

## **Please Read This Packet**

---

**Everything in this packet goes to the  
NEW PROPERTY OWNER**

**WE CANNOT PROCESS THIS PACKET WITHOUT THE  
FOLLOWING INFORMATION**

- **REQUEST FOR TENANCY APPROVAL (RFTA) SIGNED BY  
TENANT AND PROPERTY OWNER**
- **W-9 FORM**
- **DIRECT DEPOSIT FORM WITH VOIDED CHECK**
- **PROOF OF OWNERSHIP**
- **NOTICE CONCERNING VIOLENCE AGAINST WOMEN ACT**
- **If the tenant has a child under the age of 6: LETTER OF LEAD  
COMPLIANCE**
- **CERTIFICATE OF FITNESS**
- **If the tenant will be paying for water and sewer: PROVIDE  
METERING INFORMATION**
- **COPY OF LEASE TO BE USED**



**REVERE HOUSING AUTHORITY**  
Section 8 Office  
82 Cooledge Street  
Revere, MA 02151

**Phone: 781-284-1700**  
**Fax: 781-286-8093**

## **REQUEST FOR TENANCY APPROVAL PACKET**

Tenant: \_\_\_\_\_ Proposed move-in date: \_\_\_\_\_

Landlord: \_\_\_\_\_ Tel #: \_\_\_\_\_

LL Email: \_\_\_\_\_

Dear Landlord,

Welcome to Revere Housing Authority's Rental Subsidy Program.

The Request for Tenancy Approval Packet with all required documents must be submitted by the 5<sup>th</sup> of the month, prior to lease-up, to initiate payment for the 1<sup>st</sup> of the following month.

RFTA forms must be completed by the Landlord and returned with the documents listed below:

- ☐ **Proof of Ownership** (Copy of a Deed or tax bill bearing the Owners name)
- ☐ **Valid photo ID**
- ☐ **Voided check for Direct Deposit**
- ☐ **Certificate of Occupancy/Fitness** (City where unit is located)
- ☐ **Lead Paint Compliance Certificate** (Required by law if renting to a family with children under the age of 6 yrs. old)

### ***Important next steps in the process:***

1. Paperwork will be reviewed for program compliance. If the requested rent is over the program standards the Section 8 Coordinator will contact, you.
2. McCright Inspection Company will contact you directly to schedule an appointment for the unit to be inspected. (781-353-3112). Inspections must **"Pass"** prior to tenant moving into the unit.
3. Housing Assistance Payment (HAP) Contracts and Tenancy Addendums will be mailed to you. These legally binding documents must be signed and returned to RHA along with a copy of 1-year lease. When RHA has confirmed that the terms of the lease agree with the terms of the HAP Contract the tenant can move into the unit and HAP payments are generated.

*Owners/Agents should screen applicants for rent payment history, eviction history, a history of damage to units, and other factors related to the family's suitability as a tenant.*

## **IT IS IMPERATIVE AS A PARTICIPATING LANDLORD TO UNDERSTAND YOUR ROLE**

The PHA's Selection of a family to participate in the housing choice voucher program is not in any way an endorsement of tenancy nor a prediction of positive family behavior. It is the owner's responsibility to screen the family's behavior or suitability for tenancy.

Such responsibility includes, but is not limited to the following:

1. The owner is responsible for screening and selection of family based on a family's tenancy history. The owner may consider a family's background regarding factors such as:
  - Payment of rent and utility bills
  - Caring for a unit/premises
  - Respecting the right of other residents to the peaceful enjoyment of their housing
  - Drug-related criminal activity or other criminal activity that is a threat to the health, safety, or property of others
  - Compliance with other essential conditions of tenancy, etc.

FURTHERMORE, as a participating landlord, you are also required to resume the following responsibilities as well:

2. Compliance with the housing Assistance Payment (HAP) contract
3. Normal landlord functions during the lease term (e.g., Maintenance, rent collection)
4. Compliance with assisted lease (agreement between landlord and tenant family)
5. Compliance with equal opportunity requirements
6. Collection of amounts due from family under the lease (e.g , tenant share of rent, Security deposit, other tenant charge for damage to the assisted unit)
7. Enforcement of the landlord/tenant lease agreement
8. Payments for the owner-supplied utilities and services
9. Modification to the units as reasonable accommodations (if applicable)

## **NOTICE TO OWNERS, AGENTS AND PROPERTY MANAGERS**

Processing Request for Tenancy Approval (RTA)

### **How you will be affected and what this means to you as it pertains to the following:**

#### **Leases**

The lease must be a standard form used by the owner in locality

And must;

- Comply with state and local law
- Apply generally to unassisted tenants in the same property

Certification in HAP contract

The lease must spell out which utilities and appliances are supplied by the owner and which are supplied by the family. If you are not currently using a lease for unassisted tenants, the housing Authority may offer a lease to you please let us know your current circumstances by checking off the box below that applies to you:

- ☐ Yes, I currently use a standard lease form for unassisted tenants
- ☐ No, I do not currently use a standard lease form for unassisted tenants

You replied YES, please attach a completed copy of the standard form lease you are currently using to the request for lease approval. If you replied NO, the Revere Housing Authority will supply you with a standard form lease as a courtesy.

#### **Please note:**

If you use a standard form lease, a Tenancy Addendum required by HUD will be provided by the Housing authority and must be attached to the lease. The Housing Assistance Payment contract entered between the landlord and the RHA will include the Tenancy Addendum.

#### **ASSIGNMENT OF OWNER AGENT FORM:**

You are an owner who wishes to assign an agent to act on your behalf you will be required to submit a statement to that affect which must be witness or notarized. As an alternative, attached is a standardized form which may also be used. Housing Assistance Payment contracts cannot be executed by an owner agent otherwise.

#### **RECORD OF PROPERTY OWNERSHIP:**

Copy of the recorded Deed, which corresponds with the address of the rental unit noted on the attached RTA, must be submitted with the RTA to verify ownership.

#### **CONTRACT RENT AFFORDABILITY DETERMINATION:**

The assigned case worker will upon receipt of the attached RTA conduct an affordability determination to ensure the tenants share of the rent meets program requirements and does not exceed 40% of their income. In the event the request contract rent is determined not affordable, the case worker will contact the owner/agent.

#### **RENT REASONABLE DETERMINATION:**

The RHA MUST ensure that rent charges by owner to section 8 program Participants are reasonable. This determination will be conducted by the Housing Search Specialist (HSS) and involves two comparisons. First, a comparison of the rent for the voucher unit will be compared to rents for similar unassisted units in the marketplace. Second, a comparison will be determined between the contract rent requested and the rents for similar units on the premises. The RHA CANNOT execute a Housing Assistance Contract (HAP Contract) until RHA has documented that the request rent is reasonable. In the event there are discrepancies you will be contacted by the HSS.

#### **WHEN CAN A TENANT BE BILLED DIRECTLY FOR WATER**

Tenant can be billed directly for the water ONLY if the following requirements are met: 1) Submeters are installed to measure apartments use of water 2) Low-Flow water fixtures are installed, 3) There is a written rental agreement that spells out water bill arrangements, 4) Tenancy started after March 16, 2005, 5) Previous tenant was not forced out, 6) Landlord has filed proper certification. If there is a failure to meet any one of the requirements, the tenants CANNOT be billed for water. Any questions regarding these requirements, contact the Revere Housing Authority, 781-284-1700.

# REVERE HOUSING AUTHORITY

## SECTION 8 HOME AND BUILDING INSPECTION

When a home is being considered for Section 8 approval, an inspection is conducted, and the unit must comply with all Housing Quality Standards. This form will highlight the most basic areas that must conform to HQS.

### BUILDING EXTERIOR:

- Yard must be free of all debris and trash.
- Grounds must be in reasonably good conditions.
- Front and rear porches must be in good repair and free from all tripping hazards. Rails needed where applicable.
- Front and rear porch lights must be present and working.
- Exterior siding must be in good condition with no excess of peeling of paint.
- Fences must not be in despair and falling.

### BUILDING INTERIOR:

- All common hallways must have working smoke detectors. This varies with type and size of building.
- Means of lighting in all common hallways must be present and working, either operated by a wall switch, pull strings, or motion detector.
- All exterior doors must have locking capabilities.
- Stairs must be in good condition, no broken or loose trends.

### BASEMENT:

- Must be free of moisture, mildew, and mold.
- Stairways to basement must have a proper handrail for safety.
- Have proper means of lighting the stairways.
- Have a working smoke detector.

#### INTERIOR OF DWELLING UNIT:

- Excessive peeling paint must not be present in any room.
- All windows must open and close as intended.
- All windows must have locks and screens. Locks must be in working conditions and screens must be free of holes.
- One C/O detector is required for each living level, wall mounted at eye level or plug in type and must be properly working.
- A working smoke detector is required on the ceiling outside each bedroom. One smoke detector is required for bedrooms situated side by side.
- All appliances that are provided must be clean and in good working conditions, free of any rust.
- All plumbing must be free of defects and working properly.
- All floors must be carpeted or properly finished with no tripping hazards.
- All receptacles must have proper cover plates and be in working condition.
- All rooms must have means lighting.
- Entire unit must be clean in broom swept condition.
- Bathroom must have means of ventilation- Exhaust fan and/ or window.
- All electrical receptacles (plug in) must be properly working.

This list covers the most important and obvious areas for inspection, it must not be considered as all inclusive. This document is aimed to give landlords an overview of the inspections process and to make them aware of the key areas the inspectors will be examining.

Please take the necessary steps to correct problem areas before our inspectors go out to examine the site.

Respectfully,

Revere Housing Authority

Revere Housing Authority  
HUD- SECTION 8 OFFICE  
82 Cooledge Street  
Revere, MA 02151  
(781-)284-1700

### **HOUSING ASSISTANCE PROGRAM ABUSE AND/ OR FRAUD BY LANDLORDS**

The Housing Authority is responsible for preventing intentional fraud and/ or program abuse by housing assistance landlords. Areas of potential housing assistance program abuse and/ or fraud by landlords include:

- Non- collection of the tenant rent-share-rent directly from the tenant
- Collecting false amounts for unpaid tenant rent, damages and/or vacancy losses
- Collecting any (side payments) in excess of the tenant-share-rent
- Collecting housing assistance payments for unit that are not occupied by housing assistance program participants
- Bribing Housing Authority employees to certify substandard unit as standard or to approve rent in excess of reasonable

If housing assistance program abuse and/or fraud is suspected, the Housing Authority will:

- Meet with the landlord to review housing assistance program requirements and to further discuss the allegations
- Obtain any additional pertinent information and/or documentation from the appropriate sources

If housing assistance program abuse/ or fraud is submitted, the Housing Authority may take any or all of the following actions depending on the severity of the abuse and in accordance with the Department of Housing and Urban Development Regulations and/ or in accordance with the Housing Authority's Administrative policy:

- Abate the housing assistance payment until excessive amounts received are recovered
- Require repayment to the family of the full amount of any unauthorized (side payments) collected
- Require repayments to the Housing Authority of any false claims for the unpaid rent, tenant damages and/or vacancy losses
- Terminate the housing assistance payment contract
- Restrict or prohibit the landlord's future participation in the housing assistance program
- Forward cases of willful abuse to the Regional Inspector General (RIG) for investigation and/or possible prosecution
- Pursue prosecution through the state or local laws and/or civil courts
- Take any action in accordance with Department of Housing and Urban Development Regulations
- Take actions in accordance with the Housing Authority's administrative Policy

***Landlord, please acknowledge the receipt of this notice by signing below:***

\_\_\_\_\_  
Landlord or Authorized Agent

\_\_\_\_\_  
Date

Tenant's name: \_\_\_\_\_

Unit Address: \_\_\_\_\_



## Owner Appointment of Agent

I \_\_\_\_\_ the owner of the unit leased to  
\_\_\_\_\_ (Tenant) and located at  
\_\_\_\_\_ hereby designated  
\_\_\_\_\_ Of \_\_\_\_\_ as my Agent to act for me for  
the following purposes;

- All dealings of the owner with the Revere Housing Authority (RHA);
- Accepting receipts of the Housing Assistance Payment (HAP);  
(the HAP check will still be payable to the owner)
- Signing all documents required by the RHA related to the leased premises.

This appointment and Authorization shall be effective until written notice from the owner to the RHA is received by the Revere Housing Authority that this appointment has been terminated or otherwise amended.

\_\_\_\_\_  
Print Or Type Name of Owner

\_\_\_\_\_  
Daytime Phone Number

\_\_\_\_\_  
Owner Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Print or type Name of Agent

\_\_\_\_\_  
Daytime Phone Number

\_\_\_\_\_  
Agent Signature

\_\_\_\_\_  
Date

Subscribed and sworn to before me this

\_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_

\_\_\_\_\_  
Notary Public

-OR-

Signature and address of one person unrelated to you as witness.

\_\_\_\_\_  
Print or type Name of Witness

\_\_\_\_\_  
Date

# Request for Tenancy Approval

Housing Choice Voucher Program

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

OMB Approval No. 2577-0169  
exp. 04/30/2026

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.

1. Name of Public Housing Agency (PHA)			2. Address of Unit (street address, unit #, city, state, zip code)		
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
9. Structure Type <input type="checkbox"/> Single Family Detached (one family under one roof) <input type="checkbox"/> Semi-Detached (duplex, attached on one side) <input type="checkbox"/> Rowhouse/Townhouse (attached on two sides) <input type="checkbox"/> Low-rise apartment building (4 stories or fewer) <input type="checkbox"/> High-rise apartment building (5+ stories) <input type="checkbox"/> Manufactured Home (mobile home)			10. If this unit is subsidized, indicate type of subsidy: <input type="checkbox"/> Section 202 <input type="checkbox"/> Section 221(d)(3)(BMIR) <input type="checkbox"/> Tax Credit <input type="checkbox"/> HOME <input type="checkbox"/> Section 236 (insured or uninsured) <input type="checkbox"/> Section 515 Rural Development <input type="checkbox"/> 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	Paid by
Heating	<input type="checkbox"/> Natural gas <input type="checkbox"/> Bottled gas <input type="checkbox"/> Electric <input type="checkbox"/> Heat Pump <input type="checkbox"/> Oil <input type="checkbox"/> Other	
Cooking	<input type="checkbox"/> Natural gas <input type="checkbox"/> Bottled gas <input type="checkbox"/> Electric <input type="checkbox"/> Other	
Water Heating	<input type="checkbox"/> Natural gas <input type="checkbox"/> Bottled gas <input type="checkbox"/> Electric <input type="checkbox"/> Oil <input type="checkbox"/> Other	
Other Electric		
Water		
Sewer		
Trash Collection		
Air Conditioning		
Other (specify)		
		Provided by
Refrigerator		
Range/Microwave		

## 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.		
2.		
3.		

- 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.

**OMB Burden Statement:** The public reporting burden for this information collection is estimated to be 0.5 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. Collection of information about the unit features, owner name, and tenant name is voluntary. The information sets provides the PHA with information required to approve tenancy. 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 Notice:** The Department of Housing and Urban Development (HUD) is authorized to collect the information required on this form by 24 CFR 982.302. The form provides the PHA with information required to approve tenancy. The Personally Identifiable Information (PII) data collected on this form are not stored or retrieved within a system of record.

I/We, the undersigned, certify under penalty of perjury that the information provided above is true and correct. WARNING: Anyone who knowingly submits a false claim or makes a false statement is subject to criminal and/or civil penalties, including confinement for up to 5 years, fines, and civil and administrative penalties. (18 U.S.C. §§ 287, 1001, 1010, 1012; 31 U.S.C. § 3729, 3802).

Print or Type Name of Owner/Owner Representative		Print or Type Name of Household Head	
Owner/Owner Representative Signature		Head of Household Signature	
Business Address		Present Address	
Telephone Number	Date (mm/dd/yyyy)	Telephone Number	Date (mm/dd/yyyy)

# REVERE HOUSING AUTHORITY

## SECTION 8 HOUSING CHOICE VOUCHER PROGRAM

82 COOLEDGE STREET

REVERE, MA 02151

TELEPHONE (781) 284-1700

FAX (781) 286-8093

Owner is required to disclose other similar UNASSISTED unit's rentals amount for each apartment rented within the same Building and/ or the same locality for rent justification.

Subject Unit Address: \_\_\_\_\_  
(Number and street Name) (City) (State) (Zip Code)

How Many Apartments in this building? 1 2 3 4 5 6 7 8 9 10 or More (Circle one)

#	List each Apartment separately with Apt #	Number Of Bedroom	Date Tenancy Began	Utilities Included	Current Rent Amount
1					
2					
3					
4					
5					
6					
7					
8					

*Information provided will be used for rent justification only*

### **Owner/ Agents Certification:**

I, the undersigned, certify that the information above is true and accurate to the best of my knowledge.

**WARNING:** Title 18 U.S Code section 1001 states that the person is guilty of a felony for knowingly and willingly making false or fraudulent statements to any department or agency of the united states. State law may also provide penalties for false or fraudulent statements.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Title

\_\_\_\_\_  
Date

*Equal Housing Opportunity*

# REVERE HOUSING AUTHORITY

## SECTION 8 HOUSING CHOICE VOUCHER PROGRAM

82 COOLEIDGE STREET

REVERE, MA 02151

### HUD'S RULES AND REGULATIONS 24CFS 982.306 RESTRICTIONS ON LEASING TO RELATIVES

The Housing Authority (HA) must not approve a unit if the owner is the parent, Child, Grandparent, Grandchild, Sister or Brother of any family; unless the HA determines that approving the unit would provide reasonable accommodation for a family member who is a person with disabilities.

#### PROPERTY OWNER CERTIFICATION:

1. I, \_\_\_\_\_, the owner of the property located at \_\_\_\_\_, hereby certify that

I AM NOT a relative of MR./Ms. \_\_\_\_\_

Signed under the pains and penalties of perjury.

\_\_\_\_\_  
Signature of Owner

\_\_\_\_\_  
Date

2. I, \_\_\_\_\_, the owner of the property located at \_\_\_\_\_, hereby certify that

I AM a relative of Mr./Ms. \_\_\_\_\_ I would like to request an exception to the above rule for the following reasons:

\_\_\_\_\_ The family's household has one or more persons(s) with disabilities.

\_\_\_\_\_ The family's household has one or more elderly person(s).

Signed under the pains and penalties of perjury.

\_\_\_\_\_  
Signature of Owner

\_\_\_\_\_  
Date

## SECTION 8 LANDLORD CERTIFICATION

RE: \_\_\_\_\_

Street address of assisted Unit

\_\_\_\_\_  
City/Town

\_\_\_\_\_  
State

\_\_\_\_\_  
Zip

### Ownership of Assisted Unit

I certify that I am the legal owner or the legally designated agent for the above referenced unit and the prospective tenant has no ownership interest in this dwelling unit whatsoever.

### Approved Residents of Assisted Unit

I understand that the family members listed on the dwelling lease agreement as approved by the Housing Authority are the only individuals permitted to reside in the unit. I also understand that I am not permitted to live in the unit while I am receiving housing assistance payments.

### Housing Quality Standards

I understand my obligations in compliance with the Housing Assistance Payments Contract to perform necessary maintenance so the unit continues to comply with Housing Quality Standards.

### Tenant Rent Payments

I understand that the amount of the tenant's portion of the contract rent is determined by the Housing Authority, and that it is illegal to charge any additional amounts for rent which have not been specifically approved by the Housing Authority.

### Reporting Vacancies to the Housing Authority

I understand that should the assisted unit become vacant, I am responsible to notify the Housing Authority immediately in writing.

### Administrative and Criminal Actions for Intentional Violations

I understand that failure to comply with the terms and responsibilities of the Housing Assistance Payments contract is grounds for termination of participations in the Section 8 Program. I understand that knowingly falsifying material facts is a violation of State Federal Criminal law.

\_\_\_\_\_, Date \_\_\_\_\_, 20\_\_\_\_

Signature of Landlord/ Agent

.....

**WARNING** Title 18 US Code Section 1001 states that a person is guilty of a felony for knowingly and willingly making a false or fraudulent statement to any Department or Agency of the United States. State law may also provide penalties for false or fraudulent statements.

# Request for Taxpayer Identification Number and Certification

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

► Go to [www.irs.gov/FormW9](http://www.irs.gov/FormW9) for instructions and the latest information.

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.	
	2 Business name/disregarded entity name, if different from above	
	3 Check appropriate box for federal tax classification of the person whose name is entered on line 1. Check only <b>one</b> of the following seven boxes.  <input type="checkbox"/> Individual/sole proprietor or single-member LLC <input type="checkbox"/> Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Partnership) ► _____ <b>Note:</b> 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 <b>not</b> 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. <input type="checkbox"/> 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) _____  <i>(Applies to accounts maintained outside the U.S.)</i>	
	5 Address (number, street, and apt. or suite no.) See instructions.	Requester's name and address (optional)
	6 City, state, and ZIP code	
	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									
				-					

## Part II Certification

Under penalties of perjury, I certify that:

- 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
- 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
- I am a U.S. citizen or other U.S. person (defined below); and
- 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.

**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](http://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.



## REVERE HOUSING AUTHORITY

### Section 8

82 Coolidge Street, Revere Massachusetts 02151

Phone: 781-284-1700 FAX: 781-286-8093 / 781-286-8094

---

### ELECTRONIC FUNDS TRANSFER

Dear Landlord,

The Revere Housing Authority will make all Housing Assistance Payments by Electronic Transfer (Direct Deposit). **THIS PROGRAM IS MANDATORY.**

Please fill in the form below and **attach a copy of a voided check** from your checking account to be used as verification. Both items are necessary for us to process your payments.

We require 10 days for an account set up, which may mean that your first payment will be done by check and mailed to you. **ALL PAYMENTS** after that will be directly deposited into your designated account on the **1<sup>st</sup> day of each month.**

**Electronic Funds Transfer of Housing Assistance Payments to your account will be posted on the 1<sup>st</sup> of each month. Should the 1<sup>st</sup> of the month fall on a Saturday, Sunday, or Holiday, direct deposit will be made within two (2) business days following the 1<sup>st</sup>.**

If you have any questions regarding this matter, please call our office at 781-286-1700.

Thank you.

---

Landlord Name (as it appears on your check)

---

Telephone Number

---

Landlord Address (Street or P.O. Box, City, State, Zip)

---

Bank Routing Number

---

IRS TAX ID (Social Security Number of FID)

---

Bank Account Number





## **REVERE HOUSING AUTHORITY POLICY ON RELEASING INFORMATION TO PROSPECTIVE LANDLORDS**

The Revere Housing Authority will provide the prospective landlords with the following information upon the landlord's request:

1. The family's current address (as shown in the Revere Housing Authority Records);
2. The name and address (If known to the Revere Housing Authority) of the landlords of the family's current and prior address.

The above information will be provided when a landlord reference request form is completed and signed by the tenant (Head of Household). The landlord reference request form must be submitted together with the request for lease approval the request will indicate the name of the landlord and the address to which the Revere Housing Authority must send this information. The above information will not be given over the telephone.

The landlord is RESPONSIBLE for screening tenants.

The Revere Housing Authority will not provide the same types of information to all families and all landlords.

# Tenant Lead Law Notification

## What lead paint forms must owners of rental homes give to new tenants?

Before renting a home built before 1978, the property owner and the new tenant must sign two copies of this **Tenant Lead Law Notification** and **Tenant Certification Form**, and the property owner must give the tenant one of the signed copies to keep. If any of the following forms exist for the unit, tenants must also be given a copy of them: lead inspection or risk assessment report, Letter of Compliance, or Letter of Interim Control. **This form is for compliance with both Massachusetts and federal lead notification requirements.**

## What is lead poisoning and who is at risk of becoming lead poisoned?

Lead poisoning is a disease. It is most dangerous for children under six years old. It can cause permanent harm to young children's brain, kidneys, nervous system and red blood cells. Even at low levels, lead in children's bodies can slow growth and cause learning and behavior problems. Young children are more easily and more seriously poisoned than others, but older children and adults can become lead poisoned too. Lead in the body of a pregnant woman can hurt her baby before birth and cause problems with the pregnancy. Adults who become lead poisoned can have problems having children, and can have high blood pressure, stomach problems, nerve problems, memory problems and muscle and joint pain.

## How do children and adults become lead poisoned?

Lead is often found in paint on the inside and outside of homes built before 1978. The lead paint in these homes causes almost all lead poisoning in young children. The main way children get lead poisoning is from swallowing lead paint dust and chips. Lead is so harmful that even a small amount can poison a child. Lead paint under layers of nonlead paint can still poison children, especially when it is disturbed, such as through normal wear and tear and home repair work.

Lead paint dust and chips in the home most often come from peeling or chipping lead painted surfaces; lead paint on moving parts of windows or on window parts that are rubbed by moving parts; lead paint on surfaces that get bumped or walked on, such as floors, porches, stairs, and woodwork; and lead paint on surfaces that stick out which a child may be able to mouth such as window sills.

Most lead poisoning is caused by children's normal behavior of putting their hands or other things in their mouths. If their hands or these objects have touched lead dust, this may add lead to their bodies. A child can also get lead from other sources, such as soil and water, but these rarely cause lead poisoning by themselves. Lead can be found in soil near old, lead-painted homes. If children play in bare, leaded soil, or eat vegetables or fruits grown in such soil, or if leaded soil is tracked into the home from outside and gets on children's hands or toys, lead may enter their bodies. Most adult lead poisoning is caused by adults breathing in or swallowing lead dust at work, or, if they live in older homes with lead paint, through home repairs.

## How can you find out if someone is lead poisoned?

Most people who are lead poisoned do not have any special symptoms. The only way to find out if a child or adult is lead poisoned is to have his or her blood tested. Children in Massachusetts must be tested at least once a year from the time they are between nine months and one year old until they are four years old. Your doctor, other health care provider or Board of Health can do this. A lead poisoned child will need medical care. A home with lead paint must be delead for a lead poisoned child to get well.

## What kind of homes are more likely to have lead paint?

In 1978, the United States government banned lead from house paint. Lead paint can be found in all types of homes built before 1978: single-family and multi-family; homes in cities, suburbs or the countryside; private housing or state or federal public housing. The older the home, the more likely it is to have lead paint. The older the paint, the higher its lead content is likely to be.

## **Can regular home repairs cause lead poisoning?**

There is a danger of lead poisoning any time painted surfaces inside or outside the home are scraped for repainting, or woodwork is stripped or removed, or windows or walls are removed. This is because lead paint is found in almost all Massachusetts homes built before 1978, and so many of Massachusetts' homes are old. Special care must be taken whenever home repair work is done. No one should use power sanders, open flame torches, or heat guns to remove lead paint, since these methods create a lot of lead dust and fumes. Ask the owner of your home if a lead inspection has been done. The inspection report will tell you which surfaces have lead paint and need extra care in setting up for repair work, doing the repairs, and cleaning up afterwards. Temporarily move your family (especially children and pregnant women) out of the home while home repair work is being done and cleaned up. If this is not possible, tape up plastic sheets to completely seal off the area where the work is going on. No one should do repair work in older homes without learning about safe ways to do the work to reduce the danger of lead dust. Hundreds of cases of childhood and adult lead poisoning happen each year from home repair work.

## **What can you do to prevent lead poisoning?**

- Talk to your child's doctor about lead.
- Have your child tested for lead at least once a year until he/she is four years old.
- Ask the owner if your home has been deleaded or call the state Childhood Lead Poisoning Prevention Program (CLPPP) at 1-800-532-9571 or [www.mass.gov/dph/clppp](http://www.mass.gov/dph/clppp). You can also check with your local Board of Health.
- Tell the owner if you have a new baby, or if a new child under six years old lives with you.
- If your home was deleaded, but has peeling paint, tell and write the owner. If he/she does not respond, call CLPPP or your local Board of Health.
- Make sure only safe methods are used to paint or make repairs to your home, and to clean up afterwards.
- If your home has not been deleaded, you can do some things to temporarily reduce the chances of your child becoming lead poisoned. You can clean your home regularly with paper towels and any household detergent and warm water to wipe up dust and loose paint chips. Rub hard to get rid of more lead. When you are done, put the dirty paper towels in a plastic bag and throw them out. The areas to clean most often are window wells, sills, and floors. Wash your child's hands often (especially before eating or sleeping) and wash your child's toys, bottles and pacifiers often. Make sure your child eats foods with lots of calcium and iron, and avoid foods and snacks that are high in fat. If you think your soil may have lead in it, have it tested. Use a door mat to help prevent dirt from getting into your home. Cover bare leaded dirt by planting grass or bushes, and use mats, bark mulch or other ground covers under swings and slides. Plant gardens away from old homes, or in pots using new soil. Remember, the only way to permanently lower the risk of your child getting lead poisoned is to have your home deleaded if it contains lead paint.

## **How do you find out where lead paint hazards may be in a home?**

The only way to know for sure is to have a lead inspection or risk assessment done. The lead inspector will test the surfaces of your home and give the landlord and you a written report that tells you where there is lead in amounts that are a hazard by state law. For interim control, a temporary way to have your home made safe from lead hazards, a risk assessor does a lead inspection plus a risk assessment. During a risk assessment, the home is checked for the most serious lead hazards, which must be fixed right away. The risk assessor would give the landlord and you a written report of the areas with too much lead and the serious lead hazards. Lead inspectors and risk assessors have been trained, licensed by the Department of Public Health, and have experience using the state-approved methods for testing for lead paint. These methods are use of a sodium sulfide solution, a portable x-ray fluorescence machine or lab tests of paint samples. There is a list of licensed lead inspectors and risk assessors at [www.mass.gov/cph/clppp](http://www.mass.gov/cph/clppp).

## **In Massachusetts, what must the owner of a home built before 1978 do if a child under six years old lives there?**

An owner of a home in Massachusetts built before 1978 must have the home inspected for lead if a child under six years old lives there. If lead hazards are found, the home must be deleaded or brought under interim control. Only a licensed deleader may do high-risk deleading work, such as removing lead paint or repairing chipping and peeling

lead paint. You can get a list of licensed deleaders from the state Department of Labor and Workforce Development. Deleaders are trained to use safe methods to prepare to work, do the deleading, and clean up. Either a deleader, the owner or someone who works for the owner who is not a licensed deleader can do certain other deleading and interim control work. Owners and workers must have special training to perform the deleading tasks they may do. After the work is done, the lead inspector or risk assessor checks the home. He or she may take dust samples to test for lead, to make sure the home has been properly cleaned up. If everything is fine, he or she gives the owner a Letter of Compliance or Letter of Interim Control. After getting one of these letters, the owner must take care of the home and make sure there is no peeling paint.

### **What is a Letter of Compliance?**

It is a legal letter under state law that says either that there are no lead paint hazards or that the home has been deleaded. The letter is signed and dated by a licensed lead inspector.

### **What is a Letter of Interim Control?**

It is a legal letter under state law that says work necessary to make the home temporarily safe from serious lead hazards has been done. The letter is signed and dated by a licensed risk assessor. It is good for one year, but can be renewed for another year. The owner must fully delead the home and get a Letter of Compliance before the end of the second year.

### **Where can I learn more about lead poisoning?**

Massachusetts Department of Public Health  
Childhood Lead Poisoning Prevention Program (CLPPP)  
(For more copies of this form, as well as a full range of information on lead poisoning prevention, tenants' rights and responsibilities under the MA Lead Law, how to clean lead dust and chips, healthy foods to protect your children, financial help for owners, safe deleading and renovation work, and soil testing.)  
1-800-532-9571 or 781-774-6611  
[www.mass.gov/dph/clppp](http://www.mass.gov/dph/clppp)

Massachusetts Department of Labor and  
Workforce Development  
(List of licensed deleaders)  
617-626-6960

Your local lead poisoning prevention program  
or your Board of Health, [www.mhoa.com/roster.htm](http://www.mhoa.com/roster.htm)

U.S. Consumer Product Safety Commission  
(Information about lead in consumer products)  
1-800-638-2772 or [www.cpsc.gov](http://www.cpsc.gov)

U.S. Environmental Protection Agency, Region I  
(Information about federal laws on lead)  
617-918-1328 or [www.epa.gov/lead/](http://www.epa.gov/lead/)

National Lead Information Center  
(General lead poisoning information)  
1-800-424-Lead (or 5323)

# Tenant Certification Form

## Required Federal 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. The **Massachusetts Tenant Lead Law Notification and Certification Form** is for compliance with state and federal lead notification requirements.

## Owner'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) \_\_\_\_\_ Owner/Lessor has no knowledge of lead-based paint and/or lead-based paint hazards in the housing.

(b) Records and reports available to the owner/lessor (Check (i) or (ii) below):

(i) \_\_\_\_\_ Owner/ Lessor has provided the tenant with all available records and reports pertaining to lead -based paint and/or lead-based paint hazards in the housing (circle documents below).

Lead Inspection Report; Risk Assessment Report; Letter of Interim Control; Letter of Compliance

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

## Tenant's Acknowledgment (initial)

(c) \_\_\_\_\_ Tenant has received copies of all documents circled above.

(d) \_\_\_\_\_ Tenant has received no documents listed above.

(e) \_\_\_\_\_ Tenant has received the Massachusetts Tenant Lead Law Notification.

## Agent's Acknowledgment (initial)

(f) \_\_\_\_\_ Agent has informed the owner/lessor of the owner's/lessor's obligations under federal and state law for lead-based paint disclosure and notification 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.

Owner/Lessor	Date	Owner/Lessor	Date
Tenant	Date	Tenant	Date
Agent	Date	Agent	Date

## Owner/Managing Agent Information for Tenant (Please Print):

Name	Street	Apt.
City/Town	Zip	Telephone

\_\_\_\_\_ I (owner/managing agent) certify that I provided the Tenant Lead Law Notification/ Tenant Certification Form and any existing Lead Law documents to the tenant, but the tenant refused to sign this certification.

The tenant gave the following reason: \_\_\_\_\_

The Massachusetts Lead Law prohibits rental discrimination, including refusing to rent to families with children or evicting families with children because of lead paint.

Contact the Childhood Lead Poisoning Prevention Program for information on the availability of this form in other languages.

**Tenant and owner must each keep a completed and signed copy of this form.**

CLPPP95-17 Rev.8/09

# LANDLORD REFERENCE REQUEST

Under the Section 8 Certificate and Voucher Program Conforming Rule, the Revere Housing Authority is required to provide a prospective Section 8 Landlord (if requested) with the family's current address and the names of the family's current and previous landlords (if Known). The prospective landlord is responsible for the screening of tenant. The Revere Housing Authority will provide the same type of information to all families and owners.

## THIS SECTION IS TO BE COMPLETED BY TENANT

I, \_\_\_\_\_, Request that the following be release

(HEAD OF HOUSEHOLD)

To \_\_\_\_\_

(NAME OF LANDLORD WHO IS SUBMITTING REQUEST OF LEASE APPROVAL)

\_\_\_\_\_

(NO. AND STREET MAILING ADDRESS OF LANDLORD)

\_\_\_\_\_

(CITY OR TOWN, STATE AND ZIP CODE OF LANDLORD)

\_\_\_\_\_  
(SIGNATURE OF HEAD OF HOUSEHOLD) (DATE)

.....

## THIS SECTION IS TO BE COMPLETED BY THE REVERE HOUSING AUTHORITY:

### INFORMATION TO BE RELEASED

Name and address of current landlord: \_\_\_\_\_

\_\_\_\_\_

Name and address of previous landlord: \_\_\_\_\_

\_\_\_\_\_

## REVERE HOUSING AUTHORITY

R E V E R E

REVERE, MASSACHUSETTS

### **IMPORTANT NOTICE CONCERNING VIOLENCE AGAINST WOMEN ACT FOR OWNERS AND PROPERTY MANAGERS**

A federal law that went into effect in 2013 protects individuals who are victims of domestic violence, dating violence, sexual assault, and stalking. The name of the law is the Violence against Women Act, or "VAWA." This notice explains your obligations under VAWA.

#### **PROTECTIONS FOR VICTIMS**

You cannot refuse to rent to an applicant solely because he or she is a victim of domestic violence, dating violence, sexual assault, or stalking.

You cannot evict a tenant who is the victim of domestic violence, dating violence, sexual assault, or stalking based on acts or threats of violence committed against the victim. Also, criminal acts directly related to the domestic violence, dating violence, sexual assault, or stalking that are caused by a household member or guest cannot be cause for evicting the victim of the abuse.

#### **PERMISSIBLE EVICTIONS**

You can evict a victim of domestic violence, dating violence, sexual assault, or stalking if you can demonstrate that there is an actual and imminent (immediate) threat to other tenants or employees at the property if the victim is not evicted. Also, you may evict a victim for serious or repeated lease violations that are not related to the domestic violence, dating violence, sexual assault, or stalking. You cannot hold a victim of domestic violence, dating violence, sexual assault, or stalking to a more demanding standard than you hold tenants who are not victims.

#### **REMOVING THE ABUSER FROM THE HOUSEHOLD**

You may bifurcate (split) the lease to evict a tenant who has committed criminal acts of violence against family members or others, while allowing the victim and other household members to stay in the unit. If you choose to remove the abuser, you may not take away the remaining tenants' rights to the unit or otherwise punish the remaining tenants. In removing the abuser from the household, you must follow federal, state, and local eviction procedures.

#### **CERTIFICATION OF DOMESTIC VIOLENCE, DATING VIOLENCE, SEXUAL ASSAULT, OR STALKING**

If a tenant asserts VAWA's protections, you can ask the tenant to certify that he or she is a victim of domestic violence, dating violence, sexual assault, or stalking. You are not required to demand official documentation and may rely upon the victim's statement alone. If you choose to request certification, you must do so in writing and give the tenant at least 14 business days to provide documentation. You are free to extend this deadline. A tenant can certify that he or she is a victim by providing any one of the following three documents:

- A completed, signed HUD-approved certification form. The most recent form is HUD- 50066. This form is available at the housing authority or online at <http://www.hud.gov/offices/adm/hudclips/forms/hud5.cfm>.
- A statement from a victim service provider, attorney, or medical professional who has helped the victim address incidents of domestic violence, dating violence, sexual assault, or stalking. The professional must state that he or she believes that the incidents of abuse are real. Both the victim and the professional must sign the statement under penalty of perjury.
- A police or court record, such as a protective order.

If the tenant fails to provide one of these documents within 14 business days, you may evict the tenant if authorized by otherwise applicable law and lease provisions.

#### **CONFIDENTIALITY**

You must keep confidential any information a tenant provides to certify that he or she is a victim of

domestic violence, dating violence, sexual assault, or stalking. The victim should inform you if the release of the information would put his or her safety at risk. You cannot enter the information into a shared database or reveal it to outside entities unless:

- The tenant provides written permission releasing the information.
- The information is required for use in an eviction proceeding, such as to evict the abuser.
- Release of the information is otherwise required by law.

### VAWA AND OTHER LAWS

VAWA does not limit your obligation to honor court orders regarding access to or control of the property. This includes orders issued to protect the victim and orders dividing property among household members in cases where a family breaks up. VAWA does not replace any federal, state, or local law that provides greater protection for victims of domestic violence, dating violence, sexual assault, or stalking.

### ADDITIONAL INFORMATION

If you have any questions regarding VAWA, please contact Josh Fluke a 617-425-6678.

### DEFINITIONS

For purposes of determining whether a tenant may be covered by VAWA, the following list of definitions applies:

VAWA defines domestic violence to include felony or misdemeanor crimes of violence committed by any of the following:

- A current or former spouse of the victim;
- A person with whom the victim shares a child in common;
- A person who is cohabitating with or has cohabitated with the victim as a spouse;
- A person similarly situated to a spouse of the victim under the domestic or family violence laws of the jurisdiction receiving grant monies; or
- Any other person against an adult or youth victim who is protected from that person's acts under the domestic or family violence laws of the jurisdiction.

VAWA defines dating violence as violence committed by a person (1) who is or has been in a social relationship of a romantic or intimate nature with the victim AND (2) where the existence of such a relationship shall be determined based on a consideration of the following factors:

- The length of the relationship
- The type of relationship
- The frequency of interaction between the persons involved in the relationship

VAWA defines sexual assault as "any nonconsensual sexual act proscribed by federal, tribal, or state law, including when the victim lacks capacity to consent" ( 42 U.S.C. 13925(a)).

VAWA defines stalking as (A) (i) to follow, pursue, or repeatedly commit acts with the intent to kill, injure, harass, or intimidate another person OR (ii) to place under surveillance with the intent to kill, injure, harass, or intimidate another person AND (B) in the course of, or as a result of, such following, pursuit, surveillance, or repeatedly committed acts, to place a person in reasonable fear of the death of, or serious bodily injury to, or to cause substantial emotional harm to (i) that person, (ii) a member of the immediate family of that person, or (iii) the spouse or intimate partner of that person.

---

Owner/Agent Name

---

Date

---

Owner/Agent Signature

---

RAA Staff Name

---

Date

---

RAA Signature





## REVERE HOUSING AUTHORITY

### Section 8

82 Cooledge Street, Revere Massachusetts 02151  
Phone: 781-284-1700 FAX: 781-286-8093 / 781-286-8094

### Payment Standards effective 12/1/23

Metropolitan Area	Efficiency	1 Bedroom	2 Bedroom	3 Bedroom	4 Bedroom
Boston-Cambridge-Quincy FY 2024	\$2012-\$2212	\$2177-\$2377	\$2627-\$2827	\$3218-\$3418	\$3565-\$3765

*If all utilities **are not** included, the requested rent must be on the lower end of the rent range.*

