

TENANT OBLIGATIONS UNDER THE HOUSING CHOICE VOUCHER PROGRAM

The following is a listing of a participant family's obligations under the HCV program as determined by the HUD-52646 and Northampton Housing Authorities (NHA) Administrative Plan.

- 1. The family must supply any information or documentation requested by the NHA or HUD determined to be necessary for use in the administration of the program, regularly scheduled reexamination, or interim reexamination. The information includes, but is not limited to:
 - a. Signed Release of Information Form HUD- 9886
 - b. Disclosure and verification of social security numbers
 - c. Evidence of citizenship or eligible immigration status
 - d. Fully executed Request for Tenancy Approval (RFTA) when in move status
- 2. Any information that the family supplies must be complete and accurate.
- 3. Families must not willfully make or cause to be made any false statements or misrepresentations relating to their application or eligibility under this program.
- 4. The family must report in writing to the NHA within 30 days of all changes that occur in their household's income, family composition, or assets, including:
 - a. The birth, adoption or court awarded custody of a child
 - b. Any household members whom are no longer living in the unit
 - c. Marriage
 - d. When there is an increase, decrease, or new income in household for any family member





- e. When the family is absent from the unit. Notice is required under this provision only when all family members will be absent from the unit for an extended period. An extended period is defined as any period greater than 30 calendar days. Written notice must be provided to the NHA at the start of the extended absence.
- 5. The family must request and receive approval to add any other family member as an occupant of the unit. The NHA reserves the right to deny the addition of household or family members.
- 6. The family must obtain the approval of the NHA to change the head of household.
- 7. No persons, other than those listed on the family's application, may occupy the dwelling unit for more than a total of 21 days during the lease term without the written approval of the NHA and the landlord.
- 8. The family must supply any information requested by the NHA to verify that the family is living in the unit or information related to family absence from the unit.
- 9. The family must use the assisted unit for residence by the family. The unit must be the family's only residence.
- 10. The family must not sublease the unit, assign the lease, or transfer the unit. Subleasing includes receiving payment to cover rent and utility costs by a person living in the unit who is not listed as a family member.
- 11. The family must notify the NHA and the owner before moving out of the unit or terminating the lease. The family must comply with lease requirements regarding written notice to the owner. The family must provide written notice to the NHA at the same time the owner is notified.
- 12. The family must not commit any serious or repeated violations of the lease.
- 13. The family must promptly give the NHA a copy of any owner eviction notice.



- 14. The family must promptly respond to all written requests for information within 30 days or the time frame specified on the notice, if applicable.
- 15. The family is only to pay the amount of the rent specified by the NHA.
- 16. Families who owe money to the NHA or any other Section 8 landlord may be cancelled from the program or denied assistance if they do not satisfy their liability as required.
- 17. The family must allow the NHA to inspect the unit at reasonable times and after reasonable notice.
- 18. The family is responsible for any Housing Quality Standards (HQS) breach by the family caused by failure to pay tenant-provided utilities or appliances or damages to the dwelling unit or premises beyond normal wear and tear caused by any member of the household or guest. The family must fully reimburse the landlord for all repairs that must be made as a result of the damage.
- 19. The family must pay the utility bills as specified in the Request for Tenancy Approval (RFTA), the HAP Contract, and the lease. Utilities must be in the name of an adult member of the household.
- 20. The family must provide and maintain any appliances that the owner is not required to provide under the lease.
- 21. An assisted family or member of the family must not receive HCV program assistance while receiving another housing subsidy, for the same unit or a different unit, under any other federal, state, or local housing assistance program.
- 22. A family must not receive HCV program assistance while residing in a unit owned by a parent, child, grandparent, grandchild, sister or brother of any member of the family (including in-laws), unless the NHA has determined, and has notified the owner and the family of such determination, that approving rental of the unit, notwithstanding such relationship, would provide a reasonable accommodation for a family member who is a person with disabilities.



- 23. The family must not own or have any interest in the unit. Families in the NHA's Homeownership Program are exempt from this obligation.
- 24. Family members and their guests must not commit fraud, bribery, or any other corrupt or criminal act in connection with the program.
- 25. Family members and their guests must not engage in the abuse of alcohol, drug-related criminal activity, violent criminal activity, or any other criminal activity in a way that threatens the health, safety, or right to peaceful enjoyment of other residents and persons residing in the immediate vicinity of the premises. This includes violent or abusive behavior towards NHA personnel.

I have read and understand the above obligations and understand that failure to comply may cause cancellation of my rent assistance under the Section 8 Housing Choice Voucher Program

Signature: Head of Household	Print Name	Date
Signature: Co-Head or Spouse	Print Name	Date
Signature: Other Adult (18+)	Print Name	 Date
Signature: Other Adult (18+)	Print Name	 Date



