

**An Operational Smoke Detector is Required on Each Level of the Unit**

**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. 7/31/2022)

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 OM 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.

<b>1. Name of Public Housing Authority (PHA)</b> <b>Sonoma County Housing Authority</b> <b>1440 Guerneville Road Santa Rosa CA 95403</b> <b>Phone (707) 565-7500 Fax (707) 565-7583</b>	<b>2. Address of Unit</b> (street address, unit #, city, State, and zip code)  <b>Is this unit located within the City Limits of Santa Rosa? YES <input type="checkbox"/> NO <input type="checkbox"/></b>
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3. Requested Lease Start Date	4. Number of Bedrooms In Unit If Shared Rental, # of bedrooms being rented?	5. Year Constructed	6. Proposed Rent	7. Security Deposit Amt	8. Date Unit Available for Inspection
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**9. Type of House/Apartment** Manufactured Home  
 Single Family Detached     Attached (apartment, town home, condo, duplex, triplex, etc.)     Space Rent Only

**10. If the unit is subsidized, indicate type of subsidy:**  
 Section 202     Section 221(d)(3)(BMIR)     Section 236 (Insured or noninsured)     Section 515 Rural Development  
 Home     Tax Credit     Other (Describe Other Subsidy, including any State or Local Subsidy) \_\_\_\_\_

**10a. Is this unit designated as a Project Based Voucher (PBV) unit? Yes  No**

**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 any 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	Paid By	Specify Fuel Type (Please circle appropriate fuel type)
Heating		Natural Gas    Propane    Electric    Oil    Wood
Cooking		Natural Gas    Propane    Electric    Oil    Wood
Water Heating		Natural Gas    Propane    Electric    Oil    Wood
Other Electric		<b>For Housing Authority Use Only</b>
Water		
Sewer		
Trash Collection		
Item	Provided By	
Refrigerator		
Range		

**Does this unit share utilities with any other unit? YES  NO**

**12. Owners 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	Rent Amount
<b>1.</b>		
<b>2.</b>		
<b>3.</b>		

**b.** The owner (including a principle 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 a disability.

**c.** Direct Deposit is a requirement for HAP payment from the SCHA. The owner agrees to complete the paperwork for Direct Deposit processing.

**Upon request, the PHA will furnish the name, address and telephone number of current and prior landlords participating in the Section 8 Program with the subject participant.**

Print or Type Name of Owner or Owner Representative	Print or Type Name of Household Head
Owner/Owner Representative Signature	Signature (Household Head)
Business Address (street address, apt. number, city, State, zip)	Present Address of Family (street address, apt. number, city, State, zip)
Telephone Number	Date (mm/dd/yyyy)
Email Address	Email Address

**d. Check one of the following**  
 \_\_\_ Lead-based paints 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 own 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 the family if the unit is not approved.

**The PHA is not responsible for any rent for this unit until the unit passes inspection and the PHA executes a Housing Contract.**

IMPORTANT INFORMATION ABOUT THE  
**REQUEST FOR TENANCY APPROVAL** PROCESS

When a participant has located a suitable unit to rent and the property owner/manager is willing to rent that unit to the participant, the Request for Tenancy Approval (RTA) form (on reverse side) is completed by the Property Owner/Manager and submitted to the Housing Authority. Completing and submitting the form is the first step in scheduling an inspection of the unit. The following is a list of important facts about the process. If the following suggestions are followed, it will speed up the process and help avoid common pitfalls.

***ATTENTION: PARTICIPANT AND PROPERTY OWNERS/MANAGERS***

- Make sure the RTA is filled out completely.
- The Housing Authority is prohibited by Federal Regulations from starting rental assistance payments prior to the unit being physically inspected and passing Section 8 Housing Quality Standards(HQS). If the unit fails inspection, we will advise you, in writing, what corrective measures are necessary for it to pass.
- If the participant moves in prior to the completion of an HQS inspection, the participant will be responsible for 100% of the rent until the date the unit passes the Housing Authority HQS inspection. The Housing Authority will not make payments for any period of occupancy that occurs before the unit passes inspection.

***ATTENTION: PARTICIPANTS***

- After this form has been completed with a property owner or manager, bring it to the Housing Authority. We suggest you hand-carry the form in. We will accept Faxed copies to the Housing Authority office, our fax # is (707) 565-7583.
- If you are residing in a unit before it passes inspection, you will be responsible for the full rent until the date the unit passes the Housing Authority HQS inspection.

***ATTENTION: PROPERTY OWNER OR MANAGER***

- The lease or rental agreement must start on the same day as the Housing Assistance Payment (HAP) Contract. The Housing Authority cannot accept an existing lease or rental agreement. If a lease or rental agreement is currently in effect, a new lease or rental agreement will need to be executed.
- A HUD-prescribed Tenancy Addendum must be attached to your rental agreement or lease. We are attaching a copy of the Tenancy Addendum for your convenience.
- If you are a new owner to the Housing Authority, please provide a sample copy of the lease or rental agreement.
- The process works best, and the processing time shortened, if the owner or an owner's representative and the participant are present for the inspection. We will work with you to set a mutually acceptable inspection date and time.
- The Housing Authority will prepare a HAP Contract for signature. This is usually done at the time of inspection. To approve payment, we must have a signed HAP Contract, a signed copy of the current lease/rental agreement, Direct Deposit Authorization form, a Payee Data Record and, if appropriate, a Management Agreement. The timing of the first housing assistance payment to the property owner from the Housing Authority depends on how quickly we acquire the necessary documentation from all parties. Payments are made on the first working day of the month and at mid-month. The first payment depends on when the Housing Authority receives all of the required paperwork.

**IF YOU HAVE ANY QUESTIONS, PLEASE CALL OUR LANDLORD LINE – (707) 565-1259**