sign Addendum to HAP Contract – Change of Ownership**
- **Complete and sign Section 8 Landlord Certification**
- **Submit a copy of the agreement if you are using a property management company**

All items listed above must be submitted before the Housing Authority can process the transfer of ownership and make any payments.

Mail: Housing Authority of Maricopa County
8910 N. 78th Ave
Peoria, AZ 85345

Fax: (602) 744-4545 Phone: (602) 744-4500

E-Mail: m.tovar@maricopahousing.org



Housing Choice Voucher Program

LANDLORD INFORMATION

Name of Owner _____
Include proof of ownership

Property Manager (if applicable) _____
Include copy of management agreement

Contact Information

Name: _____

Address: _____

Phone: _____ Fax: _____

E-mail: _____

Payments will be made to the person or company listed on the attached W-9

Name(s) of Tenant(s)

Property Address(es)

Table with 2 columns: Name(s) of Tenant(s) and Property Address(es). Multiple rows for data entry.

Owner/ Property Manager's Signature: _____

Date Signed: _____





Housing Choice Voucher Program

WARNING! Title 18, US Code Section 1001, states that a person who knowingly and willingly makes false or fraudulent statements to any Department or Agency of the United States is guilty of a felony. State law may also provide penalties for false or fraudulent statements.

Dear Landlord:

The Department of Housing and Urban Development (HUD) has conveyed to us its serious concerns about violations of the Section 8 Existing Housing Program requirements. The HUD Office of the Inspector General (IG) has recently identified cases of fraud by Public Housing Agencies (PHAs) and their employees, owners/managers, and tenants participating in the Section 8 Existing Housing Program.

In order that the Department may provide Section 8 housing assistance to as many needy families as possible, all participants in the HUD sponsored program must properly utilize Government Funds and follow departmental policy requirements. Incidence of fraud, willful misrepresentation, or intent to deceive with regard to the Section 8 Existing Housing Program are criminal acts. If you are suspected of committing any fraudulent actions, we are required to refer the matter to the proper authority for appropriate action. This could lead to an investigation of the allegation and could result in your being accused of a Federal crime and you could also be terminated from participation in the program.

Some examples of fraud involving owner/managers identified by the IG's investigation included:

1. Requiring extra "side" payments in excess of the family's share of the rent. As you know, any payment in excess of the rent must receive prior approval by us.
2. Collecting assistance payments for units not occupied by Section 8 tenants.
3. Bribing PHA employees to certify substandard units as standard.

We urge you to report ANY violations of the Housing Choice Voucher Program. These violations should be reported immediately rather than to continue in non-compliance with program requirements.

If you know of any violations of fraud committed by other persons, including PHA employees, tenants or other owners, please report this to the Housing Authority of Maricopa County immediately.

In addition, we are writing to tenants who are receiving Section 8 Housing Assistance Payments requesting their assistance in preventing abuse of the program.

We will take any action warranted to ensure that cases of fraud are prevented or prosecuted and are working with HUD to accomplish this task. Your cooperation will be greatly appreciated.

Thank you,

HCV Program Supervisor

Date Reviewed

Owner/Agent Signature





HOUSING AUTHORITY
of MARICOPA COUNTY

Housing Choice Voucher (Section 8) Landlord Certification

RE: _____
Street Address of Assisted Unit

City/Town State Zip Code

Ownership of Assisted Unit

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

Approved Residents of Assisted Unit

I understand that the family members listed on the dwelling lease agreement as approved by the Housing Authority are the only individuals permitted to reside in the unit. 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 compliance with the Housing Assistance Payments Contract to perform necessary maintenance so the unit continues to comply with Housing Quality Standards.

Tenant Rent Payments

I understand that the tenant's portion of the contract rent is determined by the Housing Authority, and that it is illegal to charge any additional amounts for rent or any other item not specified in the lease which have not been specifically approved by the Housing Authority.

Reporting Vacancies to the Housing Authority

I understand that should the assisted unit become vacant, I am responsible for notifying the Housing Authority immediately in writing.

Computer Matching Consent

I understand the Housing Assistance Payment Contract permits the Housing Authority or HUD to verify my compliance with the Contract. I consent for the Housing Authority or HUD to conduct computer matches to verify my compliance as they deem necessary. The Housing Authority and HUD may release and exchange information regarding my participation in the Section 8 program with other Federal and State agencies.

Administrative and Criminal Actions for Intentional Violations

I understand that failure to comply with the terms and responsibilities of the Housing Assistance Payments contract is grounds for termination of participation in the Section 8 program. I understand that knowingly supplying false, incomplete or inaccurate information is punishable under Federal or State Criminal Law.

Print Name: _____ Title: _____
(Owner or Agent)

Signature _____ Date _____





Housing Choice Voucher Program

DIRECT DEPOSIT AUTHORIZATION

New Setup Change Cancellation

I hereby request and authorize the Housing Authority of Maricopa County (HAMC) to deposit payments by electronic funds transfer into the account specified below and, if necessary, debit entries and adjustments for any amounts deposited electronically in error. I recognize that, if I fail to provide complete and accurate information on this authorization form, the processing of the form may be delayed or that my payments may be erroneously transferred electronically.

This authorization will remain in effect until written notice to terminate is given. The undersigned must allow a reasonable amount of time for initiating or terminating Direct Deposit and is responsible for notification of any change in financial institution information.

Name on Bank Account _____

SSN or TIN of Person/Business on Bank Account _____

Financial Institution (Bank Name) _____

9 Digit Routing Number _____

Bank Account Number _____

Type of Account Checking **A voided check must be attached**

Savings **A deposit slip must be attached**

The name on the bank account and tax ID must match the W-9 on file with the Housing Authority of Maricopa County.

Please note: The person/business' name and SSN/TIN to which the direct deposit is made will receive a 1099 from HAMC at year end. Therefore, before a direct deposit can be made, the HAMC must have a W-9 on file for the person/business for which the direct deposit will be made.

Signature _____ Date _____

Daytime phone number _____

Address of rental unit _____

If you have questions, please call 602-744-4500.

RETURN TO: Housing Authority of Maricopa County
8910 N. 78th Avenue
Peoria, AZ 85345





Housing Choice Voucher Program

Addendum To HAP Contract Due to Change of Ownership

The Housing Assistance Payment Contract dated _____ between _____, Owner and _____, Tenant are hereby mended or changed as indicated below. The said Rental Agreement and Contract shall remain in full force and effect but as modified by the changes below noted:

Change Of Ownership

The Housing Authority of Maricopa County, Arizona hereby acknowledges the request by _____ for a transfer of _____ (Name of Former Owner) ownership of the aforesaid lease premises and expressly accepts _____ as the new owner _____ (Name of New Owner) effective on the _____ day of _____, 20____, under the same terms and conditions as the former owner held under the Rental Agreement and Contract.

Former Owner

Signature Date _____

New Owner

Signature Date _____

Housing Authority of Maricopa County
8910 n. 78th Ave
Peoria, AZ 85345

Housing Representative

Signature Date _____

