



## Housing and Neighborhood Development Service

7 East 7th Street Erie, PA 16501-1105

Phone: 814.453.3333 Fax: 814.456.0922

www.hands-erie.org

Office Use Only:  
Date Stamp of Date Received:

Time Received: \_\_\_\_\_

Receiver's Initials \_\_\_\_\_

PLEASE **PRINT** ALL NECESSARY INFORMATION

**INCOMPLETE APPLICATIONS CANNOT BE PROCESSED**

## Application for Senior Housing Opportunities within Erie County

**All of our housing communities are SMOKE FREE and PET FRIENDLY.**

APPLICATION INSTRUCTIONS: Only completed applications can be processed. Review the eight (8) housing opportunities listed on this and the following pages to determine which property or properties you may qualify for housing. Check the box next to the properties that you wish to apply.

All properties listed are smoke-free and pet friendly. One small pet is permitted with written approval and a \$300 pet deposit.

☐

**Chestnut Street Apartments**



**Please select number of bedrooms required**

☐

1 Bedroom

☐

2 Bedroom

Chestnut Street Apartments are located off of Avonia Road in Fairview at 7554 Chestnut Street and offers 1 and 2-bedroom apartments. Current rent amounts range from \$419 - \$502 per month plus utilities for a 1-Bedroom, and \$569 per month plus utilities for a 2-bedroom. Each apartment is equipped with central air and also comes with appliances and window treatments. There is an on-site laundry facility. All applicants must be age 62 or older to qualify. Applicants must fall within the income requirements as follows:

Minimum monthly income: Households must earn at least \$1,048 per month to qualify for a 1-bedroom and at least \$1,423 per month to qualify for a 2-bedroom home. Minimum requirements do not apply to persons with a Section 8 Housing Choice Voucher.

Maximum Annual income:

1 Person - \$31,500 | 2 Person - \$36,000 | 3 Person - \$40,500 | 4 Person - \$44,000

**Highland Village****Please select number of bedrooms required**☐

1 Bedroom

☐

2 Bedroom

Highland Village is located off of Route 6N in Edinboro on YMCA Drive.

This community offers 1 and 2-bedroom apartments. Each apartment is equipped with central air and also comes with appliances and window treatments. There is also an on-site laundry facility. All applicants must be age 55 or older to qualify. Current rent for a 1-bedroom apartments is \$618 per month. There are two, 1-bedroom apartments with monthly rent of \$259. Current rents for 2-bedroom apartments are between \$774 and \$798 per month. There are two, 2-bedroom apartments with monthly rent of \$311. Utilities are included in all rents. Applicants must fall within the income requirements as follows:

Minimum monthly income: Households must earn at least \$1,545 per month to qualify for a 1-bedroom apartment and \$1,935 per month to qualify for a 2-bedroom apartment. For a 1-bedroom with \$259 rent, households must earn at least \$648 per month to qualify and for a 2-bedroom with \$311 rent households must earn at least \$778 per month to qualify.

Maximum Annual Income for 1-bedrooms with rent at \$259 and 2-bedrooms with rent at \$311:

1 Person - \$9,520 | 2 Person - \$10,880 | 3 Person - \$12,240 | 4 Person - \$13,600

Maximum Annual Income for all other units:

1 Person - 1 Person - \$31,500 | 2 Person - \$36,000 | 3 Person - \$40,500 | 4 Person - \$45,000

**Maryvale Apartments****Please select number of bedrooms required**

1 Bedroom units only

The Maryvale Apartments are located on the Villa Maria Campus on West 8<sup>th</sup> Street in Millcreek.

This property offers 1-bedroom apartments with rents subsidized by HUD. The amount of rent paid is normally 30% of your current adjusted gross income. All utilities are included. Apartments come with air conditioning, appliances and window treatments. There is also a beauty shop on site for the residents. Head of household must be 62 years of age or older. Applicants' annual income must be below the following:

Maximum Annual income: 1 Person - \$26,250 | 2 Person - \$30,000

**Oak Haven Apartments****Please select number of bedrooms required**

1 Bedroom units only

Oak Haven Apartments are located in Waterford at 231 East 6<sup>th</sup> Street.

This property offers 1-bedroom apartments with rents subsidized by HUD. The amount of rent paid is normally 30% of you current adjusted gross income. All utilities are included. Apartments come with air conditioning, appliances and window treatments. Head of household must be 62 years of age or older. Applicants' annual income must be below the following:

Maximum Annual income: Person - \$26,250 | 2 Person - \$30,000

☐**Ridgebury Apartments****Please select number of bedrooms required**

1 Bedroom units only

Ridgebury Apartments are located at 5125 West Ridge Road in Millcreek.

Conveniently located near shopping and places of worship, Ridgebury Apartments offers 1-bedroom apartments with rents subsidized by HUD. There is an on-site laundry room, outdoor deck and a beautifully decorated community room. Rent is normally 30% of the current adjusted gross income. All utilities are included. Apartments come with air conditioning, appliances and window treatments. Head of household must be 62 years of age or older. Applicants' annual income must be below the following:

Maximum Annual income: Person - \$26,250 | 2 Person - \$30,000

☐**St. Francis Xavier Apartments****Please select number of bedrooms required**

1 Bedroom units only

Located at 8918 Main Street in McKean Township, St. Francis Xavier Apartments offers 22 1-bedroom apartments with rents subsidized by HUD. The amount of rent you pay is normally 30% of you current adjusted gross income. All utilities are included. Apartments come with air conditioning, appliances and window treatments. Head of household must be 62 years of age or older. Applicant's annual income must be below the following:

Maximum Annual income: Person - \$26,250 | 2 Person - \$30,000

☐**St. Joseph Apartments (Subsidized)****Please select number of bedrooms required**☐ 1 Bedroom☐ 2 Bedroom

1 and 2 bedroom apartments are offered at St. Joseph Apartments, located at 517 Maryland Avenue. With rents subsidized by HUD, rent is normally 30% of the current adjusted gross income. All utilities are included. Each apartment has air conditioning, appliances, and window treatments. St. Joseph Apartments has several community areas including a library, commons room and an on-site store for your basic grocery needs. Head of household must be 62 years of age or older. Applicants must fall within the income requirements as follows:

Maximum Annual income: 1 Person - \$42,000 | 2 Person - \$48,000

☐**St. Joseph Apartments (Not Subsidized)****Please select number of bedrooms required**☐

1 Bedroom

☐

2 Bedroom

St. Joseph Apartments, located at 517 Maryland Avenue, offers 1 and 2 bedroom unsubsidized apartments for Seniors age 62 and over. All utilities are included. Each apartment has air conditioning, appliances, and window treatments. St. Joseph Apartments has several community areas including a library, commons room and an on-site store for your basic grocery needs. Head of household must be 62 years of age or older. 1 Bedroom rents are \$650 and \$700 per month and the 2 bedroom monthly rents are \$730 per month. The household's annual income of the household must meet the following minimum income requirements:

Minimum monthly income: 1 Bedroom - \$1,610 | 2 Bedroom - \$1,802

☐**Villa Maria Apartments****Please select number of bedrooms required**☐

1 Bedroom

☐

2 Bedroom

The Villa Maria Apartments are located at 819 West 8<sup>th</sup> Street in Erie.

This pet friendly property offers 1 and 2-bedroom apartments. Current rent amounts range from \$559 - \$570 per month for a 1-Bedroom, and \$650 - \$662 per month for a 2-bedroom. All utilities are included. Each apartment is equipped with air conditioning and also comes with appliances and window treatments. There is an on-site laundry facility. Head of household must be age 55 or older to qualify. Applicants must fall within the income requirements as follows:

Minimum monthly income: Households must earn at least \$1,392 per month to qualify for a 1-bedroom and at least \$1,625 per month to qualify for a 2-bedroom home. Minimum requirements do not apply to persons with a Section 8 Housing Choice Voucher.

1 Person - \$31,500 | 2 Person - \$36,000 | 3 Person - \$40,500 | 4 Person - \$45,000

**If you require any additional information regarding the housing choices on this application, please call 814.453.3333.**

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**In addition to the Senior Housing provided on this application, HANDS also offers housing for Persons with Disabilities, Veterans and General Housing for individuals and families. If you would like more information on these housing opportunities, please call 814.453.3333 or visit our website at [www.hands-erie.org](http://www.hands-erie.org).**



For marketing purposes, please tell us how you heard about HANDS and/or the apartment community for which you are applying:

☐ Newspaper
 ☐ Agency Referral
 ☐ Resident Referral
 ☐ Friend/Relative
 ☐ Drive-By
 ☐ HANDS Website
 ☐ Senior News
 ☐ Facebook
 ☐ Craigslist.org
 ☐ Other Source (specify) \_\_\_\_\_

Applicant Name			Date of Birth		Social Security No.	
Last		First		MI		
Present Street Address		City		State		Zip Code
						How Long at Address?
Home Phone Number		Cell Phone Number			Email Address	
Former Street Address:		City		State		Zip Code
						How Long at Address?
Former Street Address:		City		State		Zip Code
						How Long at Address?
Former Street Address:		City		State		Zip Code
						How Long at Address?

PLEASE PROVIDE THE NAME, ADDRESS, AND PHONE NUMBER FOR ALL LANDLORDS FOR THE PAST 2 YEARS

Current Landlord Name:			Phone		
Address		City		State	
				Zip Code	
Previous Landlord Name:			Phone		
Address		City		State	
				Zip Code	
Previous Landlord Name:			Phone		
Address		City		State	
				Zip Code	

#### EMPLOYMENT INFORMATION

Name and Address of Employer		Type of Business		Self Employed?	
				<input type="checkbox"/> Yes <input type="checkbox"/> No	
Business Phone Number		Position/Title		Number of Year at Job	
				Yrs. In this line of work	
Name and Address of Employer		Type of Business		Self Employed?	
				<input type="checkbox"/> Yes <input type="checkbox"/> No	
Business Phone Number		Position/Title		Number of Year at Job	
				Yrs. In this line of work	

## CO-APPLICANT/SPOUSE INFORMATION

Co-Applicant Name			Date of Birth	Social Security No.	
Last	First	MI			
Present Street Address:	City	State	Zip Code	How Long at Address?	
Former Street Address:	City	State	Zip Code	How Long at Address?	
Former Street Address:	City	State	Zip Code	How Long at Address?	

PLEASE PROVIDE THE NAME, ADDRESS, AND PHONE NUMBER FOR ALL LANDLORDS FOR THE PAST 2 YEARS

Current Landlord Name:			Phone
Address	City	State	Zip Code
Previous Landlord Name:			Phone
Address	City	State	Zip Code
Previous Landlord Name:			Phone
Address	City	State	Zip Code

## CO-APPLICANT EMPLOYMENT INFORMATION

Name and Address of Employer		Type of Business	Self Employed?	
			<input type="checkbox"/> Yes <input type="checkbox"/> No	
Business Phone Number	Position/Title	Number of Year at Job	Yrs. In this line of work	

Please list EVERY state each applicant has resided in below:

Applicant Name	States Resided In

INCOME/ASSETS				
SOURCE	APPLICANT	CO-APPLICANT	Other Household -18 yrs of age or older:	TOTAL For MONTH
1. Gross Salary (before taxes)				
2. Overtime Pay				
3. Commissions/Fees/Tips/Bonuses				
4. Unemployment Benefits (gross amount)				
5. Workers Compensation				
6. <input type="checkbox"/> Social Security <input type="checkbox"/> Pensions <input type="checkbox"/> Retirement Please list GROSS AMOUNTS Per Month				
7. TANF Payments/Public Assistance Per Month				
8. Alimony, Child Support (please circle) Per Month				
9. Net Income From Business				
10. Net Rental Income (if you own property and rent it to others)				
11. Other:				
			TOTAL MONTHLY:	
			Total Monthly Income x 12 =	
ASSETS for <u>ALL</u> household members	CASH VALUE	INCOME FROM ASSETS	NAME & ADDRESS OF FINANCIAL INSTITUTION	
Checking Account	\$	\$		
Savings or Direct Express Card	\$	\$		
Certificate of Deposit (CDs)	\$	\$		
Mutual Funds/ Stocks / Bonds / Life Ins	\$	\$		
Real Estate - If you own your own home or have property	\$	\$		
Other:	\$	\$		
<b>TOTAL:</b>	\$	\$		

### HOUSEHOLD COMPOSITION

	FULL NAME  List the full names and related information for all people that will be living in the house or apartment for which you are applying.	Relationship to Head of Household	SEX	DATE of BIRTH MM/DD/YY	AGE	SOCIAL SECURITY NUMBER	1= White 2= Black or African America 3= American Indian or Alaskan 4= Native Hawaiian or Pacific Islander 5= Asian	1= Hispanic/Latino 2= Non-Hispanic /Non-Latino
Head		HEAD						
2								
3								
4								
5								
6								
7								
8								

### THE FOLLOWING QUESTIONS (1 – 11) MUST BE COMPLETED

- I/We ☐ have ☐ have not disposed of any asset(s) valued at \$1,000 or more in the past two years for less than the fair market value of the item. If yes, please list the asset value under the "other" row in the income/assets section of this application. Date of disposal \_\_\_\_\_
- Are you or any member of your household subject to a lifetime sex offender registration requirement in any state?  
Yes ☐ No ☐ If yes, list household member's name and states requiring registration. \_\_\_\_\_
- Have you or any member of your household ever been charged with or convicted of a crime (misdemeanor or felony) other than minor traffic violations? Yes ☐ No ☐  
If yes, please explain \_\_\_\_\_
- Are there any full or part-time students? Yes ☐ No ☐  
If yes, please list the name of students \_\_\_\_\_
- Do you own pets? ☐ Yes ☐ No If yes, What kind and how many? \_\_\_\_\_
- Has the family's tenancy in subsidized housing ever been terminated for fraud, nonpayment of rent or failure to cooperate with recertification procedures? ☐ Yes ☐ No
- Do you currently have a Section 8 Housing Choice or VASH Voucher? ☐ Yes ☐ No **If yes, Please attach a copy of your Voucher when submitting application**
- Are you currently receiving Section 8 or HUD Assistance where you live now? ☐ Yes ☐ No
- For Section 8 eligibility and allowance purposes, is there a disability you wish to claim? ☐ Yes ☐ No



10. Please list the name and telephone number of an additional person to contact in the event we are unable to reach you, e.g., a relative, caseworker, etc. ☐ None

Name \_\_\_\_\_ Phone Number \_\_\_\_\_

11. Are there any special housing needs or accommodations that the household will require? Examples are a unit for a person with mobility, visual or hearing impairment, or a unit with grab bars and/or wheel-in showers.

Yes ☐ No ☐ If yes, please explain below.

**Housing preference.** Please refer to the attached Resident Selection Summary to determine if you qualify for any of the following preference options and place a check in appropriate box below:

- ☐ Displaced from your home by the Uniform Relocation Act (URA) of 1970 (MUST PROVIDE DOCUMENTATION TO QUALIFY)
- ☐ Your household has children who have tested positive for documented elevated blood levels due to your current living situation (MUST PROVIDE DOCUMENTATION TO QUALIFY)
- ☐ You are presently living in housing declared substandard (MUST PROVIDE DOCUMENTATION FROM THE AGENCY THAT DECLARED YOUR CURRENT HOME SUBSTANDARD TO QUALIFY)

The information provided above is true and complete to the best of my knowledge and belief. I/We consent to the disclosure of income and financial information from my/our employer and financial references for purposes of income and asset verification related to my/our application for tenancy.

I/We consent to have background credit and criminal checks to be obtained for all household members age 18 and over.

If you are in need of special services, please call HANDS at (814) 453-3333.

_____	_____	_____	_____
Head of Household	Date	Co-Applicant	Date

_____	_____	_____	_____
Other Adult Over Age 18	Date	Other Adult Over Age 18	Date

_____	_____
HANDS Representative	Date

**\*\*\*All applicants must contact HANDS to notify us of any change in address or phone number. If we cannot reach you with the information provided above, you will be removed from the waitlist.\*\*\***

If you have a complaint regarding this application, you may call:

**PHILADELPHIA HUD**

(215) 656-0663

TDD# (215) 656-3450

**PITTSBURGH HUD**

(412)644-6965

TDD# 1-800-927-9275



Supplemental and Optional Contact Information for HUD-Assisted Housing Applicants

**SUPPLEMENT TO APPLICATION FOR FEDERALLY ASSISTED HOUSING**

This form is to be provided to each applicant for federally assisted housing

**Instructions: Optional Contact Person or Organization:** You have the right by law to include as part of your application for housing, the name, address, telephone number, and other relevant information of a family member, friend, or social, health, advocacy, or other organization. This contact information is for the purpose of identifying a person or organization that may be able to help in resolving any issues that may arise during your tenancy or to assist in providing any special care or services you may require. **You may update, remove, or change the information you provide on this form at any time.** You are not required to provide this contact information, but if you choose to do so, please include the relevant information on this form.

<b>Applicant Name:</b>			
<b>Mailing Address:</b>			
<b>Telephone No:</b>	<b>Cell Phone No:</b>		
<b>Name of Additional Contact Person or Organization:</b>			
<b>Address:</b>			
<b>Telephone No:</b>	<b>Cell Phone No:</b>		
<b>E-Mail Address (if applicable):</b>			
<b>Relationship to Applicant:</b>			
<b>Reason for Contact:</b> (Check all that apply) <table style="width: 100%; border: none;"> <tr> <td style="width: 50%; vertical-align: top;"> <input type="checkbox"/> Emergency  <input type="checkbox"/> Unable to contact you  <input type="checkbox"/> Termination of rental assistance  <input type="checkbox"/> Eviction from unit  <input type="checkbox"/> Late payment of rent         </td> <td style="width: 50%; vertical-align: top;"> <input type="checkbox"/> Assist with Recertification Process  <input type="checkbox"/> Change in lease terms  <input type="checkbox"/> Change in house rules  <input type="checkbox"/> Other: _____         </td> </tr> </table>		<input type="checkbox"/> Emergency <input type="checkbox"/> Unable to contact you <input type="checkbox"/> Termination of rental assistance <input type="checkbox"/> Eviction from unit <input type="checkbox"/> Late payment of rent	<input type="checkbox"/> Assist with Recertification Process <input type="checkbox"/> Change in lease terms <input type="checkbox"/> Change in house rules <input type="checkbox"/> Other: _____
<input type="checkbox"/> Emergency <input type="checkbox"/> Unable to contact you <input type="checkbox"/> Termination of rental assistance <input type="checkbox"/> Eviction from unit <input type="checkbox"/> Late payment of rent	<input type="checkbox"/> Assist with Recertification Process <input type="checkbox"/> Change in lease terms <input type="checkbox"/> Change in house rules <input type="checkbox"/> Other: _____		
<b>Commitment of Housing Authority or Owner:</b> If you are approved for housing, this information will be kept as part of your tenant file. If issues arise during your tenancy or if you require any services or special care, we may contact the person or organization you listed to assist in resolving the issues or in providing any services or special care to you.			
<b>Confidentiality Statement:</b> The information provided on this form is confidential and will not be disclosed to anyone except as permitted by the applicant or applicable law.			
<b>Legal Notification:</b> Section 644 of the Housing and Community Development Act of 1992 (Public Law 102-550, approved October 28, 1992) requires each applicant for federally assisted housing to be offered the option of providing information regarding an additional contact person or organization. By accepting the applicant's application, the housing provider agrees to comply with the non-discrimination and equal opportunity requirements of 24 CFR section 5.105, including the prohibitions on discrimination in admission to or participation in federally assisted housing programs on the basis of race, color, religion, national origin, sex, disability, and familial status under the Fair Housing Act, and the prohibition on age discrimination under the Age Discrimination Act of 1975.			

☐ Check this box if you choose not to provide the contact information.

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**Signature of Applicant**

**Date**

The information collection requirements contained in this form were submitted to the Office of Management and Budget (OMB) under the Paperwork Reduction Act of 1995 (44 U.S.C. 3501-3520). The public reporting burden is estimated at 15 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Section 644 of the Housing and Community Development Act of 1992 (42 U.S.C. 13604) imposed on HUD the obligation to require housing providers participating in HUD's assisted housing programs to provide any individual or family applying for occupancy in HUD-assisted housing with the option to include in the application for occupancy the name, address, telephone number, and other relevant information of a family member, friend, or person associated with a social, health, advocacy, or similar organization. The objective of providing such information is to facilitate contact by the housing provider with the person or organization identified by the tenant to assist in providing any delivery of services or special care to the tenant and assist with resolving any tenancy issues arising during the tenancy of such tenant. This supplemental application information is to be maintained by the housing provider and maintained as confidential information. Providing the information is basic to the operations of the HUD Assisted-Housing Program and is voluntary. It supports statutory requirements and program and management controls that prevent fraud, waste and mismanagement. In accordance with the Paperwork Reduction Act, an agency may not conduct or sponsor, and a person is not required to respond to, a collection of information, unless the collection displays a currently valid OMB control number.

**Privacy Statement:** Public Law 102-550, authorizes the Department of Housing and Urban Development (HUD) to collect all the information (except the Social Security Number (SSN)) which will be used by HUD to protect disbursement data from fraudulent actions.

**Housing And Neighborhood  
Development Service**

Matthew W. Good  
CEO



Corporate Office  
7 East 7<sup>th</sup> Street  
Erie, PA 16501-1105  
Phone: 814.453.3333  
Fax: 814.456.0922  
[www.hands-erie.org](http://www.hands-erie.org)  
[mail@hands-erie.org](mailto:mail@hands-erie.org)

**APPLICATION ATTACHMENTS ACKNOWLEDGEMENT**

**This form must be submitted with application**

We have enclosed copies of the following HUD brochures for you to keep and review:

- “Applying for HUD Housing Assistance? Think About This...Is Fraud Worth It?”
- “EIV & You”

By signing below, you are acknowledging that you have received copies of these brochures.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date



Equal Housing Opportunity



# APPLYING FOR HUD HOUSING ASSISTANCE?

**THINK ABOUT THIS...  
IS FRAUD WORTH IT?**

## Do You Realize...

If you commit fraud to obtain assisted housing from HUD, you could be:

- Evicted from your apartment or house.
- Required to repay all overpaid rental assistance you received.
- Fined up to \$10,000.
- Imprisoned for up to five years.
- Prohibited from receiving future assistance.
- Subject to State and local government penalties.

## Do You Know...

You are committing fraud if you sign a form knowing that you provided false or misleading information.

The information you provide on housing assistance application and recertification forms will be checked. The local housing agency, HUD, or the Office of Inspector General will check the income and asset information you provide with other Federal, State, or local governments and with private agencies. Certifying false information is fraud.

## So Be Careful!

When you fill out your application and yearly recertification for assisted housing from HUD make sure your answers to the questions are accurate and honest. You must include:

All sources of income and changes in income you or any members of your household receive, such as wages, welfare payments, social security and veterans' benefits, pensions, retirement, etc.

Any money you receive on behalf of your children, such as child support, AFDC payments, social security for children, etc.

Any increase in income, such as wages from a new job or an expected pay raise or bonus.

All assets, such as bank accounts, savings bonds, certificates of deposit, stocks, real estate, etc., that are owned by you or any member of your household.

All income from assets, such as interest from savings and checking accounts, stock dividends, etc.

Any business or asset (your home) that you sold in the last two years at less than full value.

The names of everyone, adults or children, relatives and non-relatives, who are living with you and make up your household.

(Important Notice for Hurricane Katrina and Hurricane Rita Evacuees: HUD's reporting requirements may be temporarily waived or suspended because of your circumstances. Contact the local housing agency before you complete the housing assistance application.)

## Ask Questions

If you don't understand something on the application or recertification forms, always ask questions. It's better to be safe than sorry.

## Watch Out for Housing Assistance Scams!

- Don't pay money to have someone fill out housing assistance application and recertification forms for you.
- Don't pay money to move up on a waiting list.
- Don't pay for anything that is not covered by your lease.
- Get a receipt for any money you pay.
- Get a written explanation if you are required to pay for anything other than rent (maintenance or utility charges).

## Report Fraud

If you know of anyone who provided false information on a HUD housing assistance application or recertification or if anyone tells you to provide false information, report that person to the HUD Office of Inspector General Hotline. You can call the Hotline toll-free Monday through Friday, from 10:00 a.m. to 4:30 p.m., Eastern Time, at 1-800-347-3735. You can fax information to (202) 708-4829 or e-mail it to [Hotline@hudoig.gov](mailto:Hotline@hudoig.gov). You can write the Hotline at:



HUD OIG Hotline, GFI  
451 7<sup>th</sup> Street, SW  
Washington, DC 20410





RENTAL HOUSING INTEGRITY IMPROVEMENT PROJECT

# EIV & You

## ENTERPRISE INCOME VERIFICATION



### What YOU Should Know

if You are Applying or are Receiving

Rental Assistance through the Department of  
Housing and Urban Development (HUD)

## What is EIV?

EIV is a web-based computer system containing employment and income information on individuals participating in HUD's rental assistance programs. This information assists HUD in making sure "the right benefits go to the right persons".



## What income information is in EIV and where does it come from?

### The Social Security Administration:

- Social Security (SS) benefits
- Supplemental Security Income (SSI) benefits
- Dual Entitlement SS benefits

### The Department of Health and Human Services (HSS) National Directory of New Hires (NDNH):

- Wages
- Unemployment compensation
- New Hire (W-4)

## What is the information in EIV used for?

The EIV system provides the owner and/or manager of the property where you live with your income information and employment history. This information is used to meet HUD's requirement to independently verify your employment and/or income when you recertify for continued rental assistance. Getting the information from the EIV system is more accurate and less time consuming and costly to the owner or manager than contacting your income source directly for verification.

Property owners and managers are able to use the EIV system to determine if you:

- correctly reported your income

They will also be able to determine if you:

- Used a false social security number
- Failed to report or under reported the income of a spouse or other household member
- Receive rental assistance at another property

## Is my consent required to get information about me from EIV?

Yes. When you sign form HUD-9887, Notice and Consent for the Release of Information, and form HUD-9887-A, Applicant's/Tenant's Consent to the Release of Information, you are giving your consent for HUD and the property owner or manager to obtain information about you to verify your employment and/or income and determine your eligibility for HUD rental assistance. Your failure to sign the consent forms may result in the denial of assistance or termination of assisted housing benefits.

## Who has access to the EIV information?

Only you and those parties listed on the consent form HUD-9887 that you must sign have access to the information in EIV pertaining to you.

## What are my responsibilities?

As a tenant in a HUD assisted property, you must certify that information provided on an application for housing assistance and the form used to certify and recertify your assistance (form HUD-50059) is accurate and honest. This is also described in the *Tenants Rights & Responsibilities* brochure

that your property owner or manager is required to give to you every year.

### Penalties for providing false information

Providing false information is fraud. Penalties for those who commit fraud could include eviction, repayment of overpaid assistance received, fines up to \$10,000, imprisonment for up to 5 years, prohibition from receiving any future rental assistance and/or state and local government penalties.

### Protect yourself, follow HUD reporting requirements

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

- Income from wages
- Welfare payments
- Unemployment benefits
- Social Security (SS) or Supplemental Security Income (SSI) benefits
- Veteran benefits
- Pensions, retirement, etc.
- Income from assets
- Monies received on behalf of a child such as:
  - *Child support*
  - *AFDC payments*
  - *Social security for children, etc.*

If you have any questions on whether money received should be counted as income, ask your property owner or manager.

When changes occur in your household income or family composition, immediately contact your property owner or manager to determine if this will affect your rental assistance.



Your property owner or manager is required to provide you with a copy of the fact sheet "How Your Rent Is Determined" which includes a listing of what is included or excluded from income.

### What if I disagree with the EIV information?

If you do not agree with the employment and/or income information in EIV, you must tell your property owner or manager. Your property owner or manager will contact the income source directly to obtain verification of the employment and/or income you disagree with. Once the property owner or manager receives the information from the income source, you will be notified in writing of the results.

### What if I did not report income previously and it is now being reported in EIV?

If the EIV report discloses income from a prior period that you did not report, you have two options: 1) you can agree with the EIV report if it is correct, or 2) you can dispute the report if you believe it is incorrect. The property owner or manager will then conduct a written third party verification with the reporting source of income. If the source confirms this income is accurate, you will be required to repay any overpaid rental assistance as far back as five (5) years and you may be subject to penalties if it is determined that you deliberately tried to conceal your income.

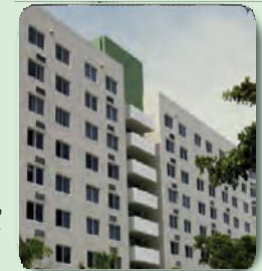
### What if the information in EIV is not about me?

EIV has the capability to uncover cases of potential identity theft; someone could be using your social security number. If this is discovered, you must notify the Social Security Administration by calling them toll-free at 1-800-772-1213. Further information on identity theft is available on the Social Security Administration website at: <http://www.ssa.gov/pubs/10064.html>.

### Who do I contact if my income or rental assistance is not being calculated correctly?

First, contact your property owner or manager for an explanation.

If you need further assistance, you may contact the contract administrator for the property you live in; and if it is not resolved to your satisfaction, you may contact HUD. For help locating the HUD office nearest you, which can also provide you contact information for the contract administrator, please call the Multifamily Housing Clearinghouse at: 1-800-685-8470.



### Where can I obtain more information on EIV and the income verification process?

Your property owner or manager can provide you with additional information on EIV and the income verification process. They can also refer you to the appropriate contract administrator or your local HUD office for additional information.

If you have access to a computer, you can read more about EIV and the income verification process on HUD's Multifamily EIV homepage at: [www.hud.gov/offices/hsg/mfh/rhiip/eiv/eivhome.cfm](http://www.hud.gov/offices/hsg/mfh/rhiip/eiv/eivhome.cfm).



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