

NEW OWNER/MANAGEMENT AGREEMENT INFORMATION

Changes in owner/management of Housing Choice Voucher (HCV) properties should be reported to GHA immediately. Please carefully read the information below and provide the required documents to the GHA Finance Department as soon as possible.

Required documents include:

- Proof of ownership:
 - final settlement statement with signatures of the title company, buyer and seller;
 - · recorded deed; or
 - · recorded contract of sale.
- Completed HCV New Owner Setup Request
- Completed W-9
- If the owner is an individual, a legible copy of the social security card
- If the owner is a company or corporation, a copy of the Internal Revenue Service (IRS) letter issuing the EIN
- Copy of a state-issued picture driver's license or identification card
- Authorization for Direct Deposit of HAP or UAP Check and a copy of a cancelled check or bank account information to authorize direct deposit of HAP payments. GHA does not issue paper checks.
- Owner/Landlord/Management Personnel Responsibilities & Code of Conduct Obligations signed
- Management agreement If the payee listed on the W-9 is a party other than the owner

GHA will execute the *Housing Assistance Payment (HAP) Contract* for you to review and sign. The signed *HAP Contract* may be returned to GHA by email, USPS or expedited mail service. A fax copy of the signed contract is not acceptable.

Once all of the required documents <u>and</u> signed *HAP Contract* are received, GHA will deposit the HAP payments to the new owner/management's requested bank account.

Please note the following important information and requirements:

- You are required to enforce the current lease between the previous owner/manager and the HCV resident/head of household (resident). The previous owner should provide you with a copy of the lease.
- Upon the acquisition of the unit:
 - You cannot request the resident to move if there is a lease in place (unless there is a court-awarded judgment). You will be required to wait until the end of the current lease to give the resident and GHA the notice to vacate. The lease will document the number of days to give written notice to the resident. GHA requests a 60-day written notice processing and to give the resident an opportunity to find affordable housing.
 - If there is no lease in place, you are required to give the resident <u>and</u> GHA 60-day written notice to vacate for processing and to give the resident an opportunity to find affordable housing.
- > You cannot request a rent adjustment until 60 days prior to the end/final day of the current lease.
- You can request a rent adjustment only once a year during the resident's annual recertification process.
- You are required to give the resident a written 60-day notice of intent to request a rent adjustment.
- You are required to give the resident and GHA 60-day notice if the appliances and utilities listed in the lease and HAP Contract change responsibility or assignment.
- The owner must provide GHA a copy of any repetitive lease violations, non-payment of rent, unauthorized occupants, etc. GHA does not enforce the lease between you and the resident.
- The owner must provide GHA a copy of any eviction filed in the *Galveston County Courts* and a copy of the court-awarded judgment.
- The owner must notified GHA in writing the intent to sale/transfer the property to a new owner/ manager.

If you need additional information or have any questions, please contact Ashland Ray at pr@ghatx.org or (409) 765-1996.

HCV/PBV New Owner Set-UP

Owner Information	Managing Agent	Payee Agent for HAP
SSN or Tax ID	SSN <u>or</u> Tax ID	SSN or TaxID
Owner/Company Name	Owner/Company Name	Owner/Company Name
Contact Person	Contact Person	Contact Person
DBA, if applicable	DBA, if applicable	DBA, if applicable
Street Address	Street Address	Street Address
Apt. or Suite Number	Apt. or Suite Number	Apt. or Suite Number
City	City	City
State	State	State
Zip Code	Zip Code	Zip Code
Phone Number	Phone Number	Phone Number
Phone Number	Phone Number	Phone Number
Email - required	Email - required	Email - required
Property Address		

You are required to provide the following before GHA will will process any HAP deposits:

Proof of Ownership: final statement with signatures of the title company, buyer and seller, recorded deed or recorded contract of sale

Completed W-9. GHA will mail the annual 1099-Miscellaneous Income Statement for the previous year by January 31.

Social Security Card copy if the owner is an individual

IRS letter copy when the EIN was issued for a company or corporation

Management agreement if the payee listed on the W-9 is a party other than the owner

Completed Authorization for Direct Deposit of HAP or UAP Check and a canceled check

Signed Owner/Landlord/Management Personnel Responsibilities & Code of Conduct Obligations

The initial HAP deposit will not be processed until GHA receives the initial signed HAP Contract and all required financial documents.

You are required to immediately notify GHA in writing of any intent to sell, sale or change in management of any unit occupied by a GHA resident.

Failure to adhere to HUD and/or GHA policies and procedures and the Owner/Land/Management Personnel Responsibilities & Code of Conduct Obligations may result in youlyour company being removed from the program.

Date	Date	Date
Submitted by	Approved by	Process by

Updated 8/2017

(Rev. December 2014) Department of the Treasury Internal Revenue Service

Request for Taxpayer Identification Number and Certification

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

	l													
	1 Name (as shown on your income to	.ax return). Name is required	d on this line; do n	ot leave this line blank.										
ge 2.	2 Business name/disregarded entity	name, if different from abo	ve	÷.			_			-				
Print or type See Specific Instructions on page	3 Check appropriate box for federal tax classification; check only one of the following seven boxes: Individual/sole proprietor or C Corporation S Corporation Partnership Trust/estate single-member LLC							4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):						
돌襟 l	☐ Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P≖partnership) ▶							Exempt payee code (if any)						
Print or type Instructions	Note. For a single-member LLC the tax classification of the sing	that is disregarded, do not le-member owner.	check LLC; chec	k the appropriate box in	n the line	above	e for	1	nptlor e (if ar		FAT	CA rep	orting	
둔등	☐ Other (see instructions) ►							(Аррін	es to ac	counts m	aintai	ned outsid	e the U.	S.J
pecifi	5 Address (number, street, and apt.	or suite no.)		·	Reques	ster's r	ame	and ac	Idress	(optio	onai)			
See S	6 City, state, and ZIP code			· · · · · · · · · · · · · · · · · · ·										
-7	7 List account number(s) here (option													
Par	Taxpayer Identific	ation Number (TIN	l)	•				_						
Entery	our TIN in the appropriate box. I	he TIN provided must m	natch the name	given on line 1 to av	oid	Soc	ial se	curity	numl	рег				
backu	withholding. For individuals, thi	s is generally your social	I security number	er (SSN). However, f	or a	\Box	Т	\neg	$\overline{\Box}$		Г	Т	T	
reside	it alien, sole proprietor, or disreg , it is your employer identification	arded entity, see the Par	rt I instructions	on page 3. For other				-	1		-			
TIN on	page 3.	Triumber (Env). It you do	o not nave a nur	nber, see How to ge	ra						L			
<u></u>														
Note. If the account is in more than one name, see the instructions for line 1 and the chart on page 4 for guidelines on whose number to enter.				100110	T	OII II II	11100	- T	_					
3							- 1	-						
David	0-48-4					<u> </u>								
Part														
	penalties of perjury, I certify that													
1. The	number shown on this form is π	ly correct taxpayer ident	tification numbe	r (or I am waiting for	a numb	er to	be is	sued	to m	e); an	d			
Ser	not subject to backup withhold rice (IRS) that I am subject to bac onger subject to backup withhold	ckup withholding as a re	empt from back sult of a failure	up withholding, or (b to report all interest) I have or divide	not b ends,	een or (c	notifie) the (d by RS h	the ir as no	nteri itifie	nal Red d me t	venu hat l	e am
	a U.S. citizen or other U.S. pers													
	FATCA code(s) entered on this fo													
interes genera instruc	eation instructions. You must one you have failed to report all into paid, acquisition or abandonme by, payments other than interest ions on page 3.	erest and dividends on y ent of secured property, o	your tax return. I cancellation of c	For real estate transa debt, contributions to	actions, o an ind	item lividua	2 do	es not remer	app	ly. Fo anger	men men	ortgag	e and	-
Sign Here	Signature of U.S. person ►			Da	ite ►									
Gen	eral Instructions			Form 1098 (home mo	rtgage in	terest)	, 109	B-E (st	udent	loan i	ntere	est), 109	98-T	

Section references are to the Internal Revenue Code unless otherwise noted. Future developments. Information about developments affecting Form W-9 (such as legislation enacted after we release it) is at www.irs.gov/fw9.

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 1099-5 (proceeds from real estate transactions)
- . Form 1099-K (merchant card and third party network transactions)

- (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? on page 2.

By signing the filled-out form, you:

- 1. Certify that the TIN you are giving is correct (or you are waiting for a number to be issued),
- 2. Certify that you are not subject to backup withholding, or
- 3. Claim exemption from backup withholding if you are a U.S. exempt payee. If applicable, you are also certifying that as a U.S. person, your allocable share of any partnership income from a U.S. trade or business is not subject to the withholding tax on foreign partners' share of effectively connected income, and
- 4. Certify that FATCA code(s) entered on this form (if any) indicating that you are exempt from the FATCA reporting, is correct. See What is FATCA reporting? on page 2 for further information.

GALVESTON HOUSING AUTHORITY AUTHORIZATION FOR DIRECT DEPOSIT OF HAP OR UAP CHECK

I authorize the **GALVESTON HOUSING AUTHORITY** to remit my Housing Assistance Payment Check (HAP) or Utility Assistance Payment (UAP) to my account at the financial institution indicated below. I further authorize the **GALVESTON HOUSING AUTHORITY** to initiate a withdrawal if an overpayment is made in error; and adjustments or correct errors before the direct deposit is made.

☐ Start direct deposit	☐ Change my account	☐ Stop direct deposit
Name of the Bank or Financial Institution		
Branch		
Address		
City	State	Zip Code
☐ Checking Account ☐ Savings A	account	
Account Number	Routing (ABA) N	lumber
This authorization remains effective u	until revoked in writing or until clie	nt separates from the program.
Please confirm your bank's routing no	umber with your bank and attach	a voided check.
Name	Tax ID or SSN _	
Company or Business Name		
Address		
City	State	Zip Code
Telephone Number ()	Cell Phone Num	ber ()
Email Address		
Electronic processing reduces the op- therefore, direct deposit systems prov	portunity for correcting errors beforite preauthorization of the correction of the c	ore the deposits are made; tions to your account.
To change banks or accounts, a new weeks before the payment date.	Authorization Form must be com	pleted and submitted at least two
To discontinue direct deposit, send a before the payment date.	written notice to the GHA Finance	e Department at least two weeks
Signature	Date	II .

Housing Choice Voucher Property Owner/Landlord/Management Personnel Responsibilities & Code of Conduct Obligations

The Galveston Housing Authority (Housing Authority) strives to implement a best in class Housing Choice Voucher (HCV) Program. The Housing Authority considers Property Owners/Landlords/Management Personnel (Property Owners) as partners in the implementation of the HCV program. In order to be eligible to participate as a partner with Housing Authority in this important program, Property Owners must abide by the U.S. Department of Housing and Urban Development (HUD) regulations 24 CFR 982.452, which holds Property Owners responsible for performing all owner obligations under the Housing Assistance Payment (HAP) Contract and the lease. Additionally, the Housing Authority expects that Property Owners to adhere to a professional Code of Conduct when interacting with the Housing Authority staff as well as program participants/tenants.

Property Owners and Code of Conduct Obligations:

- Must thoroughly screen and interview families who apply for units
- · Must comply with all fair housing laws and equal opportunity requirements
- Must maintain the property in compliance with HUD Housing Quality Standards and make repairs in a timely manner
- Must comply with the terms of the HAP Contract
- Collect security deposits and the tenant's monthly rent portion
- Manage the property and enforce the lease
- Notify the Housing Authority in writing immediately if the family violates the lease and provide a copy of the lease violation given to the participant/tenant
- Must notify the Housing Authority if a family vacates the property
- Must notify the Housing Authority of an ownership change
- Attend the initial Property Owner orientation as well as at least one Landlord meeting per year. The meetings
 provide program guidance, information, and any program changes to participating Property Owners.
- · Must adhere to the Housing Authority timelines and office policies
- Must not engage in any illegal acts such as fraud, bribery, or any corrupt or criminal act in connection with any federal housing program
- Must communicate professionally at all times with both Housing Authority staff and participants/tenants. Abusive behavior will not be tolerated and is defined below:
 - Abusive conduct: Acts and/or omissions that a reasonable person would find hostile, based on the severity, nature, and frequency of conduct, including, but not limited to repeated infliction of verbal abuse, such as the use of derogatory remarks, insults and epithets; verbal or physical conduct of a threatening, intimidating or humiliating nature; sabotage.
 - o Verbal Abuse: Vulgar, profane and demeaning language or tone of voice.
 - o **Intimidating behavior:** Threats or other conduct that in any way create a hostile environment, impair operations, or frighten, alarm, or inhibit others. Verbal intimidation may include making false statements that are malicious, disparaging, derogatory, disrespectful, abusive, or rude.
 - o **Threat:** Any oral or written expression or gesture that would be interpreted by a reasonable person as conveying intent to cause physical harm to persons or property.
 - o **Sexual Harassment:** Unwelcome advances, requests for sexual favors and any other verbal, visual or physical conduct of a sexual nature.
 - Assault: To attack someone physically or verbally, causing bodily or emotional injury, pain, and/or distress. This might involve the use of a weapon, and includes actions such as hitting, punching, pushing, poking, or kicking.

Property Owner/Landlord/Management Acknowledgement

The Galveston Housing Authority will terminate all HAP contracts for Property Owners who fail to adhere to the Property Owner/Landlord/Management Personnel Responsibilities and Code of Conduct Obligations.

Property Owner/Landford/ Management Signature	Date
Mailing Address	City, State and Zip Code

