



Change of Ownership / Management Instructions

Prior Owner OR Property Management Company:

- Complete and sign Addendum to HAP Contract- Change of Ownership/Property Management
(This is required to be completed)

New Owner OR Property Management Company:

- Complete the Landlord Information page.
- Complete W-9 (This is who will receive HAP payment)
- Direct Deposit Authorization (Mandatory)
- Provide a voided check or official bank letter
- Provide proof of ownership (copy of deed or settlement statement)
- Submit a copy of the Property Management Agreement
- Sign Addendum to HAP Contract - Change of Ownership/Property Management
- Complete and sign Housing Choice Voucher Landlord Certification form
- Review and sign the Prevent Program Abuse form

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

Mail:

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

Fax:

(602) 744-4545

E-Mail:

info@maricopahousing.org





Addendum To HAP Contract Due to Change of Ownership / Property Management Company

The Housing Assistance Payment Contract dated _____ between _____, Owner and _____, Tenant are hereby amended 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 / Property Management Company

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 effective on the _____

(Name of New Owner)

day of _____, 20_____, under the same terms and conditions as the former owner held under the Rental Agreement and Contract.

Former Owner / Property Management Company

Signature Date

New Owner / Property Management Company

Signature Date

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

Signature Date





LANDLORD INFORMATION

Name of Owner / Property Management Company: _____
* Include proof of ownership

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

Contact Information

Name: _____

Address: _____

Phone: _____ Fax: _____

e-Mail: _____

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

Name(s) of Tenant(s)	Property Address(es)
_____	_____
_____	_____
_____	_____
_____	_____

Owner/Property Manager's Signature: _____

Date Signed: _____





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

**Payment will be made to the person or company listed on the attached W-9
Ensure this form matches the information on the W9**





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 Housing Choice Voucher 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 Housing Choice Voucher 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: _____





WARNING I 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 Housing Choice Voucher 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 Housing Choice Voucher Existing Housing Program.

In order that the Department may provide Housing Choice Voucher 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 Housing Choice Voucher 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 Housing Choice Voucher 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 Housing Choice Voucher 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.

Date Reviewed

Owner/Agent Signature



Request for Taxpayer Identification Number and Certification

**Give Form to the
 requester. Do not
 send to the IRS.**

▶ Go to www.irs.gov/FormW9 for instructions and the latest information.

Print or type.	See Specific Instructions on page 3.	<p>1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank.</p> <hr/> <p>2 Business name/disregarded entity name, if different from above</p> <hr/> <p>3 Check appropriate box for federal tax classification of the person whose name is entered on line 1. Check only one of the following seven boxes.</p> <p> <input type="checkbox"/> Individual/sole proprietor or single-member LLC <input type="checkbox"/> C Corporation <input type="checkbox"/> S Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Trust/estate <input type="checkbox"/> Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Partnership) ▶ _____ Note: Check the appropriate box in the line above for the tax classification of the single-member owner. Do not check LLC if the LLC is classified as a single-member LLC that is disregarded from the owner unless the owner of the LLC is another LLC that is not disregarded from the owner for U.S. federal tax purposes. Otherwise, a single-member LLC that is disregarded from the owner should check the appropriate box for the tax classification of its owner. <input type="checkbox"/> Other (see instructions) ▶ _____ </p>	<p>4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):</p> <p>Exempt payee code (if any) _____</p> <p>Exemption from FATCA reporting code (if any) _____</p> <p style="font-size: small;">(Applies to accounts maintained outside the U.S.)</p>
		<p>5 Address (number, street, and apt. or suite no.) See instructions.</p>	<p>Requester's name and address (optional)</p> <p>Housing Authority of Maricopa County 8910 N. 78th Ave, Suite D Peoria, AZ 85345</p>
		<p>6 City, state, and ZIP code</p>	
		<p>7 List account number(s) here (optional)</p>	

Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the instructions for Part I, later. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN*, later.

Note: If the account is in more than one name, see the instructions for line 1. Also see *What Name and Number To Give the Requester* for guidelines on whose number to enter.

Social security number									
				-			-		
or									
Employer identification number									
				-					

Part II Certification

Under penalties of perjury, I certify that:

1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and
2. I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and
3. I am a U.S. citizen or other U.S. person (defined below); and
4. The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions for Part II, later.

Sign Here	Signature of U.S. person ▶	Date ▶
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General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

Future developments. For the latest information about developments related to Form W-9 and its instructions, such as legislation enacted after they were published, go to www.irs.gov/FormW9.

Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) which may be your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN), to report on an information return the amount paid to you, or other amount reportable on an information return. Examples of information returns include, but are not limited to, the following.

- Form 1099-INT (interest earned or paid)

- Form 1099-DIV (dividends, including those from stocks or mutual funds)
- Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)
- Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)
- Form 1099-S (proceeds from real estate transactions)
- Form 1099-K (merchant card and third party network transactions)
- Form 1098 (home mortgage interest), 1098-E (student loan interest), 1098-T (tuition)
- Form 1099-C (canceled debt)
- Form 1099-A (acquisition or abandonment of secured property)

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.

If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See What is backup withholding, later.