

Marquette Housing Commission
316 Pine Street
Marquette MI 49855

DECLARATION OF CITIZENSHIP
OR ELIGIBLE IMMIGRATION STATUS

I, _____ certify,
(Print or type first name, middle initial, last name)

under penalty of perjury 1/, that, to the best of my knowledge, I am lawfully within the United States because (please check the appropriate box) :

- I am a citizen, naturalized citizen or national of the United States; or
- I have eligible immigration status and I am 62 years of age or older. Attach evidence of proof of age 2/; or
- I have eligible immigration status as checked below (see next page for explanations). Attach INS document (s) evidencing eligible immigration status and signed verification consent form.
- Immigrant status under §§ 101 (a) (15) or 101(a) (20) of the INA 3/
- Permanent Residence under § 249 of INA 4/
- Refugee, asylum, or conditional entry status under §§ 207, 208 or 203 of the INA 5/
- Parole Status under §§212 (d) (5) of the INA 6/
- Threat to life of freedom under Section 243 (h) of the INA 7/
- Amnesty under §245A of the INA 8/

(Signature) _____ (Date)

Check box if an adult is signing for a minor.

1/ Warning: 18 U.S.C. 1001 provides, among other things, that whoever knowingly and willfully makes or uses a document or writing containing any false, fictitious, or fraudulent statement or entry, in any matter within the jurisdiction of any department or agency of the United States, shall be fined not more than \$10,000 or imprisoned for not more than five years, or both.

Instructions: In order to be eligible to receive the housing assistance sought, each applicant for or recipient of housing assistance must be lawfully within the U.S. Please read the Declaration statement carefully and sign and return to the Housing Authority's Admissions Office. Please feel free to consult with an immigration lawyer or other immigration expert of your choosing.

Footnotes pertaining to noncitizens who have eligible immigration status in one of the following categories:

- 2/ Eligible immigration status and 62 years of age or older. For noncitizens who are 62 years of age or older or will be 62 years of age or older and receiving assistance under a Section 214 covered program on June 19, 1995. If you are eligible and elect to select this category, you must include a document providing evidence of proof of age. No further documentation of eligible immigration status is required.
- 3/ Immigrant status under §§ 101 (a) (15) or 101(a) (20) of INA. A noncitizen lawfully admitted for permanent residence, as defined by Section 101 (a) (20) of the Immigration and Nationality Act (INA), as an immigrant, as defined by section 101 (a) (15) of the INA (8U.S.C. 1101 (a)(20) and 1101 (a) (15), respectively (immigrants). This category includes a noncitizen admitted under section 210 or 210A of the INA (8 U.S.C. 1160 or 1161), (special agricultural worker), who has been granted lawful temporary resident status.
- 4/ Permanent residence under §249 of INA. A noncitizen who entered the U.S. before January 1, 1972, or such later date as enacted by law, and has continuously maintained residence in the U.S. since then, and who is not ineligible for citizenship, but who is deemed to be lawfully admitted for permanent residence as a result of an exercise of discretion by the Attorney General under Section 249 of the INA (8 U.S.C. 1259).
- 5/ Refugee, asylum, or conditional entry status under §§ 207, 208 or 203 of INA. A noncitizen who is lawfully present in the U.S. pursuant to an admission under Section 207 of the INA (8 U.S.C. 1157) (refugee status); pursuant to the granting of asylum (which has not been terminated) under Section 208 of the INA (8 U.S.C. 1158)(asylum status); or as a result of being granted conditional entry under Section 203 (a) (7) of the INA (U.S.C. 1153 (a) (7)) before April 1, 1980, because of persecution or fear of persecution on account of race, religion, or political opinion or because of being uprooted by a catastrophic national calamity.
- 6/ Parole status under §§212 (d) (5) of the INA. A noncitizen who is lawfully present in the U.S. as a result of an exercise of discretion by the Attorney General for emergent reasons or reasons deemed strictly in the public interest under section 212 (d) (5) of the INA (8 U.S.C. 1182 (d) (5)) (parole status).
- 7/ Threat of life or freedom under section 243(h) of the INA. A noncitizen who is lawfully present in the U.S. as a result of the Attorney General's withholding deportation under section 243(h) of the INA (8 U.S.C. 1253(h)).
- 8/ Amnesty under §245A of the INA. A noncitizen lawfully admitted for temporary or permanent residence under Section 245A of the INA (8 U.S.C. 1255a).

FRAUD DEFINED

Fraud is a criminal act that involves theft of taxpayers' monies from HUD's Programs. Examples of fraud include but are not limited to:

- Making false or misrepresentative statements as an applicant or program participant, verbally or in writing, regarding household income, assets, family composition/family size, expenses, or assets.
- Intentionally or unintentionally omitting, concealing, or failing to report within the time period outlined in MHC policy, any information that would have resulted in a decrease of the amount of subsidy the family qualified for, or that would have resulted in the family being ineligible for admission into an MHC housing assistance Program.
- Destroying or concealing records
- Forging or altering documents
- Theft
- Abuse of any kind of an MHC housing assistance Program

Fraud may be *punishable* any of the following ways:

- Termination from Public Housing or the Housing Choice Voucher Program
- Mandatory repayment of subsidy overpayments issued
- Referral to a collection agency
- Legal prosecution
- Referral to the United States Department of Housing and Urban Development (HUD) Office of the Inspector General (OIG) for investigation and possible federal prosecution
- Ineligibility for participation in future housing assistance programs

Fraud may be *prevented* in the following ways:

- **Be truthful and forthcoming** when reporting information to the MHC
- **Pay attention to detail** when reporting information and when reading MHC paperwork
- **Be diligent** in knowing what is required while you are a program participant
- **Read everything carefully** and understand all the material before signing anything
- **Ask questions when uncertain**
- **Don't rely on other (unofficial) sources** for program requirement info. (friends, neighbors, etc.)
- **Become familiar with MHC Policies and procedures** by reading MHC-issued newsletters, Notices, Program Contracts, and attending MHC informational meetings as scheduled
- **Notify the MHC** if you require additional assistance, or, for persons with disabilities, if you would like to request a reasonable accommodation in order to comply with Program requirements

Tenant Certification

I understand what constitutes fraud as defined by the Marquette Housing Commission. MHC staff has discussed this form with me and elaborated on the types of fraud and how it relates to assisted housing programs. A copy of this document has been provided to me for my records.

Printed Name of Head of Household

Signature

Date

Signature- Other Adult in Household

Date

FACT SHEET

“How Your Rent Is Determined”

For Public Housing And Housing Choice Voucher Programs

Office of Public and Indian Housing

November, 2002

This Fact Sheet is a general guide to inform the Public Housing Agency (PHA) and HUD-assisted residents of the responsibilities and rights regarding income disclosure and verification. Since some of the requirements vary by program, residents should consult their PHA to determine the specific policies that apply.

Why Determining Income and Family Payment Correctly is Important

The Department of Housing and Urban Development's studies show that many resident families pay the incorrect amount of rent. The main causes of this problem are:

- under-reporting of income by resident families, and
- PHAs not granting exclusions and deductions to which resident families are entitled.

PHAs and residents all have a responsibility in ensuring that the correct family payment is paid. Paying the correct amount eliminates fraud, waste, and abuse.

PHAs' Responsibilities:

- Obtain accurate income information
- Verify residents' income
- Ensure that residents receive the exclusions and deductions to which they are entitled
- Accurately calculate family payment
- Recalculate family payment when changes in family composition and income are reported between annual recertifications (in accordance with PHA policy)
- In Public Housing, execute a lease with the tenant
- In the Housing Choice Voucher program, provide a copy of the required lease language
- Provide tenant a copy of PHA determination of income and family payment
- Provide information on PHA policies upon request
- Notify residents of any changes in requirements or practices for reporting income or determining family payment
- Terminate tenancy for grounds allowed by federal law

Residents' Responsibilities:

- Provide accurate information on family composition
- Report all income at admission and annually (or as required by PHA policy)
- Keep copies of papers, forms, and receipts which document income and expenses
- Report changes in family composition and income between annual recertifications (in accordance with Public Housing and Housing Choice Voucher PHA policy)
- Sign consent for income verification and criminal history checks
- Comply with lease and House Rules

What is Total Income?

A family's income before any taxes or other exclusions or deductions have been taken out of it.

What is Annual Income?

Total Income – Income Exclusions = Annual Income

What is Adjusted Income?

Annual Income – Allowable Income Deductions = Adjusted Income

Family Payment (Total Tenant Payment)

The amount of rent a family will pay is the highest of the following amounts:

- 30% of the family's monthly adjusted income;
- 10% of the family's monthly income;
- Welfare rent (in States where applicable); or
- Minimum Rent (\$0 - \$50 set by the PHA)

Annualization of Income

If it is not feasible to anticipate a level of income over a 12-month period (as in the case of seasonal or cyclic income), or the PHA believes that past income is the best available indicator of expected future income, the PHA may annualize the income anticipated for a shorter period, subject to a re-determination at the end of the shorter period.

What Counts as Annual Income for Calculation of Family Payment?

Annual income means all amounts, monetary or not, which:

- Go to, or on behalf of, the family head of household or spouse (even if temporarily absent) or to any other family member; or
- Are anticipated to be received from a source outside the family during the 12-month period following admission or annual reexamination effective date; and
- Which are not specifically excluded.
- Annual income also means amounts derived (during the 12-month period) from assets to which any member of the family has access.

Annual income includes, but is not limited to:

- The full amount, before any payroll deductions of wages and salaries, overtime pay, Commissions, fees, tips and bonuses, and other compensation for personal services;
- The net income from the operation of a business or profession. Expenditures for business expansion or amortization of capital indebtedness shall not be used as deductions in determining net income. An allowance for depreciation of assets used in a business or profession may be deducted, based on straight line depreciation, as provided in Internal Revenue Service regulations. Any withdrawal of cash or assets from the operation of a business or profession will be included in income, except to the extent the withdrawal is

reimbursement of cash or assets invested in the operation by the family;

- Interest, dividends, and other net income of any kind from real or personal property. Expenditures for amortization of capital indebtedness shall not be used as deductions in determining net income. An allowance for depreciation is permitted only as authorized in above section. Any withdrawal of cash or assets from an investment will be included in income, except to the extent the withdrawal is reimbursement of cash or assets invested by the family. Where the family has net family assets in excess of \$5,000, annual income shall include the greater of the actual income derived from all net family assets or a percentage of the value of such assets based on the current passbook savings rate, as determined by HUD;
- The full amount of periodic amounts received from Social Security, annuities, insurance policies, retirement funds, pensions, disability or death benefits, and other similar types of periodic receipts, including a lump-sum amount or prospective monthly amounts for the delayed start of a periodic amount.
- Payments in place of earnings, such as unemployment and disability compensation, worker's compensation and severance pay.
- Welfare assistance. If the welfare assistance payment includes an amount specifically designated for shelter and utilities that is subject to adjustment by the welfare assistance agency in accordance with the actual cost of shelter and utilities, the amount of welfare assistance income to be included as income shall consist of: (i) the amount of the allowance or grant exclusive of the amount specifically designated for shelter or utilities; plus (ii) the maximum amount that the welfare assistance agency could in fact allow the family for shelter and utilities.
- Periodic and determinable allowances, such as Alimony and child support payments, and regular contributions or gifts received from organizations or from persons not residing in the dwelling;
- All regular pay, special pay and allowances of a member of the Armed Forces.

Annual income does not include the following:

- Income from employment of children (including foster children) under the age of 18 years;
- Payments received for the care of foster children or foster adults (usually persons with disabilities, unrelated to the tenant family, who are unable to live alone);
- Lump-sum additions to family assets, such as inheritances, insurance payments (including payments under health and accident insurance and worker's compensation), capital gains and settlement for personal or property losses.
- Amounts received by the family that are specifically for, or in reimbursement of, the cost of medical expenses for any family member;
- Income of a live-in aide, as defined in §5.403;
- The full amount of student financial assistance paid directly to the student or to the educational institution;
- The special pay to a family member serving in the Armed Forces who is exposed to hostile fire;
- Amounts received under training programs funded by HUD;
- Amounts received by a person with a disability that are disregarded for a limited time purposes of Supplemental Security Income eligibility and benefits because they are set aside for use under a Plan to Attain Self-Sufficiency (PASS);
- Amounts received by a participant in other publicly assisted programs which are specifically for or in reimbursement of out-of-pocket expenses incurred (special equipment, clothing, transportation, child care, etc.) and which are made solely to allow participation in a specific program;
- Amounts received under a resident service stipend. A resident service stipend is a modest amount (not to exceed \$200 per month) received by a resident for performing a service for the PHA or owner, on a part-time basis, that enhances the quality of life in the development. Such services may include, but are not limited to, fire patrol, hall monitoring, lawn maintenance, resident initiatives coordination, and serving as a member of the PHA's governing board. No resident may receive more than one such stipend during the same period of time;
- Incremental earnings and benefits resulting to any family member from participation in quality State or local employment training

programs (including training programs not affiliated with a local government) and training of a family member as resident management staff. Amounts excluded by this provision must be received under employment training programs with clearly defined goals and objectives, and are excluded only for the period during which the family member participates in the employment training program;

- Temporary, nonrecurring or sporadic income (including gifts);
- Reparation payments paid by a foreign government pursuant to claims filed under the laws of that government by persons who were persecuted during the Nazi era;
- Earnings in excess of \$480 for each full-time student 18 years old or older (excluding the head of household and spouse);
- Adoption assistance payments in excess of \$480 per adopted child;
- Deferred periodic amounts from supplemental security benefits that are received in a lump sum amount or in prospective monthly amounts.
- Amounts received by the family in the form of refund or rebates under State or local law for property taxes paid on the dwelling unit;
- Amounts paid by a State agency to a family with a member who has a development disability and is living at home to offset the cost of services and equipment needed to keep the developmentally disabled family member at home; or
- Amounts specifically excluded by any other Federal statute from consideration as income for purposes of determining eligibility or benefits under a category of assistance programs that includes assistance under any program to which the exclusions are set forth.

Other Income Exclusions

**Federally Mandated Income Exclusions –
The following statutory exclusions apply to HUD-assisted and other government programs:**

- The value of the allotment provided under the Food Stamp Act of 1977.
- Payments to volunteers under the Domestic Volunteer Services Act of 1973
- Payments received under the Alaska Native Claims Settlement Act (cash including cash dividends on stock received from a Native Corporation and on bonds received from a Native

- Corporation to the extent that it does not in the aggregate exceed \$2,000 per individual per year)
- Income derived from certain submarginal land of the United States that is held in trust for certain Indian tribes
- Income Home Energy Assistance Program
- Payments received under programs funded under the Job Training Partnership Act (Workforce Investment Act of 1998)
- Income derived from the disposition of funds to the Grand River Band of Ottawa Indians. The first \$2,000 of per capita shares received from judgment funds awarded by the Indian Claims Commission or the U.S. Claims Court, the interests of individual Indians in trust or restricted lands, including the first \$2,000 per year of income received by individual Indians from funds derived from interests held in trust or restricted lands
- Amounts of scholarships funded under Title IV of the Higher Education Act of 1965 (including Federal Work Study program or Bureau of Indian Affairs (BIA) Student Assistance programs)
- Payments received from programs funded under Title V of the Older Americans Act of 1985
- Payments received on or after January 1, 1989, from the Agent Orange Settlement Fund or any other fund established pursuant to the settlement in Re Agent-product liability
- Payments received under the Maine Indian Claims Settlement Act of 1980
- The value of any child care provided or arranged under the Child Care and Development Block Grant Act of 1990
- Earned income tax credit (EITC) refund payments received on or after January 1, 1991
- Payments by the Indian Claims Commission to the Confederated Tribes and Bands of Yakima Indian Nation or the Apache Tribe of Mescalero Reservation
- Allowances, earnings and payments to AmeriCorps participants under the National and Community Service Act of 1990
- Any allowance paid to a child suffering from spina bifida who is the child of a Vietnam veteran
- Any amount of crime victim compensation under the Victims of Crime Act

- Allowances, earnings and payments to individuals participating in programs under the Workforce Investment Act of 1998

Earned Income Disallowance for certain Public Housing Residents and Housing Choice Voucher Family members with Disabilities

Certain amounts will not be counted in determining a qualifying family's rent for a specific period of time. A qualifying family is one whose annual income increases as a result of:

- Employment of a family member who was unemployed for at least 12 months prior to employment;
- New or increased earnings during participation in an economic self-sufficiency or other job training program;
- New or increased earnings during or within 6 months after receiving Temporary Assistance to Needy Families (TANF).

During the first 12 months after a qualified family member starts working, 100 percent of the incremental increase of that family member's income is disallowed. The incremental increase is the amount of earned income that exceeds that family member's income prior to starting work.

In the second cumulative 12-month period after the date of first employment, 50 percent of the incremental increase in income is disallowed. Total time of benefit is limited to a lifetime 48-month period.

NOTE: For Public Housing Only, PHAs may offer to establish Individual Saving Accounts (ISA) for eligible families in place of the earned income disallowance. If offered, the family makes the choice whether or not to participate.

What are deductions from income?

Deductions are amounts that are subtracted from a family's Annual Income to produce Adjusted Income. There are two types of deductions: mandatory and permissive.

Mandatory Deductions:

- \$480 for each member of the family (excluding head of household or spouse) who is less than 18 years of age or who is a student or person with a disability
- \$400 for any elderly family or disabled family
- The sum of the following to the extent the sum exceeds 3% of annual family income:
 - Unreimbursed medical expenses of any elderly family or disabled family
 - Unreimbursed reasonable attendant care and auxiliary apparatus expenses for disabled family member(s) to allow family member(s) to work. This deduction may not exceed the income received.
- Any reasonable childcare expenses (children under 13 years old) necessary to enable a member of the family to be employed or to further his or her education.

Permissive Deductions (Public Housing Only):

PHAs may establish other deductions as they wish but should understand that HUD **does not** provide any additional operating subsidy and the PHA must establish a written policy for the deductions.

Other Provisions

Hardship Exceptions: PHAs must waive the minimum monthly rent requirement for any family unable to pay due to financial hardships as described in the PHA's written policies.

HUD has specified some circumstances that would constitute hardship which are:

- Switch from flat rent to income-based rent because of hardship.
- A family that is paying a flat rent may at any time request a switch to payment of income-based rent (before the next annual option to select the type of rent) if the family is unable to pay flat rent because of financial hardship. The PHA must adopt written policies for determining when payment of flat rent is a financial hardship for the family.
- If the PHA determines that the family is unable to pay the flat rent because of financial hardship, the PHA must immediately allow the requested switch to income-based rent. The

PHA shall make the determination within a reasonable time after the family request.

- The PHA's policies for determining when payment of a flat rent is a financial hardship must provide that financial hardship include the following situation.
- The family has experienced a decrease in income because of changed circumstances including loss or reduction of employment, death in the family, or reduction in or loss of earnings or other assistance;
- The family has experienced an increase in expenses, because of changed circumstances, for medical costs, child care, transportation, education, or similar items; and
- Such other situations determined by the PHA to be appropriate.

Maximum Initial Rent Burden (Housing Choice Voucher Only):

The family's share may not exceed 40% of the family's monthly adjusted income when the family initially moves into the unit or signs the first assisted lease for a unit. The maximum initial rent burden applies only when the gross rent for the unit selected exceeds the applicable payment standard.

Flat Rent (Public Housing Only): Annually at recertification families must be offered a choice of a flat rent or an income-based rent. If a family elects to pay a flat rent a PHA can (if desired) recertify family income as infrequent as every three (3) years instead of annually. Family composition must be recertified annually. Flat rent is based on the market rent charged for comparable units in the private unassisted rental market and will not increase or decrease as changes in income occur. A family can request a switch to an income-based rent at any time due to a financial hardship.

Welfare Sanctions: If the welfare agency reduces the welfare payment because of fraud of a family member in connection with the welfare program or non-compliance with economic self-sufficiency requirements, the PHA must still include the amount of the reduction in the Annual Income that is used to calculate total tenant payment.

Reference Materials

Legislation:

- United States Housing Act of 1937, 42 USC 1437, et seq. as amended

Regulations:

- General HUD Program Requirements; Waivers, 24 CFR Part 5
- Admissions to, and Occupancy of, Public Housing, 24 CFR Part 960
- Section 8 Tenant-Based Assistance: Housing Choice Voucher Program, 24 CFR Part 982
- Determining Adjusted Income in HUD Programs Serving Persons with Disabilities: Requiring Mandatory Deductions for Certain Expenses; and Disallowance for Earned Income, 66 FR 6218, issued January 19, 2001; 24 CFR Parts 5, 92, et al. (effective April 20, 2001)

Notices:

- “Federally Mandated Income Exclusions” Notice 66 FR 4669, April 20, 2001
- “Improving Income Integrity in Public and Assisted Housing” Notice PIH 2001-15, issued May 2, 2001
- Frequently Asked Questions about the Admissions and Occupancy Rule:
http://www.hud.gov/offices/pih/phr/about/ao_faq2.cfm#2c

For Additional Information:

Contact your Public Housing Authority (PHA) in your area. In addition, you can find information about HUD's programs on HUD's Internet homepage at <http://www.hud.gov> or call the Public and Indian Housing Information Resource Center at 1-800-955-2232.

PINE RIDGE APARTMENTS
316 PINE STREET
MARQUETTE, MI 49855
906-226-7559
906-226-8633 (FAX)



LAKE SUPERIOR VILLAGE
125 DOBSON PLACE
MARQUETTE, MI 49855
906-225-1900
906-225-0503 (FAX)

Statement of Family Responsibilities Section 8/HCV Program

When you participate in the Section 8 Program, you take on a number of responsibilities. The Marquette Housing Commission acts as an agent for the United States Department of Housing and Urban Development, operating this program under its rules and regulations.

Some of your most important responsibilities include complying with the following rules. If fail to comply with these rules of the Section 8 Voucher Program you will be terminated from the program.

1. You must provide complete and accurate information about your household composition, income and assets.
2. You must notify the Marquette Housing Commission of any changes in your household income within (10) days of any change. You must notify us immediately if you begin or end employment. You must inform MHC immediately of any additional member(s) in your household that have not been reported.
3. You must provide complete and honest information about rental agreements that you make with your landlord. You may not make rental payments to your landlord for more than the amount authorized in the Section 8 Contract Agreement and you may not make any agreements that are illegal or violate federal regulations for this program.
4. You must abide by the terms of your lease. This includes paying your rent portion on time and not damaging your apartment or causing it to become unsanitary. If you owe your landlord rent or damages your landlord can evict you and your Voucher subsidy will be terminated.
5. Marquette Housing Commission will not make any payments to landlords for a dwelling unit that fails to meet Housing Quality Standards Inspections, unless the owner corrects the defect within the period specified by the MHC. If a unit fails to pass after 30 days of initial inspection date your Voucher will be terminated for tenant defects, for owner defects that are not corrected within 30 days tenant will have to move to another passable unit.
6. You must give 30 days written notice to the landlord and the Housing Commission if you plan to move, failure to provide this information will result in termination from the program.
7. The members of the family must not commit fraud, bribery, or any other corrupt or criminal act in connection with subsidized housing programs. If fraud is found the participant contribution should have been greater than the calculated, rent will be charged retroactively and the participant will be required to reimburse the MHC for their overpayment of the HAP (Housing Assistance Payment.)
8. All rules and regulations on your HUD issued Voucher must be followed at all times under the Marquette Housing Commission.

Print Name

Signature

Date

SS and SSI benefit information reported in EIV originates from the SSA. If a participant of a HUD rental assistance program disputes this information, s/he should contact the SSA at (800) 772-1213, or visit your local SSA office to obtain a current benefit verification letter. SSA office information is available in the government pages of your local telephone directory or you may visit their website at: www.socialsecurity.gov.

Debts owed to PHAs and termination information reported in EIV originates from your former PHA. If a current or former participant of a HUD rental assistance program disputes this information, he or she should contact the PHA directly in writing to dispute this information and provide any documentation that supports the dispute. If the PHA determines that the disputed information is incorrect, the PHA will update or delete the record from EIV.

Identity Theft. Seemingly incorrect EIV information may be a sign of identity theft. Sometimes more than one person may use your SSN, either on purpose or by accident. So, if you suspect someone is using your SSN, you should check your Social Security records to ensure your income is calculated correctly (call SSA at 1-800-772-1213); file an identity theft complaint with the Federal Trade Commission (call FTC at 1-877-438-4338, or you may visit their website at: <http://www.ftc.gov>).

Additional Verification. If you dispute EIV information, the PHA, with your consent, may submit a third party verification form to the provider of your income for completion and submission to the PHA. You may also provide the PHA with third party documents which you may have in your possession.

Where can I obtain more information on EIV and the income verification process?
Your PHA can provide you with additional information on EIV and the income verification process.

You may also read more about EIV and the income verification process on HUD's Public and Indian Housing EIV web pages at: <http://www.hud.gov/offices/dhif/programs/sph/rhip/uliv.cfm>.

The information in this brochure pertains to applicants and participants (tenants) of the following HUD-PH rental assistance programs:

1. Public Housing (24 CFR 960); and
2. Section 8 Housing Choice Voucher (HCV), including Disaster Housing Assistance Program (DHAP) (24 CFR 982); and
3. Section 8 Moderate Rehabilitation (24 CFR 882); and
4. Project-Based Voucher (24 CFR 983)

This brochure was provided to you by the below-listed PHA:

I hereby acknowledge that I received a copy of this brochure from the PHA and that I have read this brochure.

Check here if you do not understand the content of the brochure and you will consult with your local Legal Aid office for assistance.

Signature _____

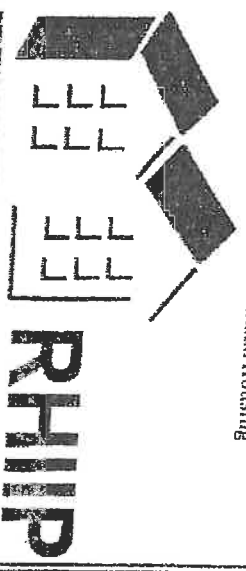
Printed Name _____

Date: _____

January 25, 2010



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



RENTAL HOUSING INTEGRITY IMPROVEMENT PROJECT

What You Should Know About EIV

A Guide for Applicants & Tenants of Public Housing & Section 8 Programs

What is EIV?
The Enterprise Income Verification (EIV) system is a web-based computer system, which contains employment, wage, unemployment compensation, Social Security (SS), and Supplemental Security Income (SSI) information of individuals (including you) who participate in HUD rental assistance programs. All Public Housing Agencies (PHAs) are required to use HUD's EIV system.

Where does the information in EIV come from?
HUD obtains information about you from your local PHA, the Social Security Administration (SSA), and the U.S. Department of Health and Human Services (HHS).

Additional Information in EIV

Debts Owed to PHAs & Termination Information. HUD maintains a national repository of unpaid debts to PHAs and a family's negative status when a family voluntarily or involuntarily ends participation in the Public Housing or Section 8 program. If you have an unpaid debt or negative status when you vacated a subsidized unit in the past, this information is available to all PHAs nationwide and may result in the denial of your request for future HUD rental assistance.

Multiple Rental Subsidies. Data (household member names and address at which you receive assistance) collected from your local PHA is compared to HUD's various data systems to determine if you are receiving and/or participating in more than one HUD rental assistance program. If you are receiving multiple rental assistance, EIV will display the address of each subsidized unit you are listed as a resident. Remember, you may receive rental assistance at only one home!

What is the EIV information used for?

Primarily, the information is used by PHAs (and management agents hired by the PHA) after your admission to the program, and before, during, or after all interim and annual reexamination of family income for the following purposes:

1. Verifying your reported income sources and amounts.
2. Confirming your name, DOB, and SSN with SSA.
3. Confirming your participation in only one HUD rental assistance program, prior to admission.
4. Following up with you, other adult household members, or your listed emergency contact regarding deceased household members.

EIV will alert your PHA if you or anyone in your household has used a false SSN, failed to report complete and accurate income information, or is receiving rental assistance at another address

EIV will also alert PHAs if you owe an outstanding debt to any PHA (in any state or U.S. territory) and any negative status when you voluntarily or involuntarily moved out of a subsidized unit under the Public Housing or Section 8 program. This information is used to determine your eligibility for rental assistance at the time of application.

The information in EIV is also used by HUD, HUD's Office of Inspector General (OIG), PHAs, and auditors to monitor compliance with HUD rules by your family and the PHA.

Is my consent required in order for information to be obtained about me?

Yes, your consent is required in order for HUD or the PHA to obtain information about you. By law, you're required to sign one or more consent forms. When you sign a form HUD-9886 (*Federal Privacy Act Notice and Authorization for Release of Information*) or a PHA consent form (which meets HUD standards), you are giving HUD and the PHA your consent for them to obtain information about you for the purpose of determining your eligibility and amount of rental assistance. The information collected about you will be used only to determine your eligibility for the program, unless you consent in writing to authorize additional uses of the information by your PHA.

Note: If you or your adult household members refuse to sign a consent form, your request for initial or continued rental assistance may be denied. You may also be terminated from the HUD rental assistance program.

What are my responsibilities?

As a tenant (participant) of a HUD rental assistance program, you and each adult household member must disclose complete and accurate information to the PHA, including full name, SSN, and DOB, income information, and certify that your reported household income and expense information is true to the best of your knowledge.

What are the penalties for providing false information?

Knowingly providing false, inaccurate, or incomplete information is **FRAUD** and a **CRIME**, whether you are convicted or not.

If you commit fraud, you and your family may be subject to the following penalties: repayment of rent that you should have paid, had you reported your income and household information correctly, eviction, termination of assistance, prohibited from receiving any future rental assistance for a period of up to 10 years, prosecution by your local or state prosecutor or Federal prosecutor, which may result in you being fined of up to \$10,000 and/or serving time in jail.

Note: You may not be able to receive rental assistance in the future if you fail to enter into a repayment agreement for amounts owed to the PHA or you default on a repayment agreement.

Protect yourself, follow HUD reporting requirements

When completing applications and reexaminations, you must include all sources of income you or any member of your household receives.

If you have any questions on whether money received should be counted as income or how your rent is determined, ask your PHA. When changes occur in your household income contact your PHA immediately to determine if this will affect your rental assistance.

What do I do if the EIV information is incorrect?

Sometimes the source or originator of EIV information may make an error when submitting or reporting information about you. If you do not agree with the EIV information, with the exception of debt and termination and S/SSI information, your PHA will contact the source of the information directly to verify the disputed information. Below are the procedures you and the PHA should follow regarding other incorrect EIV information.

PINE RIDGE APARTMENTS
 316 PINE STREET
 MARQUETTE, MI 49855
 906-226-7559
 906-226-8633 (FAX)



LAKE SUPERIOR VILLAGE
 125 DOBSON PLACE
 MARQUETTE, MI 49855
 906-225-1900
 906-225-0503 (FAX)

Income/Asset Questionnaire

E-mail Address: _____

Phone Number: _____

List all Household Members:

| Household Member | Relation-ship to Head of House | Sex | Birth Date | Disabled |
|------------------|--------------------------------|-----|------------|----------|
| | | | | |
| | | | | |
| | | | | |
| | | | | |

Income, Asset, and Deductions – Pleas answer all questions

| A. Income: | Yes | No |
|--|-----|----|
| Are you or any other members of the household currently receiving income from any of the following sources? **Please bring in verification of income. | | |
| Employment/Self-Employment (**You must bring in 2 recent paystubs.) Job #1 _____ Phone _____ Tenant _____ Job #2 _____ Phone _____ Tenant _____ | | |
| Tips, bonuses or commissions, or overtime pay | | |
| Social Security Monthly Amount _____ | | |
| Social Security Disability/SSI Monthly Amount _____ | | |
| Unemployment Weekly Amount _____ State _____ | | |
| Public Assistance/Cash Assistance/State Aid (Food Stamps, State Disability, etc.) Cash Amount _____ Food Amount _____ Caseworker _____ | | |
| Child Support Monthly Amount _____ County/State _____ | | |
| Scholarships or Educational Grants | | |
| Tribal Per Capita Payments | | |
| Child Care Reimbursement (children 13 and under) | | |
| Military Pay | | |
| Workman's Compensation | | |
| Pensions/Retirement Funds | | |
| Alimony | | |
| Wages earned through a government program such as Senior Aides or AmeriCorps. If yes, which program? | | |
| Have you or any other members of the household received any lump sum payments, such as: Inheritance _____ | | |

| A. Income: | Yes | No |
|--|------------|-----------|
| Lottery Winnings _____ | | |
| Insurance Settlements _____ | | |
| Other _____ | | |
| Regular Recurring Contributions from Persons or Agencies/outside of household | | |
| Death Benefits | | |
| Income from Rent or Sale of Property | | |
| Annuities or Non-Revocable Trust | | |
| Severance Pay | | |
| Zero Income (No source of income) | | |
| Did you or any other members of the household file a federal tax return last year? | | |
| Are there any adult members of the household (18 years of age or older) receiving income not listed above? Please Specify _____ | | |
| Is your family receiving any type of family contribution or help with bills from family members? If yes, please specify _____ | | |

| B. Assets: | Yes | No |
|---|------------|-----------|
| Do you or any other members of the household have any of the following: | | |
| Checking Accounts Bank _____ | | |
| Savings Accounts Bank _____ | | |
| Certificates of Deposit | | |
| Money Market Funds | | |
| IRA/Keogh Account | | |
| Stocks | | |
| Trust Funds | | |
| If yes, is the Trust irrevocable? | | |
| Real Estate | | |
| Whole Life or Universal Life Insurance Policy | | |
| Have you or any other household members disposed of any asset(s) for less than fair market value in the past two (2) years? If yes, please list: _____ | | |
| Do you or any other household members have any assets that are held jointly with another person? | | |
| Other (Please List): _____ | | |

| C. Deductions: | Yes | No |
|---|------------|-----------|
| Are there any fulltime students 18 years of age or older in the household? | | |
| Is any household member elderly (age 62 or older) or a person with disabilities? | | |
| Do you have medical expenses that are not paid for by an outside source such as insurance? (Prescriptions, Doctor Appointments, Medical Treatments) Pharmacy _____ Physician _____ | a. | b. |
| Do you have disability expenses that are not paid for by an outside source? | | |
| If yes, is this service necessary to enable a family member (including the member with a disability) to be employed? | | |
| Do you have attendant care expenses? | | |
| If yes, is this service necessary to enable a family member (including the member with a disability) to be employed? | | |
| Do you currently pay for childcare services for any children under the age of 13 residing in your household? Provider _____ Phone _____ | | |
| If yes, is this service necessary in order for you to be employed or to attend school? | | |

| D. Eligibility: | Yes | No |
|------------------------|------------|-----------|
|------------------------|------------|-----------|

| D. Eligibility: | Yes | No |
|--|------------|-----------|
| I have a family member who is absent from the home due to: | | |
| Employment | | |
| Military Service | | |
| Placement in Foster Care | | |
| Temporarily in Nursing Home or Hospital | | |
| Away at School | | |
| Other: _____ | | |
| Are there any sex offenders in your household? | | |
| Expected changes in household: | | |
| Birth of a child (Please provide due date): _____ | | |
| Adopting a Child(ren) on: _____ | | |
| Obtaining Custody of a Child(ren) on: _____ | | |
| Obtaining Joint Custody of a Child(ren) on: _____ | | |
| Receiving a Foster Child(ren) on: _____ | | |

E. Certification – Please Read – Very Important!

I certify that the above information is a complete and true statement of family composition, income, employment, and assets to the best of my knowledge and belief. I know that I am required to cooperate in supplying all information needed to determine my eligibility, level of benefits, or verify my true circumstances. I have no objections to inquiries being made for purpose of verification. I know I am required to report immediately in writing all changes in income and any changes in the household size, when a person moves in or out of the unit. I understand the rules regarding guests/visitors and when I must report anyone who is staying with me. I certify the house or apartment will be my principle residence and that I will not obtain duplicate Federal housing assistance while I am in this current program. I will not sublease my assisted residence. I understand that knowingly supplying false, incomplete, or inaccurate information is punishable under Federal or State law. I understand that knowingly supplying false, incomplete, or inaccurate information is grounds for termination of housing assistance.

Print Name Head of Household

Signature of Head of Household Date

Print Name Co-Head

Signature of Spouse/Co-Head Date

Print Name Other Family Member Over Age 18

Signature of Other Family Member Over Age 18 Date

Guidelines for Section 8 Voucher Portability

You must receive assistance for one year before guidelines apply.

DEFINITIONS:

The Public Housing Authority that issued a voucher to you is the *INITIAL PHA*.

The Public Housing Authority that is in the area that you wish to move is the *RECEIVING PHA*.

Instructions:

1. You must notify the *INITIAL PHA* that you want to move and you must provide the name of area to which you want to move to the *INITIAL PHA IN WRITING*.
2. You must give the *INITIAL PHA* and your landlord 30 days notice that you intend to move.
3. The *INITIAL PHA* will notify the *RECEIVING PHA* that you will be moving to their jurisdiction.
4. You must report to the *RECEIVING PHA* within the time period indicated on your voucher. The *RECEIVING PHA* may want to issue one of their vouchers to you. If this happens, your voucher with the *INITIAL PHA* will be cancelled.
5. If you do not report to the *RECEIVING PHA* by the date specified on your voucher, your voucher will be cancelled.
6. The *RECEIVING PHA* will be responsible for performing all of the functions with the providing assistance, including inspections of your apartment, providing lease up paperwork and annual recertification of your income.
7. The *RECEIVING PHA* will notify the *INITIAL PHA* if any program violations occur.
8. It is your responsibility to follow program regulations so your assistance can be continued.
9. The Marquette Housing Commission will not approve portability to another jurisdiction unless the Payment standard either matches or is lower then the Marquette Housing Commission's current payment standard.

INITIAL PHA

Marquette Housing Commission
316 Pine Street
Marquette, MI 49855
(906) 226-7559

SIGNATURE

DATE

6/16/2015 SH

Disclosure of Information on Lead-Based Paint and/or Lead-Based Paint Hazards

Lead Warning Statement

Housing built before 1978 may contain lead-based paint. Lead from paint, paint chips, and dust can pose health hazards if not managed properly. Lead exposure is especially harmful to young children and pregnant women. Before renting pre-1978 housing, lessors must disclose the presence of known lead-based paint and/or lead-based paint hazards in the dwelling. Lessees must also receive a federally approved pamphlet on lead poisoning prevention.

Lessor's Disclosure

(a) Presence of lead-based paint and/or lead-based paint hazards (check (i) or (ii) below):

(i) _____ Known lead-based paint and/or lead-based paint hazards are present in the housing (explain).

(ii) _____ Lessor has no knowledge of lead-based paint and/or lead-based paint hazards in the housing.

(b) Records and reports available to the lessor (check (i) or (ii) below):

(i) _____ Lessor has provided the lessee with all available records and reports pertaining to lead-based paint and/or lead-based paint hazards in the housing (list documents below).

(ii) _____ Lessor has no reports or records pertaining to lead-based paint and/or lead-based paint hazards in the housing.

Lessee's Acknowledgment (initial)

(c) _____ Lessee has received copies of all information listed above.

(d) _____ Lessee has received the pamphlet *Protect Your Family from Lead in Your Home*.

Agent's Acknowledgment (initial)

(e) _____ Agent has informed the lessor of the lessor's obligations under 42 U.S.C. 4852d and is aware of his/her responsibility to ensure compliance.

Certification of Accuracy

The following parties have reviewed the information above and certify, to the best of their knowledge, that the information they have provided is true and accurate.

| | | | |
|-----------------|---------------|-----------------|---------------|
| _____ Lessor | _____ Date | _____ Lessor | _____ Date |
| _____ Lessee | _____ Date | _____ Lessee | _____ Date |
| _____ Agent | _____ Date | _____ Agent | _____ Date |

