ROCHESTER Housing Authority

Leasing Operations
675 West Main St
Rochester NY 14611
(585) 697-6105 Fax (585) 697-6104
Hours: M-Th 8:30am-4:30pm, F 8:30am-12:00pm

Si necesitas esta información en español, favor de llama al 585-697-6107

March 21, 2025

ARTHUR A MATTHEWS
360 ST PAUL ST Apt. 1002

ROCHESTER, NY 14605

RE: 360 ST PAUL ST

Dear ARTHUR A MATTHEWS,

Please be advised that the Housing Assistance Contract for the above mentioned unit has been terminated effective April 30, 2025. No further assistance payments will be made under this Contract. Should you remain in the unit after this date, you will be responsible for the full amount of the rent to the landlord.

The reason for the Contract and Lease termination is: Moving with Subsidy.

You will receive voucher papers which will **expire on July 30, 2025.** Should your voucher expire, your subsidy will be terminated and you would need to reapply for the program when the waiting list is open.

Please contact me to set up an appointment to be recertified and to receive your paperwork. .

Sincerely,

Loyda China

Senior Housing Specialist, Compliance Department
lchina@rochesterhousing.org
Phone: 585-697-6134
Fax: 585-568-6754

ltr#103m

Voucher

Housing Choice Voucher Program

U.S. Department of Housing and Urban Development

OMB No. 2577-0169
(exp. 04/30/2026)

Office of Public and Indian Housing

OMB Burden Statement: The public reporting burden for this information collection is estimated to be up to 0.05 hours, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. This collection of information is required for participation in the housing choice voucher program. Assurances of confidentiality are not provided under this collection. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions to reduce this burden, to the Office of Public and Indian Housing, US. Department of Housing and Urban Development, Washington, DC 20410. HUD may not conduct and sponsor, and a person is not required to respond to, a collection of information unless the collection displays a valid control number.

Privacy Act Statement. The Department of Housing and Urban Development (HUD) is authorized to collect the information on this form by 24 CFR § 982.302. The information is used to authorize a family to look for an eligible unit and specifies the size of the unit. The information also sets forth the family's obligations under the Housing Choice Voucher Program. The Personally Identifiable Information (PII) data collected on this form are not stored or retrieved within a system of record.

Please read **entire** document before completing form Fill in all blanks below. Type or print clearly.	Voucher Number S8V-HCV-V53346-35923
1. Insert **unit size** in number of bedrooms. (This is the number of bedrooms for which the Family qualifies, and is used in determining the amount of assistance to be paid on behalf of the Family to the owner.)	1. Unit Size 1
2. **Date Voucher Issued (mm/dd/yyyy)** Insert actual date the Voucher is issued to the Family.	2. Issue Date (mm/dd/yyyy) 05/01/2025
3. **Date Voucher Expires (mm/dd/yyyy)** must be at least sixty days after date Voucher is issued. (See Section 6 of this form.)	3. Expiration Date (mm/dd/yyyy) 07/31/2025
4. **Date Extension Expires** (if applicable)(mm/dd/yyyy) (See Section 6. of this form)	4. Date Extension Expires (mm/dd/yyyy)

5. Name of Family Representative	6. Signature of Family Representative	Date Signed (mm/dd/yyyy)
ARTHUR A MATTHEWS	Arthur A Matthews	4-1-25

7. Name of Public Housing Agency (PHA)		
Rochester Housing Authority		
8. Name and Title of PHA Official	**9. Signature of PHA Official**	**Date Signed (mm/dd/yyyy)**
Loyda China	Loyda China	3/31/2025

3/21/2025 Family Name: **Arthur Matthews**

DETERMINING THE RENT AMOUNT THAT CAN BE APPROVED

 # 1. Your SUBSIDY SIZE is: 1

This is based on the number of people in your family, their ages, sex and relationship to you.
This number helps us find maximum amount of money the Housing Authority can pay for rent.

 # 2. You are required to pay at least 30 % of your adjusted income for your portion of the rent and utilities.
You are not permitted to pay more than 40 % in the first year of a new unit.

Your family's 30% is **$0** And the 40 % maximum is **$0**

#3. There is a maximum limit to the amount of rent.

The rent to the owner, plus the cost of the utilities paid by the tenant, cannot exceed a certain amount. This amount **cannot** be determined without completed paperwork. However, the maximum amount the housing authority can pay is :

Tier 1	**1378**	**Tier 2**	**1427**	**Tier 3**	**1511**	**Tier 4**	**1655**
Tier 5	**1823**						

 # 4. If you pay some or all of the utilities, we must reduce the amount of rent to the landlord, so that you are not paying more than permitted. We will count your 30% towards utilities first.

To help you begin to find a unit, here is an estimate of the highest amount of rent that can be paid.

MAXIMUM Rent Amount:

				14425	
			14450	14506	
	14428	14471	14546	14514	
	14435	14526	14559	14564	
	14454	14616	14607	14580	14534
	14467	14620	14623	14618	14571
	14468	14626	14624	14625	14586
1378	**1427**		**1511**	**1655**	**1823**

If the **landlord** pays ALL the utilities,
the total rent should be no more than this amount.
This will be most likely a complex

****

If you pay **ONLY** for lights and electric cooking:
This may be a complex, or a half house with **heat included**

1322	**1371**	**1455**	**1599**	**1767**

utility estimate:
$56

****

If you will be paying the heat, hot water and lights:
This will be the estimate for a single house

1270	**1319**	**1403**	**1547**	**1715**

utility estimate
$108

If you are required to pay the water bill, or provide your own appliances, the rent to owner will be lower.

Remember, these are just ESTIMATES. Final amount will be determined after inspection.

** **The total cost of living in any unit includes the cost of the utilities you will be paying. This means that if you pay additional utilities, (such as the water bill) the rent will need to be lowered.**

** **The estimates are based on a unit that matches your voucher size.**

** **The rent must also be reasonable compared to other, unassisted units.**

ROCHESTER
Housing Authority

Leasing Operations
675 W. Main St.
Rochester, NY 14611
Phone: 585 697 6105
Fax: 585 697 6104
ownerservices@RochesterHousing.org

This packet contains forms that must be completed and returned to our office. Please complete every question. Owner/agent questions are highlighted: [redacted] Tenant questions are highlighted: [redacted]
In addition, **a copy of the unsigned, proposed lease must be submitted with this packet.** The lease must include the HUD prescribed tenancy addendum, or state that the tenancy addendum is part of the lease. This is part C of the HAP contract and may be found on the RHA website.

Per HUD regulations (24 CFR 982.308), the lease must also include:

- The name of the owner and tenant;
- The address of the unit rented (including the apartment number);
- The term of the lease (initial and any provisions for renewal);
- The amount of the monthly rent to owner; and
- Specifications about which utilities and appliances are to be supplied by the owner and which are to be supplied by the family.

Enclosed are:

Request for Tenancy Approval (RFTA)-Form HUD 52517. This form is used to request the Rochester Housing Authority to review the proposed tenancy for suitability. Please complete every question. This form must be signed by both the owner/agent and the tenant.

W-9 form - This form must be completed by the landlord/owner.

Owner/Agency Requirement - This form contains information regarding the family's current and former addresses. It also contains a certification that must be signed regarding any family relationship that may exist between the owner and the tenant.

Disclosure of Information on Lead-Based Paint - This form contains the disclosures for known lead-based paint in the unit.

The RFTA forms and the lease will be reviewed and an initial determination of affordability and reasonability will be made. The unit must pass inspection prior to the offer of a Housing Assistance Payment (HAP) contract.

Further information about this and other programs may be found on our website at rochesterhousing.org or through HUD's website at hud.gov.

Victims of domestic violence, dating violence, or stalking may have protections provided by the Violence Against Women's Act, or if you or anyone in your family is a person with disabilities, and you require a specific accommodation in order to fully utilize our programs and services, please contact the Housing Authority immediately.

EQUAL HOUSING OPPORTUNITY

MAKING YOUR MOVE A SUCCESS

- ROCHESTER HOUSING AUTHORITY (RHA). You may rent in any of the following counties and remain an RHA participant: Monroe, Wayne, Orleans, Ontario, and Livingston.

- Finding a rental unit:
  - Websites: www.affordablehousing.com; ww.rochesterhousing.org; www.thehousingcouncil.org; Craigslist.com; Apartments.com; Rent.com;
  - There are free magazines available at grocery and drug stores.
  - RHA has booklets available in our office at 675 West Main Street; A Good Place To Live, Protect Your Family from Lead in Your Home

- INSPECTIONS Once completed moving papers and proposed lease are received by RHA, an inspection will be scheduled.
  - Utilities must be on for the date of inspection.
  - Your new landlord will be notified of the date and time of inspection.
  - You will receive an inspection appointment letter in the mail (at the address we have on file), or you may contact the Inspection Department at hqs@rochesterhousing.org or 585-232-1601.
  - If the unit does not pass inspection, the landlord will be given a list of items that need to be fixed. The repairs must be completed within 30 days and the landlord must call RHA to schedule a follow up (2nd) inspection.
  - Keep in contact with RHA and your new landlord about the status of your new unit and moving date.

- RENT
  - The requested rent for the new unit will be reviewed to determine if it is reasonable and affordable for your family. "Reasonable" means that the rent for a Housing Choice Voucher (HCV) unit must be about the same amount when compared to other units of the same bedroom size. "Affordable" means that your share of the rent will not be more than 40% of your family's adjusted annual income. Use the Rent Estimate Sheet provided to figure out if you can afford a particular unit.
  - If it is decided that the rent is too high, our office will ask the landlord to lower it to a reasonable/affordable amount. The rent must be lowered, or a Housing Choice Voucher contract cannot be signed. You cannot make up the difference. If you are living in the new unit before it passes inspection, you will have to pay all the rent until it passes.

- W-9-Please note that in this packet there is a W-9 form that must be filled out by the landlord only. Please do not enter your personal information on that page.

You are not eligible for assistance prior to the start date of your voucher.

Request for Tenancy Approval

Housing Choice Voucher Program

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

Program:
1 Set of Papers | 1 # of bedrooms on voucher
Tenant Name Arthur Mathews
Voucher Dates 5/1/2025 to 7/31/2025
ownerservices@rochesterhousing.org

The public reporting burden for this information collection is estimated to be 30 minutes, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. The Department of Housing and Urban Development (HUD) is authorized to collect the information on this form by Section 8 of the U.S. Housing Act (42 U.S.C. 1437f). Form is only valid if it includes an OMB Control Number. HUD is committed to protecting the privacy of individuals' information stored electronically or in paper form, in accordance with federal privacy laws, guidance, and best practices. HUD expects its third-party business partners, including Public Housing Authorities, who collect, use maintain, or disseminate HUD information to protect the privacy of that information in Accordance with applicable law.

When the participant selects a unit, the owner of the unit completes this form to provide the PHA with information about the unit. The information is used to determine if the unit is eligible for rental assistance. HUD will not disclose this information except when required by law for civil, criminal, or regulatory investigations and prosecutions.

1. Name of Public Housing Agency (PHA)	2. Address of Unit (street address, unit #, city, state, zip code)
Rochester Housing Authority - Leasing Operations 675 West Main Street, Rochester, NY 14611	131 Penbrooke Dr. Penfield, NY 14526

3. Requested Lease Start Date	4. Number of Bedrooms	5. Year Constructed	6. Proposed Rent	7. Security Deposit Amt	8. Date Unit Available for Inspection
5/1/25	1	1975	1,300	1,300	Immediate

9. Structure Type

- ☐ Single Family Detached (one family under one roof)
- ☐ Semi-Detached (duplex, attached on one side)
- ☒ Rowhouse/Townhouse (attached on two sides)
- ☒ Low-rise apartment building (4 stories or fewer)
- ☐ High-rise apartment building (5+ stories)
- ☐ Manufactured Home (mobile home)

10. If this unit is subsidized, indicate type of subsidy:

- ☐ Section 202
- ☐ Section 221(d)(3)(BMIR)
- ☐ Tax Credit
- ☐ HOME
- ☐ Section 236 (insured or uninsured)
- ☐ Section 515 Rural Development
- ☐ Other (Describe Other Subsidy, including any state or local subsidy) _____

11. Utilities and Appliances

The owner shall provide or pay for the utilities/appliances indicated below by an "O". The tenant shall provide or pay for the utilities/appliances indicated below by a "T". Unless otherwise specified below, the owner shall pay for all utilities and provide the refrigerator and range/microwave.

Item	Specify fuel type - ONE TYPE PER UTILITY	Paid by
Heating	☐ Natural gas ☐ Bottled gas ☐ Electric ☐ Heat Pump ☐ Oil ☒ Other	O
Cooking	☐ Natural gas ☐ Bottled gas ☒ Electric ☐ Other	O
Water Heating	☐ Natural gas ☐ Bottled gas ☒ Electric ☐ Oil ☐ Other	O
Other Electric		
Water		T
Sewer		T
Trash Collection		T
Air Conditioning		O
Other (specify)		
		Provided by
Refrigerator		O
Range/Microwave		O/T

** Appliance Affidavit: I hereby verify that I am providing the following appliances for the unit in which I am going to receive rental assistance, and that the appliances will be kept in good working order. Check where applicable: Refrigerator:_____ Stove:_____ Tenant Signature:_____

12. Owner's Certifications

a. The program regulation requires the PHA to certify that the rent charged to the housing choice voucher tenant is not more than the rent charged for other unassisted comparable units. Owners of projects with more than 4 units must complete the following section for most recently leased comparable unassisted units within the premises.

Address and unit number	Date Rented	Rental Amount
1. 131	5-1-25	1,300.00
2. 135	3/31/25	1,234.00
3. 6	3/31/25	1,265.44

b. The owner (including a principal or other interested party) is not the parent, child, grandparent, grandchild, sister or brother of any member of the family, unless the PHA has determined (and has notified the owner and the family of such determination) that approving leasing of the unit, notwithstanding such relationship, would provide reasonable accommodation for a family member who is a person with disabilities.

c. Check one of the following:

☐ Lead-based paint disclosure requirements do not apply because this property was built on or after January 1, 1978.

☒ The unit, common areas servicing the unit, and exterior painted surfaces associated with such unit or common areas have been found to be lead-based paint free by a lead-based paint inspector certified under the Federal certification program or under a federally accredited State certification program.

☐ A completed statement is attached containing disclosure of known information on lead-based paint and/or lead-based paint hazards in the unit, common areas or exterior painted surfaces, including a statement that the owner has provided the lead hazard information pamphlet to the family.

13. The PHA has not screened the family's behavior or suitability for tenancy. Such screening is the owner's responsibility.

14. The owner's lease must include word-for-word all provisions of the HUD tenancy addendum.

15. The PHA will arrange for inspection of the unit and will notify the owner and family if the unit is not approved.

Print or Type Name of Owner/Owner Representative	Print or Type Name of Household Head	
Tyler Riedl		
Owner/Owner Representative Signature	Head of Household Signature	
Business Address 351 Penbrooke Dr. Penfield, NY 14526	Present Address	
Telephone Number: 585-377-6200	Date (mm/dd/yyyy): 4/7/25	Telephone Number / Date (mm/dd/yyyy)

Owner Email Address: Penbrookeleasing@Morganproperties.com

Tenant Email Address: _____

Are you a current or previous Section 8 landlord or property manager with the Rochester Housing Authority?

☒ Y ☐ N

Form **W-9**
(Rev. October 2018)
Department of the Treasury
Internal Revenue Service

Request for Taxpayer Identification Number and Certification

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

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

Print or type. See Specific Instructions on page 3.

1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank.

MP KofP JV LLC

2 Business name/disregarded entity name, if different from above

Penbrooke Meadows Apartments Owner KofP LLC

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.

☐ Individual/sole proprietor or single-member LLC ☐ C Corporation ☐ S Corporation ☐ Partnership ☐ Trust/estate

☑ Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Partnership) ▶ P

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.

☐ Other (see instructions) ▶

4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):

Exempt payee code (if any) _____

Exemption from FATCA reporting code (if any) _____

(Applies to accounts maintained outside the U.S.)

5 Address (number, street, and apt. or suite no.) See instructions.

160 Clubhouse Road

Requester's name and address (optional)

6 City, state, and ZIP code

King of Prussia, PA 19406

7 List account number(s) here (optional)

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

8	4	–	2	5	2	2	9	3	2

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** ▶ [signature] | **Date** ▶ 10/16/20

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.*

NO Work 25 years

Form **W-9**
(Rev. October 2018)
Department of the Treasury
Internal Revenue Service

Request for Taxpayer Identification Number and Certification

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

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

Print or type. See Specific Instructions on page 3.

1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank.
Arthur Matthews

2 Business name/disregarded entity name, if different from above
NONE

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.

☐ Individual/sole proprietor or single-member LLC ☐ C Corporation ☐ S Corporation ☐ Partnership ☐ Trust/estate

☐ 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.

☐ Other (see instructions) ▶

4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):

Exempt payee code (if any) _____

Exemption from FATCA reporting code (if any) _____

(Applies to accounts maintained outside the U.S.)

5 Address (number, street, and apt. or suite no.) See instructions.
36 St Paul St

Requester's name and address (optional)

6 City, state, and ZIP code
Rochester N.Y 14605

7 List account number(s) here (optional)
628 155

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** ▶ _____

General Instructions

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

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- Form 1099-INT (interest earned or paid)
- Form 1099-DIV (dividends, including those from stocks or mutual funds)
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- 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.*

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ROCHESTER
Housing Authority

Leasing Operations
675 W. Main St.
Rochester, NY 14611
Phone: 585 697 6105
Fax: 585 697 6104

PER HUD REGULATIONS, FORM MUST BE COMPLETED EVEN IF NO CHILDREN UNDER SIX IN HOUSEHOLD *(24CFR Part 35)*

Environmental Blood Lead Level (EBLL) AUTHORIZATION FOR RELEASE OF INFORMATION

Beginning January 10, 2002, HUD adopted lead-based paint regulations that effect children under the age of six. In an attempt to comply with these regulations, Rochester Housing Authority (RHA) must submit to the Monroe County Department of Public Health a list of names and addresses of assisted units with children under the age of six and/or child occupied units. ***A child occupied unit is defined as a unit in which a child (under the age of six years old) is present two or more times a week for three or more hours.***

By signing this release, you are giving the Monroe County Department of Public Health permission to release information concerning elevated blood lead levels related to a child or children in this Rochester Housing Authority assisted unit. If the child or children have not been tested, you may contact the Monroe County Department of Public Health at 753-5087 for further information.

I consent to allow Monroe County Department of Public Health to release to the Rochester Housing Authority any information concerning Environmental Intervention Blood Lead Level(s) related to this unit.

(Please clearly print all information except your signature.)

COMPLETE NEW ADDRESS

Head of Household: Arthur Mattison Phone: 585 481 9955

Address: 360 St Paul St #1002

Name of child under six: NONE Birth Date:
(First Name) (Last Name)

Name of child under six: Birth Date:
(First Name) (Last Name)

Name of child under six: Birth Date:
(First Name) (Last Name)

Head of Household Signature: Date:

RHA Contact: Phone:

1/9/2019

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) X 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 (Tenant) 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 (Owner)	Date 4/7/25	Lessor	Date
Lessee (Tenant)	Date	Lessee	Date
Agent	Date	Agent	Date

ROCHESTER
Housing Authority

Leasing Operations
675 W. Main St.
Rochester, NY 14611
Phone: 585 697 6105
Fax: 585 697 6104

Owner/ Agency Requirements

24 CFR 982.307, 24 CFR 982.452

1. Owner Responsibility for Screening Tenants

The Rochester Housing Authority is required to inform owners that screening and selecting for tenancy is the responsibility of the owner. The Housing Authority has no liability or responsibility to the owner for a family's behavior or suitability for tenancy

Owners are encouraged to investigate the background of prospective tenants in regards to:

- Payment of rent and utility bills;
- Caring for rental units/premises;
- Respecting others' rights to peaceful enjoyment of their housing;
- Drug-related criminal activity or other criminal activity that is a threat to the life, safety or property of others; and
- Compliance with other essential conditions of tenancy.

2. Rochester Housing Authority Responsibility to Owner

The Housing Authority must give the owner from its records the following information:

- The family's current and prior address (as shown in PHA records); and
- The names and addresses (if known) of the family's current and prior landlords.

FAMILY NAME: Arthur Matthews

FAMILY'S CURRENT ADDRESS: 360 st paul St · #1002

CURRENT OWNER'S NAME AND CONTACT INFORMATION: St Simmons Terrace Apt. Landsmano

FAMILY'S PAST ADDRESS: 184 Scottville Rd

PAST OWNER'S NAME AND CONTACT INFORMATION: Linda Tumpmose ex girlfriend rented it I paid ½ every month 4 years

3. RELATIONSHIP:

The Housing Authority must **not** approve an assisted tenancy if the owner is the parent, child, grandparent, grandchild, sister or brother of any member of the family, unless approving the unit would provide reasonable accommodation for a family member who is a person with disabilities. I CERTIFY THAT I AM NOT RELATED IN ANY WAY THAT IS CONTRARY TO THIS REGULATION.

Owner's Signature

Arthur Matthews
Tenant Signature

Victims of domestic violence, dating violence, or stalking may have protections provided by the Violence Against Women's Act, or if you or anyone in your family is a person with disabilities, and you require a specific accommodation in order to fully utilize our programs and services, please contact the Housing Authority immediately.

EQUAL HOUSING OPPORTUNITY

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TENANCY ADDENDUM
Section 8 Tenant-Based Assistance
Housing Choice Voucher Program
(To be attached to Tenant Lease)

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

OMB Approval No. 2577-0169
exp. 7/31/2022

The Tenancy Addendum is part of the HAP contract and lease. Public reporting burden for this collection of information is estimated to average 0.5 hours. This includes the time for collection, reviewing and reporting the data. The information is being collected as required by 24 CFR 982.451 which in part states the PHA must pay the housing assistance payment promptly. This agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless there is a valid OMB number. Assurances of confidentiality are not provided under this section.

HUD is committed to protecting the privacy of an individual's information stored electronically or in paper form in accordance with federal privacy laws, guidance and best practices. HUD expects its third-party business partners including Public Housing Authorities who collect, use, maintain, or disseminate HUD information to protect the privacy of that information in accordance with applicable law.

1. Section 8 Voucher Program

a. The owner is leasing the contract unit to the tenant for occupancy by the tenant's family with assistance for a tenancy under the Section 8 housing choice voucher program (voucher program) of the United States Department of Housing and Urban Development (HUD).

b. The owner has entered into a Housing Assistance Payments Contract (HAP contract) with the PHA under the voucher program. Under the HAP contract, the PHA will make housing assistance payments to the owner to assist the tenant in leasing the unit from the owner.

2. Lease

a. The owner has given the PHA a copy of the lease, including any revisions agreed by the owner and the tenant. The owner certifies that the terms of the lease are in accordance with all provisions of the HAP contract and that the lease includes the tenancy addendum.

b. The tenant shall have the right to enforce the tenancy addendum against the owner. If there is any conflict between the tenancy addendum and any other provisions of the lease, the language of the tenancy addendum shall control.

3. Use of Contract Unit

a. During the lease term, the family will reside in the contract unit with assistance under the voucher program.

b. The composition of the household must be approved by the PHA. The family must promptly inform the PHA of the birth, adoption or court-awarded custody of a child. Other persons may not be added to the household without prior written approval of the owner and the PHA.

c. The contract unit may only be used for residence by the PHA-approved household members. The unit must be the family's only residence. Members of the household may engage in legal profit making activities incidental to primary use of the unit for residence by members of the family.

d. The tenant may not sublease or let the unit.

e. The tenant may not assign the lease or transfer the unit.

4. Rent to Owner

a. The initial rent to owner may not exceed the amount approved by the PHA in accordance with HUD requirements.

b. Changes in the rent to owner shall be determined by the provisions of the lease. However, the owner may not raise the rent during the initial term of the lease.

c. During the term of the lease (including the initial term of the lease and any extension term), the rent to owner may at no time exceed:

(1) The reasonable rent for the unit as most recently determined or redetermined by the PHA in accordance with HUD requirements, or

(2) Rent charged by the owner for comparable unassisted units in the premises.

5. Family Payment to Owner

a. The family is responsible for paying the owner any portion of the rent to owner that is not covered by the PHA housing assistance payment.

b. Each month, the PHA will make a housing assistance payment to the owner on behalf of the family in accordance with the HAP contract. The amount of the monthly housing assistance payment will be determined by the PHA in accordance with HUD requirements for a tenancy under the Section 8 voucher program.

c. The monthly housing assistance payment shall be credited against the monthly rent to owner for the contract unit.

d. The tenant is not responsible for paying the portion of rent to owner covered by the PHA housing assistance payment under the HAP contract between the owner and the PHA. A PHA failure to pay the housing assistance payment to the owner is not a violation of the lease. The owner may not terminate the tenancy for nonpayment of the PHA housing assistance payment.

e. The owner may not charge or accept, from the family or from any other source, any payment for rent of the unit in addition to the rent to owner. Rent to owner includes all housing services, maintenance, utilities and appliances to be provided and paid by the owner in accordance with the lease.

f. The owner must immediately return any excess rent payment to the tenant.

6. Other Fees and Charges

a. Rent to owner does not include cost of any meals or supportive services or furniture which may be provided by the owner.

b. The owner may not require the tenant or family members to pay charges for any meals or supportive services or furniture which may be provided by the owner. Nonpayment of any such charges is not grounds for termination of tenancy.

c. The owner may not charge the tenant extra amounts for items customarily included in rent to owner in the locality, or provided at no additional cost to unsubsidized tenants in the premises.

7. Maintenance, Utilities, and Other Services

a. **Maintenance**

(1) The owner must maintain the unit and premises in accordance with the HQS.

(2) Maintenance and replacement (including redecoration) must be in accordance with the standard practice for the building concerned as established by the owner.

b. **Utilities and appliances**

(1) The owner must provide all utilities needed to comply with the HQS.

(2) The owner is not responsible for a breach of the HQS caused by the tenant's failure to:

(a) Pay for any utilities that are to be paid by the tenant.

(b) Provide and maintain any appliances that are to be provided by the tenant.

c. **Family damage**. The owner is not responsible for a breach of the HQS because of damages beyond normal wear and tear caused by any member of the household or by a guest.

d. **Housing services**. The owner must provide all housing services as agreed to in the lease.

8. Termination of Tenancy by Owner

a. **Requirements**. The owner may only terminate the tenancy in accordance with the lease and HUD requirements.

b. **Grounds**. During the term of the lease (the initial term of the lease or any extension term), the owner may only terminate the tenancy because of:

(1) Serious or repeated violation of the lease;

(2) Violation of Federal, State, or local law that imposes obligations on the tenant in connection with the occupancy or use of the unit and the premises;

(3) Criminal activity or alcohol abuse (as provided in paragraph c); or

(4) Other good cause (as provided in paragraph d).

c. **Criminal activity or alcohol abuse**

(1) The owner may terminate the tenancy during the term of the lease if any member of the household, a guest or another person under a resident's control commits any of the following types of criminal activity:

(a) Any criminal activity that threatens the health or safety of, or the right to peaceful enjoyment of the premises by, other residents (including property management staff residing on the premises);

(b) Any criminal activity that threatens the health or safety of, or the right to peaceful enjoyment of their residences by, persons residing in the immediate vicinity of the premises;

(c) Any violent criminal activity on or near the premises; or

(d) Any drug-related criminal activity on or near the premises.

(2) The owner may terminate the tenancy during the term of the lease if any member of the household is:

(a) Fleeing to avoid prosecution, or custody or confinement after conviction, for a crime, or attempt to commit a crime, that is a felony under the laws of the place from which the individual flees, or that, in the case of the State of New Jersey, is a high misdemeanor; or

(b) Violating a condition of probation or parole under Federal or State law.

(3) The owner may terminate the tenancy for criminal activity by a household member in accordance with this section if the owner determines that the household member has committed the criminal activity, regardless of whether the household member has been arrested or convicted for such activity.

(4) The owner may terminate the tenancy during the term of the lease if any member of the household has engaged in abuse of alcohol that threatens the health, safety or right to peaceful enjoyment of the premises by other residents.

d. **Other good cause for termination of tenancy**

(1) During the initial lease term, other good cause for termination of tenancy must be something the family did or failed to do.

(2) During the initial lease term or during any extension term, other good cause may include:

(a) Disturbance of neighbors,

(b) Destruction of property, or

(c) Living or housekeeping habits that cause damage to the unit or premises.

(3) After the initial lease term, such good cause may include:

(a) The tenant's failure to accept the owner's offer of a new lease or revision;

(b) The owner's desire to use the unit for personal or family use or for a purpose other than use as a residential rental unit; or

(c) A business or economic reason for termination of the tenancy (such as sale of the property, renovation of the unit, the owner's desire to rent the unit for a higher rent).

(4) The examples of other good cause in this paragraph do not preempt any State or local laws to the contrary.

9. Protections for Victims of Domestic Violence, Dating Violence, Sexual Assault, or Stalking

a. **Purpose**: This section incorporates the protections for victims of domestic violence, dating violence, sexual assault, or stalking in accordance with subtitle N of the Violence Against Women Act of 1994, as amended (codified as amended at 42 U.S.C. 14043e et seq.) (VAWA) and implementing regulations at 24 CFR part 5, subpart L.

b. **Conflict with other Provisions:** In the event of any conflict between this provision and any other provisions included in Part C of the HAP contract, this provision shall prevail.

c. **Effect on Other Protections**: Nothing in this section shall be construed to supersede any provision of any Federal, State, or local law that provides greater protection than this section for victims of domestic violence, dating violence, sexual assault, or stalking.

d. **Definition:** As used in this Section, the terms "actual and imminent threat," "affiliated individual", "bifurcate", "dating violence," "domestic violence," "sexual assault," and "stalking" are defined in HUD's regulations at 24 CFR part 5, subpart L. The terms "Household" and "Other Person Under the Tenant's Control" are defined at 24 CFR part 5, subpart A.

e. **VAWA Notice and Certification Form:** The PHA shall provide the tenant with the "Notice of Occupancy Rights under VAWA and the certification form described under 24 CFR 5.2005(a)(1) and (2).

f. **Protection for victims of Domestic Violence, Dating Violence, Sexual Assault, or Stalking:**

(1) The landlord or the PHA will not deny admission to, deny assistance under, terminate from participation in, or evict the Tenant on the basis of or as a direct result of the fact that the Tenant is or has been a victim of domestic violence, dating violence, sexual assault, or stalking, if the Tenant otherwise qualifies for admission, assistance, participation, or occupancy. 24 CFR 5.2005(b)(1).

(2) The tenant shall not be denied tenancy or occupancy rights solely on the basis of criminal activity engaged in by a member of the Tenant's Household or any guest or Other Person Under the Tenant's Control, if the criminal activity is directly related to domestic violence, dating violence, sexual assault, or stalking, and the Tenant or an Affiliated Individual of the Tenant is the victim or the threatened victim of domestic violence, dating violence, sexual assault, or stalking. 24 CFR 5.2005(b)(2).

(3) An incident or incidents of actual or threatened domestic violence, dating violence, sexual assault or stalking will not be construed as serious or repeated violations of the lease by the victim or threatened victim of the incident. Nor shall it not be construed as other "good cause" for termination of the lease, tenancy, or occupancy rights of such a victim or threatened victim. 24 CFR 5.2005(c)(1) and (c)(2).

g. **Compliance with Court Orders:** Nothing in this Addendum will limit the authority of the landlord, when notified by a court order, to comply with the court order with respect to the rights of access or control of property (including civil protection orders issued to protect a victim of domestic violence, dating violence, sexual assault, or stalking) or with respect to the distribution or possession of property among members of the Tenant's Household. 24 CFR 5.2005(d)(1).

h. **Violations Not Premised on Domestic Violence, Dating Violence, Sexual Assault, or Stalking:** Nothing in this section shall be construed to limit any otherwise available authority of the Landlord to evict or the public housing authority to terminate the assistance of a Tenant for any violation not premised on an act of domestic violence, dating violence, sexual assault, or stalking that is in question against the Tenant or an Affiliated Individual of the Tenant. However, the Landlord or the PHA will not subject the tenant, who is or has been a victim of domestic violence, dating violence, sexual assault, or stalking, to a more demanding standard than other tenants in determining whether to evict or terminate assistance. 24 CFR 5.2005(d)(2).

i. **Actual and Imminent Threats:**

(1) Nothing in this section will be construed to limit the authority of the Landlord to evict the Tenant if the Landlord can demonstrate that an "actual and imminent threat" to other tenants or those employed at or providing service to the property would be present if the Tenant or lawful occupant is not evicted. In this context, words, gestures, actions, or other indicators will be construed as an actual and imminent threat if they meet the following standards for an actual and imminent threat: "Actual and imminent threat" refers to a physical danger that is real, would occur within an immediate time frame, and could result in death or serious bodily harm. In determining whether an individual would pose an actual and imminent threat, the factors to be considered include: the duration of the risk, the nature and severity of the potential harm, the likelihood that the potential harm will occur, and the length of time before the potential harm would occur. 24 CFR 5.2005(d)(3).

(2) If an actual and imminent threat is demonstrated, eviction should be used only when there are no other actions that could be taken to reduce or eliminate the threat, including, but not limited to, transferring the victim to a different unit, barring the perpetrator from the property, contacting law enforcement to increase police presence, developing other plans to keep the property safe, or seeking other legal remedies to prevent the perpetrator from acting on a threat. Restrictions predicated on public safety cannot be based on stereotypes, but must be tailored to particularized concerns about individual residents. 24 CFR 5.2005(d)(4).

j. **Emergency Transfer**: A tenant who is a victim of domestic violence, dating violence, sexual assault, or stalking may request an emergency transfer in accordance with the PHA's emergency transfer plan. 24 CFR 5.2005(e). The PHA's emergency transfer plan must be made available upon request, and incorporate strict confidentiality measures to ensure that the PHA does not disclose a tenant's dwelling unit location to a person who committed or threatened to commit an act of domestic violence, dating violence, sexual assault, or stalking against the tenant;

For transfers in which the tenant would not be considered a new applicant, the PHA must ensure that a request for an emergency transfer receives, at a minimum, any applicable additional priority that is already provided to other types of emergency transfer requests. For transfers in which the tenant would be considered a new applicant, the plan must include policies for assisting a tenant with this transfer.

k. **Bifurcation**: Subject to any lease termination requirements or procedures prescribed by Federal, State, or local law, if any member of the Tenant's Household engages in criminal activity directly relating to domestic violence, dating violence, sexual assault, or stalking, the Landlord may "bifurcate" the Lease, or remove that Household member from the Lease, without regard to whether that Household member is a signatory to the Lease, in order to evict, remove, or terminate the occupancy rights of that Household member without evicting, removing, or otherwise penalizing the victim of the criminal activity who is also a tenant or lawful occupant. Such eviction, removal, termination of occupancy rights, or termination of assistance shall be effected in accordance with the procedures prescribed by Federal, State, and local law for the termination of leases or assistance under the housing choice voucher program. 24 CFR 5.2009(a).

If the Landlord bifurcates the Lease to evict, remove, or terminate assistance to a household member, and that household member is the sole tenant eligible to receive assistance, the landlord shall provide any remaining tenants or residents a period of 30 calendar days from the date of bifurcation of the lease to:

(1) Establish eligibility for the same covered housing program under which the evicted or terminated tenant was the recipient of assistance at the time of bifurcation of the lease;

(2) Establish eligibility under another covered housing program; or

(3) Find alternative housing.

l. **Family Break-up:** If the family break-up results from an occurrence of domestic violence, dating violence, sexual assault, or stalking, the PHA must ensure that the victim retains assistance. 24 CFR 982.315.

m. **Move with Continued Assistance:** The public housing agency may not terminate assistance to a family or member of the family that moves out of a unit in violation of the lease, with or without prior notification to the public housing agency if such a move occurred to protect the health or safety of a family member who is or has been a victim of domestic violence, dating violence, sexual assault, or stalking; and who reasonably believed they were imminently threatened by harm from further violence if they remained in the dwelling unit, or if any family member has been the victim of sexual assault that occurred on the premises during the 90-calendar-day period preceding the family's request to move.

(1) The move is needed to protect the health or safety of the family or family member who is or has been a victim of domestic violence dating violence, sexual assault or stalking; and

(2) The family or member of the family reasonably believes that he or she was threatened with imminent harm from further violence if he or she remained in the dwelling unit. However, any family member that has been the victim of a sexual assault that occurred on the premises during the 90-calendar day period preceding the family's move or request to move is not required to believe that he or she was threatened with imminent harm from further violence if he or she remained in the dwelling unit. 24 CFR 982.354.

n. **Confidentiality.**

(1) The Landlord shall maintain in strict confidence any information the Tenant (or someone acting on behalf of the Tenant) submits to the Landlord concerning incidents of domestic violence, dating violence, sexual assault or stalking, including the fact that the tenant is a victim of domestic violence, dating violence, sexual assault, or stalking.

(2) The Landlord shall not allow any individual administering assistance on its behalf, or any persons within its employ, to have access to confidential information unless explicitly authorized by the Landlord for reasons that specifically call for these individuals to have access to the information pursuant to applicable Federal, State, or local law.

(3) The Landlord shall not enter confidential information into any shared database or disclose such information to any other entity or individual, except to the extent that the disclosure is requested or consented to in writing by the individual in a time-limited release; required for use in an eviction proceeding; or is required by applicable law.

10. Eviction by court action

The owner may only evict the tenant by a court action.

11. Owner notice of grounds

a. At or before the beginning of a court action to evict the tenant, the owner must give the tenant a notice that specifies the grounds for termination of tenancy. The notice may be included in or combined with any owner eviction notice.

b. The owner must give the PHA a copy of any owner eviction notice at the same time the owner notifies the tenant.

c. Eviction notice means a notice to vacate, or a complaint or other initial pleading used to begin an eviction action under State or local law.

12. Lease: Relation to HAP Contract

If the HAP contract terminates for any reason, the lease terminates automatically.

13. PHA Termination of Assistance

The PHA may terminate program assistance for the family for any grounds authorized in accordance with HUD requirements. If the PHA terminates program assistance for the family, the lease terminates automatically.

14. Family Move Out

The tenant must notify the PHA and the owner before the family moves out of the unit.

15. Security Deposit

a. The owner may collect a security deposit from the tenant. (However, the PHA may prohibit the owner from collecting a security deposit in excess of private market practice, or in excess of amounts charged by the owner to unassisted tenants. Any such PHA-required restriction must be specified in the HAP contract.)

b. When the family moves out of the contract unit, the owner, subject to State and local law, may use the security deposit, including any interest on the deposit, as reimbursement for any unpaid rent payable by the tenant, any damages to the unit or any other amounts that the tenant owes under the lease.

c. The owner must give the tenant a list of all items charged against the security deposit, and the amount of each item. After deducting the amount, if any, used to reimburse the owner, the owner must promptly refund the full amount of the unused balance to the tenant.

d. If the security deposit is not sufficient to cover amounts the tenant owes under the lease, the owner may collect the balance from the tenant.

16. Prohibition of Discrimination

In accordance with applicable equal opportunity statutes, Executive Orders, and regulations, the owner must not discriminate against any person because of race, color, religion, sex, national origin, age, familial status or disability in connection with the lease. Eligibility for HUD's programs must be made without regard to actual or perceived sexual orientation, gender identity, or marital status.

17. Conflict with Other Provisions of Lease

a. The terms of the tenancy addendum are prescribed by HUD in accordance with Federal law and regulation, as a condition for Federal assistance to the tenant and tenant's family under the Section 8 voucher program.

b. In case of any conflict between the provisions of the tenancy addendum as required by HUD, and any other provisions of the lease or any other agreement between the owner and the tenant, the requirements of the HUD-required tenancy addendum shall control.

18. Changes in Lease or Rent

a. The tenant and the owner may not make any change in the tenancy addendum. However, if the tenant and the owner agree to any other changes in the lease, such changes must be in writing, and the owner must immediately give the PHA a copy of such changes. The lease, including any changes, must be in accordance with the requirements of the tenancy addendum.

b. In the following cases, tenant-based assistance shall not be continued unless the PHA has approved a new tenancy in accordance with program requirements and has executed a new HAP contract with the owner:

(1) If there are any changes in lease requirements governing tenant or owner responsibilities for utilities or appliances;

(2) If there are any changes in lease provisions governing the term of the lease;

(3) If the family moves to a new unit, even if the unit is in the same building or complex.

c. PHA approval of the tenancy, and execution of a new HAP contract, are not required for agreed changes in the lease other than as specified in paragraph b.

d. The owner must notify the PHA of any changes in the amount of the rent to owner at least sixty days before any such changes go into effect, and the amount of the rent to owner following any such agreed change may not exceed the reasonable rent for the unit as most recently determined or redetermined by the PHA in accordance with HUD requirements.

19. Notices

Any notice under the lease by the tenant to the owner or by the owner to the tenant must be in writing.

20. Definitions

Contract unit. The housing unit rented by the tenant with assistance under the program.

Family. The persons who may reside in the unit with assistance under the program.

HAP contract. The housing assistance payments contract between the PHA and the owner. The PHA pays housing assistance payments to the owner in accordance with the HAP contract.

Household. The persons who may reside in the contract unit. The household consists of the family and any PHA-approved live-in aide. (A live-in aide is a person who resides in the unit to provide necessary supportive services for a member of the family who is a person with disabilities.)

Housing quality standards (HQS). The HUD minimum quality standards for housing assisted under the Section 8 tenant-based programs.

HUD. The U.S. Department of Housing and Urban Development.

HUD requirements. HUD requirements for the Section 8 program. HUD requirements are issued by HUD headquarters, as regulations, Federal Register notices or other binding program directives.

Lease. The written agreement between the owner and the tenant for the lease of the contract unit to the tenant. The lease includes the tenancy addendum prescribed by HUD.

PHA. Public Housing Agency.

Premises. The building or complex in which the contract unit is located, including common areas and grounds.

Program. The Section 8 housing choice voucher program.

Rent to owner. The total monthly rent payable to the owner for the contract unit. The rent to owner is the sum of the portion of rent payable by the tenant plus the PHA housing assistance payment to the owner.

Section 8. Section 8 of the United States Housing Act of 1937 (42 United States Code 1437f).

Tenant. The family member (or members) who leases the unit from the owner.

Voucher program. The Section 8 housing choice voucher program. Under this program, HUD provides funds to a PHA for rent subsidy on behalf of eligible families. The tenancy under the lease will be assisted with rent subsidy for a tenancy under the voucher program.

ROCHESTER
Housing Authority

Leasing Operations
675 W Main Street
Rochester, NY 14611
(585) 697-6105 phone
(585) 697-6104 fax

VOUCHER EXTENSION REQUEST FORM

Under the Section 8 Housing Choice Voucher (HCV) Program, participants have 90 days to find a suitable unit when they are first issued a voucher. Generally, a HCV is only extended when there has been a demonstrable effort to locate housing on the part of the HCV holder and/or serious extenuating circumstances have occurred. In order to request an extension, you must make the request in writing and supply us with supporting documentation, which supports the reason you did not find suitable housing by the original expiration date. Please note: In situations where serious, extenuating circumstances have prevented a family from locating a unit, the length of an extension will be equal to the length of the emergency. Proper documentation is ***required*** to verify this duration of time.

NAME:	Arthur Matthews
ADDRESS:	360 St Paul St #1002
PHONE:	585 481 9855
EMAIL:	Arthurjmatthews96@icloud.com
SIGNATURE:	**DATE:** 4-1-25

Please state the reason you have not been able to locate a unit within 60 days:

due I lived here 20½ years and same one
Servent. same one found for me 1st Apartment strong Ties
Helped me find this one. M
Dec 1 2024
unit failed mid lease inspection - st simonian was fined.

☐ **I have attached supporting documentation that supports my request.**

Once we receive this completed form with your supporting documentation, we will evaluate your request. We will contact you at the phone number you listed above with our decision.

FOR OFFICE USE ONLY
SUPPORTING DOC RECVD y/n
___APPROVED _____Days
___DENIED
MANAGER'S SIGNATURE:_____
DATE: _____
7-8-14

Return by: _____
Return to: _____

EQUAL HOUSING OPPORTUNITY

Please Note: Under the Section 8 Housing Choice Voucher (HCV) Program regulations, participants have 90 days to find a suitable unit when they are first issued a voucher. Generally, a voucher is only extended when the participant **has demonstrated efforts made** to locate housing, and/or serious extending circumstances have occurred. In order to request an extension, you must make the request **in writing** and provide us with supporting documentation, to support the reason(s) you did not find suitable housing by the original expiration date. In situations where **serious, extenuating circumstances** have prevented a family from finding a unit, the length of an extension will be equal to the length of the emergency. **Proper documentation is *needed*** to verify this duration of time. **In all cases except where RHA finds that an extension is due to a reasonable accommodation for a family with a disabled family member, the initial voucher term plus extension(s) may not exceed 120 DAYS. For reasonable accommodations, the total term of the voucher plus extensions may not exceed 150 DAYS.**

Record of Search for Housing

Instructions: This form will help you keep a record of your search for housing. Enter the information requested on each house/apartment that you look at.

Date	Address	Rental Amount	Owner's Name & Phone	Reason Not Rented
2/14/25	211 pembrook		A Ellen	second floor Bad Knees
3/1/25	pembrook	$1250.00	A Ellen	Paper work Issues -
	131 pembrook	$1290.00	A Ellen	Paper work RHA

Created 5/23/2023.

Updated DHuertas