

Metropolitan Development and Housing Agency



Thank you for your interest in participating in the MDHA Housing Choice Voucher (HCV) Program. Our program provides rental assistance to Nashville, Davidson County very low income families, the elderly and the disabled so they may afford decent, safe, and sanitary housing. All participants must be selected from the MDHA waiting list, determined eligible and issued a Housing Choice Voucher before MDHA can assist them with their rent.

Landlords wishing to make units available to Housing Choice Voucher Program participants may list their property on the TNHousingSearch.org website. TNHousingSearch.org is a FREE online, searchable registry of housing in Tennessee. It is designed to help all Tennesseans with their housing-related needs. All types of housing are listed, whether for rent or for sale, and includes accessible, affordable, or age-restricted properties. The service is free for tenants and landlords to use, and can be accessed online 24 hours a day, seven days a week. For more information and to register to list your property, go to <http://www.tnhousingsearch.org/> or call the toll-free number 1-877-428-8844. **You do not have to register to search for properties.**

Once a family has received their Voucher from MDHA they are authorized to begin their search for a suitable unit, using the TNHousingSearch.org service or any other sources available to them. The family has sixty (60) days to locate a suitable unit and submit the HUD form Request for Tenancy Approval (RTA) to MDHA.

Generally, the family will provide the prospective landlord with a RTA. Additional copies are available at the MDHA Section 8 office or at <http://www.nashville-mdha.org/wp-content/uploads/2015/11/Request-for-Tenancy-Approval-9-14.pdf>. Both the family and the landlord are required to fill in all information, sign and submit the RTA along with a copy of the proposed lease to the Lease-Up Team at section8leasing@nashville-mdha.org or fax 615-687-9982. Note that there are certain guidelines for participation in the program. These guidelines are discussed in detail on the website and they include but are not limited to:

- The landlord is responsible for screening the prospective family.
- The landlord will use their lease and attach the HUD Tenancy Addendum provided by MDHA to it.
- The landlord may collect a security deposit, but it is limited to current market practice, and not more than one month's rent. The family pays the security deposit. ***MDHA does not pay or assist with the payment of the security deposit.*** Collection of the security deposit is strictly between the prospective family and the landlord.
- **Before** an inspection is initiated, the owner/landlord must provide:
 - A copy of their Warranty Deed or Settlement Statement;
 - A copy of a management agreement, if applicable;
 - A W-9 form, available under Downloads on the Owners page of our website at <http://www.nashville-mdha.org/rental-assistance-voucher-program/>, along with verification of the SSN or EIN (copy of SS card or letter from IRS);
 - A Direct Deposit Authorization form - also available on website, along with a voided check (deposit slips are not acceptable).
- The unit must pass HQS inspection before MDHA assistance may begin – see <http://www.nashville-mdha.org/wp-content/uploads/2015/02/InspectionChecklist1.pdf>. If the family is responsible for paying for any utility, the utility service must be turned on in the head of household's name before MDHA assistance may begin.

Within 3-7 business days from the date the RTA is received, MDHA will determine whether or not the family is eligible for the unit. If eligible, a request for an inspection will be forwarded to the Section 8 inspector and they will contact the landlord within the next 3-7 business days to schedule the inspection; if the family is not eligible, both the family and the landlord will be notified and informed of any changes necessary in order for the family to be eligible. If it cannot be worked out, the family will have to locate another unit.



Metropolitan Development and Housing Agency

Rental Assistance Department

620 Dew Street • Nashville, Tennessee 37206

Mailing Address: P O Box 846 Nashville, Tennessee 37202

Telephone (615) 252-6500 • TDD (615) 252-8599 • FAX (615) 252-6614

www.nashville-mdha.org section8@nashville-mdha.org

HAP Contract Transfer – Currently Subsidized Unit

Today's Date _____

Date of Purchase _____

Address of Property: _____

(If multiple properties attach a list of properties on separate page)

I, _____ certify I am the new owner/manager of the above referenced property that is currently being subsidized through an MDHA rental assistance program. I agree to accept the terms and conditions of the current lease and the Housing Assistance Payments Contract as if I had signed them originally. **I further certify that the owner (including a principal or other interested party) is not the parent, child, grandparent, grandchild, sister or brother of any member of the assisted family.**

Attached are the following required documents. **I understand no payments will be made to me until all documents have been provided.**

Proof of Ownership and Management Agreement, if applicable

I have an owner account already, and my MDHA Vendor ID# is _____

I do not have an owner account and am attaching the following:

- W-9 Certification
- Verification of tax id number. **This must originate from the IRS or SSA and show both the name of the individual/entity and the tax id number associated with that individual/entity.**
- MDHA Direct Deposit Authorization form
- Voided check (Deposit slips are not acceptable)

Name of New Owner/Agent _____

Address _____

City, State, Zip _____

Telephone Number _____

Fax Number _____

Email Address _____

New Owner/Agent Signature _____

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

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)		
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)		
Refrigerator		Provided by
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.

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)

Form **W-9**
(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.**

Print or type
See Specific Instructions on page 2.

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; check only one 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) ▶ _____ Note. For a single-member LLC that is disregarded, do not check LLC; check the appropriate box in the line above for the tax classification of the single-member 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.)	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 Part I instructions on page 3. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN* on page 3.

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.

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 on page 3.

Sign Here	Signature of U.S. person ▶	Date ▶
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General Instructions

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-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? on page 2.

By signing the filled-out form, you:

- Certify that the TIN you are giving is correct (or you are waiting for a number to be issued),
- Certify that you are not subject to backup withholding, or
- 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
- 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.

Note. If you are a U.S. person and a requester gives you a form other than Form W-9 to request your TIN, you must use the requester's form if it is substantially similar to this Form W-9.

Definition of a U.S. person. For federal tax purposes, you are considered a U.S. person if you are:

- An individual who is a U.S. citizen or U.S. resident alien;
- A partnership, corporation, company, or association created or organized in the United States or under the laws of the United States;
- An estate (other than a foreign estate); or
- A domestic trust (as defined in Regulations section 301.7701-7).

Special rules for partnerships. Partnerships that conduct a trade or business in the United States are generally required to pay a withholding tax under section 1446 on any foreign partners' share of effectively connected taxable income from such business. Further, in certain cases where a Form W-9 has not been received, the rules under section 1446 require a partnership to presume that a partner is a foreign person, and pay the section 1446 withholding tax. Therefore, if you are a U.S. person that is a partner in a partnership conducting a trade or business in the United States, provide Form W-9 to the partnership to establish your U.S. status and avoid section 1446 withholding on your share of partnership income.

In the cases below, the following person must give Form W-9 to the partnership for purposes of establishing its U.S. status and avoiding withholding on its allocable share of net income from the partnership conducting a trade or business in the United States:

- In the case of a disregarded entity with a U.S. owner, the U.S. owner of the disregarded entity and not the entity;
- In the case of a grantor trust with a U.S. grantor or other U.S. owner, generally, the U.S. grantor or other U.S. owner of the grantor trust and not the trust; and
- In the case of a U.S. trust (other than a grantor trust), the U.S. trust (other than a grantor trust) and not the beneficiaries of the trust.

Foreign person. If you are a foreign person or the U.S. branch of a foreign bank that has elected to be treated as a U.S. person, do not use Form W-9. Instead, use the appropriate Form W-8 or Form 8233 (see Publication 515, Withholding of Tax on Nonresident Aliens and Foreign Entities).

Nonresident alien who becomes a resident alien. Generally, only a nonresident alien individual may use the terms of a tax treaty to reduce or eliminate U.S. tax on certain types of income. However, most tax treaties contain a provision known as a "saving clause." Exceptions specified in the saving clause may permit an exemption from tax to continue for certain types of income even after the payee has otherwise become a U.S. resident alien for tax purposes.

If you are a U.S. resident alien who is relying on an exception contained in the saving clause of a tax treaty to claim an exemption from U.S. tax on certain types of income, you must attach a statement to Form W-9 that specifies the following five items:

1. The treaty country. Generally, this must be the same treaty under which you claimed exemption from tax as a nonresident alien.
2. The treaty article addressing the income.
3. The article number (or location) in the tax treaty that contains the saving clause and its exceptions.
4. The type and amount of income that qualifies for the exemption from tax.
5. Sufficient facts to justify the exemption from tax under the terms of the treaty article.

Example. Article 20 of the U.S.-China income tax treaty allows an exemption from tax for scholarship income received by a Chinese student temporarily present in the United States. Under U.S. law, this student will become a resident alien for tax purposes if his or her stay in the United States exceeds 5 calendar years. However, paragraph 2 of the first Protocol to the U.S.-China treaty (dated April 30, 1984) allows the provisions of Article 20 to continue to apply even after the Chinese student becomes a resident alien of the United States. A Chinese student who qualifies for this exception (under paragraph 2 of the first protocol) and is relying on this exception to claim an exemption from tax on his or her scholarship or fellowship income would attach to Form W-9 a statement that includes the information described above to support that exemption.

If you are a nonresident alien or a foreign entity, give the requester the appropriate completed Form W-8 or Form 8233.

Backup Withholding

What is backup withholding? Persons making certain payments to you must under certain conditions withhold and pay to the IRS 28% of such payments. This is called "backup withholding." Payments that may be subject to backup withholding include interest, tax-exempt interest, dividends, broker and barter exchange transactions, rents, royalties, nonemployee pay, payments made in settlement of payment card and third party network transactions, and certain payments from fishing boat operators. Real estate transactions are not subject to backup withholding.

You will not be subject to backup withholding on payments you receive if you give the requester your correct TIN, make the proper certifications, and report all your taxable interest and dividends on your tax return.

Payments you receive will be subject to backup withholding if:

1. You do not furnish your TIN to the requester,
2. You do not certify your TIN when required (see the Part II instructions on page 3 for details),

3. The IRS tells the requester that you furnished an incorrect TIN,

4. The IRS tells you that you are subject to backup withholding because you did not report all your interest and dividends on your tax return (for reportable interest and dividends only), or

5. You do not certify to the requester that you are not subject to backup withholding under 4 above (for reportable interest and dividend accounts opened after 1983 only).

Certain payees and payments are exempt from backup withholding. See *Exempt payee code* on page 3 and the separate Instructions for the Requester of Form W-9 for more information.

Also see *Special rules for partnerships* above.

What is FATCA reporting?

The Foreign Account Tax Compliance Act (FATCA) requires a participating foreign financial institution to report all United States account holders that are specified United States persons. Certain payees are exempt from FATCA reporting. See *Exemption from FATCA reporting code* on page 3 and the Instructions for the Requester of Form W-9 for more information.

Updating Your Information

You must provide updated information to any person to whom you claimed to be an exempt payee if you are no longer an exempt payee and anticipate receiving reportable payments in the future from this person. For example, you may need to provide updated information if you are a C corporation that elects to be an S corporation, or if you no longer are tax exempt. In addition, you must furnish a new Form W-9 if the name or TIN changes for the account; for example, if the grantor of a grantor trust dies.

Penalties

Failure to furnish TIN. If you fail to furnish your correct TIN to a requester, you are subject to a penalty of \$50 for each such failure unless your failure is due to reasonable cause and not to willful neglect.

Civil penalty for false information with respect to withholding. If you make a false statement with no reasonable basis that results in no backup withholding, you are subject to a \$500 penalty.

Criminal penalty for falsifying information. Willfully falsifying certifications or affirmations may subject you to criminal penalties including fines and/or imprisonment.

Misuse of TINs. If the requester discloses or uses TINs in violation of federal law, the requester may be subject to civil and criminal penalties.

Specific Instructions

Line 1

You must enter one of the following on this line; **do not** leave this line blank. The name should match the name on your tax return.

If this Form W-9 is for a joint account, list first, and then circle, the name of the person or entity whose number you entered in Part I of Form W-9.

a. **Individual.** Generally, enter the name shown on your tax return. If you have changed your last name without informing the Social Security Administration (SSA) of the name change, enter your first name, the last name as shown on your social security card, and your new last name.

Note. ITIN applicant: Enter your individual name as it was entered on your Form W-7 application, line 1a. This should also be the same as the name you entered on the Form 1040/1040A/1040EZ you filed with your application.

b. **Sole proprietor or single-member LLC.** Enter your individual name as shown on your 1040/1040A/1040EZ on line 1. You may enter your business, trade, or "doing business as" (DBA) name on line 2.

c. **Partnership, LLC that is not a single-member LLC, C Corporation, or S Corporation.** Enter the entity's name as shown on the entity's tax return on line 1 and any business, trade, or DBA name on line 2.

d. **Other entities.** Enter your name as shown on required U.S. federal tax documents on line 1. This name should match the name shown on the charter or other legal document creating the entity. You may enter any business, trade, or DBA name on line 2.

e. **Disregarded entity.** For U.S. federal tax purposes, an entity that is disregarded as an entity separate from its owner is treated as a "disregarded entity." See Regulations section 301.7701-2(c)(2)(iii). Enter the owner's name on line 1. The name of the entity entered on line 1 should never be a disregarded entity. The name on line 1 should be the name shown on the income tax return on which the income should be reported. For example, if a foreign LLC that is treated as a disregarded entity for U.S. federal tax purposes has a single owner that is a U.S. person, the U.S. owner's name is required to be provided on line 1. If the direct owner of the entity is also a disregarded entity, enter the first owner that is not disregarded for federal tax purposes. Enter the disregarded entity's name on line 2, "Business name/disregarded entity name." If the owner of the disregarded entity is a foreign person, the owner must complete an appropriate Form W-8 instead of a Form W-9. This is the case even if the foreign person has a U.S. TIN.

Line 2

If you have a business name, trade name, DBA name, or disregarded entity name, you may enter it on line 2.

Line 3

Check the appropriate box in line 3 for the U.S. federal tax classification of the person whose name is entered on line 1. Check only one box in line 3.

Limited Liability Company (LLC). If the name on line 1 is an LLC treated as a partnership for U.S. federal tax purposes, check the "Limited Liability Company" box and enter "P" in the space provided. If the LLC has filed Form 8832 or 2553 to be taxed as a corporation, check the "Limited Liability Company" box and in the space provided enter "C" for C corporation or "S" for S corporation. If it is a single-member LLC that is a disregarded entity, do not check the "Limited Liability Company" box; instead check the first box in line 3 "Individual/sole proprietor or single-member LLC."

Line 4, Exemptions

If you are exempt from backup withholding and/or FATCA reporting, enter in the appropriate space in line 4 any code(s) that may apply to you.

Exempt payee code.

- Generally, individuals (including sole proprietors) are not exempt from backup withholding.
- Except as provided below, corporations are exempt from backup withholding for certain payments, including interest and dividends.
- Corporations are not exempt from backup withholding for payments made in settlement of payment card or third party network transactions.
- Corporations are not exempt from backup withholding with respect to attorneys' fees or gross proceeds paid to attorneys, and corporations that provide medical or health care services are not exempt with respect to payments reportable on Form 1099-MISC.

The following codes identify payees that are exempt from backup withholding. Enter the appropriate code in the space in line 4.

1—An organization exempt from tax under section 501(a), any IRA, or a custodial account under section 403(b)(7) if the account satisfies the requirements of section 401(f)(2)

2—The United States or any of its agencies or instrumentalities

3—A state, the District of Columbia, a U.S. commonwealth or possession, or any of their political subdivisions or instrumentalities

4—A foreign government or any of its political subdivisions, agencies, or instrumentalities

5—A corporation

6—A dealer in securities or commodities required to register in the United States, the District of Columbia, or a U.S. commonwealth or possession

7—A futures commission merchant registered with the Commodity Futures Trading Commission

8—A real estate investment trust

9—An entity registered at all times during the tax year under the Investment Company Act of 1940

10—A common trust fund operated by a bank under section 584(a)

11—A financial institution

12—A middleman known in the investment community as a nominee or custodian

13—A trust exempt from tax under section 664 or described in section 4947

The following chart shows types of payments that may be exempt from backup withholding. The chart applies to the exempt payees listed above, 1 through 13.

IF the payment is for . . .	THEN the payment is exempt for . . .
Interest and dividend payments	All exempt payees except for 7
Broker transactions	Exempt payees 1 through 4 and 6 through 11 and all C corporations. S corporations must not enter an exempt payee code because they are exempt only for sales of noncovered securities acquired prior to 2012.
Barter exchange transactions and patronage dividends	Exempt payees 1 through 4
Payments over \$600 required to be reported and direct sales over \$5,000 ¹	Generally, exempt payees 1 through 5 ²
Payments made in settlement of payment card or third party network transactions	Exempt payees 1 through 4

¹ See Form 1099-MISC, Miscellaneous Income, and its instructions.

² However, the following payments made to a corporation and reportable on Form 1099-MISC are not exempt from backup withholding: medical and health care payments, attorneys' fees, gross proceeds paid to an attorney reportable under section 6045(f), and payments for services paid by a federal executive agency.

Exemption from FATCA reporting code. The following codes identify payees that are exempt from reporting under FATCA. These codes apply to persons submitting this form for accounts maintained outside of the United States by certain foreign financial institutions. Therefore, if you are only submitting this form for an account you hold in the United States, you may leave this field blank. Consult with the person requesting this form if you are uncertain if the financial institution is subject to these requirements. A requester may indicate that a code is not required by providing you with a Form W-9 with "Not Applicable" (or any similar indication) written or printed on the line for a FATCA exemption code.

A—An organization exempt from tax under section 501(a) or any individual retirement plan as defined in section 7701(a)(37)

B—The United States or any of its agencies or instrumentalities

C—A state, the District of Columbia, a U.S. commonwealth or possession, or any of their political subdivisions or instrumentalities

D—A corporation the stock of which is regularly traded on one or more established securities markets, as described in Regulations section 1.1472-1(c)(1)(i)

E—A corporation that is a member of the same expanded affiliated group as a corporation described in Regulations section 1.1472-1(c)(1)(i)

F—A dealer in securities, commodities, or derivative financial instruments (including notional principal contracts, futures, forwards, and options) that is registered as such under the laws of the United States or any state

G—A real estate investment trust

H—A regulated investment company as defined in section 851 or an entity registered at all times during the tax year under the Investment Company Act of 1940

I—A common trust fund as defined in section 584(a)

J—A bank as defined in section 581

K—A broker

L—A trust exempt from tax under section 664 or described in section 4947(a)(1)

M—A tax exempt trust under a section 403(b) plan or section 457(g) plan

Note. You may wish to consult with the financial institution requesting this form to determine whether the FATCA code and/or exempt payee code should be completed.

Line 5

Enter your address (number, street, and apartment or suite number). This is where the requester of this Form W-9 will mail your information returns.

Line 6

Enter your city, state, and ZIP code.

Part I. Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. If you are a resident alien and you do not have and are not eligible to get an SSN, your TIN is your IRS individual taxpayer identification number (ITIN). Enter it in the social security number box. If you do not have an ITIN, see *How to get a TIN* below.

If you are a sole proprietor and you have an EIN, you may enter either your SSN or EIN. However, the IRS prefers that you use your SSN.

If you are a single-member LLC that is disregarded as an entity separate from its owner (see *Limited Liability Company (LLC)* on this page), enter the owner's SSN (or EIN, if the owner has one). Do not enter the disregarded entity's EIN. If the LLC is classified as a corporation or partnership, enter the entity's EIN.

Note. See the chart on page 4 for further clarification of name and TIN combinations.

How to get a TIN. If you do not have a TIN, apply for one immediately. To apply for an SSN, get Form SS-5, Application for a Social Security Card, from your local SSA office or get this form online at www.ssa.gov. You may also get this form by calling 1-800-772-1213. Use Form W-7, Application for IRS Individual Taxpayer Identification Number, to apply for an ITIN, or Form SS-4, Application for Employer Identification Number, to apply for an EIN. You can apply for an EIN online by accessing the IRS website at www.irs.gov/businesses and clicking on Employer Identification Number (EIN) under Starting a Business. You can get Forms W-7 and SS-4 from the IRS by visiting IRS.gov or by calling 1-800-TAX-FORM (1-800-829-3676).

If you are asked to complete Form W-9 but do not have a TIN, apply for a TIN and write "Applied For" in the space for the TIN, sign and date the form, and give it to the requester. For interest and dividend payments, and certain payments made with respect to readily tradable instruments, generally you will have 60 days to get a TIN and give it to the requester before you are subject to backup withholding on payments. The 60-day rule does not apply to other types of payments. You will be subject to backup withholding on all such payments until you provide your TIN to the requester.

Note. Entering "Applied For" means that you have already applied for a TIN or that you intend to apply for one soon.

Caution: A disregarded U.S. entity that has a foreign owner must use the appropriate Form W-8.

Part II. Certification

To establish to the withholding agent that you are a U.S. person, or resident alien, sign Form W-9. You may be requested to sign by the withholding agent even if items 1, 4, or 5 below indicate otherwise.

For a joint account, only the person whose TIN is shown in Part I should sign (when required). In the case of a disregarded entity, the person identified on line 1 must sign. Exempt payees, see *Exempt payee code* earlier.

Signature requirements. Complete the certification as indicated in items 1 through 5 below.

1. Interest, dividend, and barter exchange accounts opened before 1984 and broker accounts considered active during 1983. You must give your correct TIN, but you do not have to sign the certification.

2. Interest, dividend, broker, and barter exchange accounts opened after 1983 and broker accounts considered inactive during 1983. You must sign the certification or backup withholding will apply. If you are subject to backup withholding and you are merely providing your correct TIN to the requester, you must cross out item 2 in the certification before signing the form.

3. Real estate transactions. You must sign the certification. You may cross out item 2 of the certification.

4. Other payments. You must give your correct TIN, but you do not have to sign the certification unless you have been notified that you have previously given an incorrect TIN. "Other payments" include payments made in the course of the requester's trade or business for rents, royalties, goods (other than bills for merchandise), medical and health care services (including payments to corporations), payments to a nonemployee for services, payments made in settlement of payment card and third party network transactions, payments to certain fishing boat crew members and fishermen, and gross proceeds paid to attorneys (including payments to corporations).

5. Mortgage interest paid by you, acquisition or abandonment of secured property, cancellation of debt, qualified tuition program payments (under section 529), IRA, Coverdell ESA, Archer MSA or HSA contributions or distributions, and pension distributions. You must give your correct TIN, but you do not have to sign the certification.

What Name and Number To Give the Requester

For this type of account:	Give name and SSN of:
1. Individual	The individual
2. Two or more individuals (joint account)	The actual owner of the account or, if combined funds, the first individual on the account ¹
3. Custodian account of a minor (Uniform Gift to Minors Act)	The minor ²
4. a. The usual revocable savings trust (grantor is also trustee) b. So-called trust account that is not a legal or valid trust under state law	The grantor-trustee ¹ The actual owner ¹
5. Sole proprietorship or disregarded entity owned by an individual	The owner ³
6. Grantor trust filing under Optional Form 1099 Filing Method 1 (see Regulations section 1.671-4(b)(2)(i)(A))	The grantor*
For this type of account:	Give name and EIN of:
7. Disregarded entity not owned by an individual	The owner
8. A valid trust, estate, or pension trust	Legal entity ⁴
9. Corporation or LLC electing corporate status on Form 8832 or Form 2553	The corporation
10. Association, club, religious, charitable, educational, or other tax-exempt organization	The organization
11. Partnership or multi-member LLC	The partnership
12. A broker or registered nominee	The broker or nominee
13. Account with the Department of Agriculture in the name of a public entity (such as a state or local government, school district, or prison) that receives agricultural program payments	The public entity
14. Grantor trust filing under the Form 1041 Filing Method or the Optional Form 1099 Filing Method 2 (see Regulations section 1.671-4(b)(2)(i)(B))	The trust

¹ List first and circle the name of the person whose number you furnish. If only one person on a joint account has an SSN, that person's number must be furnished.

² Circle the minor's name and furnish the minor's SSN.

³ You must show your individual name and you may also enter your business or DBA name on the "Business name/disregarded entity" name line. You may use either your SSN or EIN (if you have one), but the IRS encourages you to use your SSN.

⁴ List first and circle the name of the trust, estate, or pension trust. (Do not furnish the TIN of the personal representative or trustee unless the legal entity itself is not designated in the account title.) Also see *Special rules for partnerships* on page 2.

*Note. Grantor also must provide a Form W-9 to trustee of trust.

Note. If no name is circled when more than one name is listed, the number will be considered to be that of the first name listed.

Secure Your Tax Records from Identity Theft

Identity theft occurs when someone uses your personal information such as your name, SSN, or other identifying information, without your permission, to commit fraud or other crimes. An identity thief may use your SSN to get a job or may file a tax return using your SSN to receive a refund.

To reduce your risk:

- Protect your SSN,
- Ensure your employer is protecting your SSN, and
- Be careful when choosing a tax preparer.

If your tax records are affected by identity theft and you receive a notice from the IRS, respond right away to the name and phone number printed on the IRS notice or letter.

If your tax records are not currently affected by identity theft but you think you are at risk due to a lost or stolen purse or wallet, questionable credit card activity or credit report, contact the IRS Identity Theft Hotline at 1-800-908-4490 or submit Form 14039.

For more information, see Publication 4535, Identity Theft Prevention and Victim Assistance.

Victims of identity theft who are experiencing economic harm or a system problem, or are seeking help in resolving tax problems that have not been resolved through normal channels, may be eligible for Taxpayer Advocate Service (TAS) assistance. You can reach TAS by calling the TAS toll-free case intake line at 1-877-777-4778 or TTY/TDD 1-800-829-4059.

Protect yourself from suspicious emails or phishing schemes. Phishing is the creation and use of email and websites designed to mimic legitimate business emails and websites. The most common act is sending an email to a user falsely claiming to be an established legitimate enterprise in an attempt to scam the user into surrendering private information that will be used for identity theft.

The IRS does not initiate contacts with taxpayers via emails. Also, the IRS does not request personal detailed information through email or ask taxpayers for the PIN numbers, passwords, or similar secret access information for their credit card, bank, or other financial accounts.

If you receive an unsolicited email claiming to be from the IRS, forward this message to phishing@irs.gov. You may also report misuse of the IRS name, logo, or other IRS property to the Treasury Inspector General for Tax Administration (TIGTA) at 1-800-366-4484. You can forward suspicious emails to the Federal Trade Commission at: spam@uce.gov or contact them at www.ftc.gov/idtheft or 1-877-IDTHEFT (1-877-438-4338).

Visit IRS.gov to learn more about identity theft and how to reduce your risk.

Privacy Act Notice

Section 6109 of the Internal Revenue Code requires you to provide your correct TIN to persons (including federal agencies) who are required to file information returns with the IRS to report interest, dividends, or certain other income paid to you; mortgage interest you paid; the acquisition or abandonment of secured property; the cancellation of debt; or contributions you made to an IRA, Archer MSA, or HSA. The person collecting this form uses the information on the form to file information returns with the IRS, reporting the above information. Routine uses of this information include giving it to the Department of Justice for civil and criminal litigation and to cities, states, the District of Columbia, and U.S. commonwealths and possessions for use in administering their laws. The information also may be disclosed to other countries under a treaty, to federal and state agencies to enforce civil and criminal laws, or to federal law enforcement and intelligence agencies to combat terrorism. You must provide your TIN whether or not you are required to file a tax return. Under section 3406, payers must generally withhold a percentage of taxable interest, dividend, and certain other payments to a payee who does not give a TIN to the payer. Certain penalties may also apply for providing false or fraudulent information.



Metropolitan Development and Housing Agency

Rental Assistance Department

620 Dew Street • Nashville, Tennessee 37206

Mailing Address: P O Box 846 Nashville, Tennessee 37202

Telephone (615) 252-6500 • TDD (615) 252-8599 • FAX (615) 252-6614

www.nashville-mdha.org section8@nashville-mdha.org

AUTHORIZATION AGREEMENT FOR AUTOMATIC DEPOSIT (ACH DEPOSITS)

Company: Metropolitan Development and Housing Agency – Rental Assistance

Location: 620 Dew Street; Nashville, TN 37206

I hereby authorize MDHA to initiate credit entries and to initiate, if necessary, debit entries and adjustments for any credit entries in error to my (our) account designated. By acceptance of the funds through Direct Deposit, the owner certifies that to the best of his/her knowledge the dwelling unit is in decent, safe, and sanitary condition; the contracting family is in the unit and is expected to be there the entire month; the deposited amount is in accordance with the provisions of the HAP Contract; and all other facts and data in which this amount is based are true and correct.

Anyone submitting fraudulent information is subject to fine or imprisonment. (Title 18 U.S.C. 1001).

Written notification of all changes must be submitted to MDHA at least 20 days prior to payment date.

PLEASE ATTACH A VOIDED/CANCELLED CHECK

Deposit into: Checking or Savings (PLEASE CHECK ONE)

Type of Account: Personal or Corporate (PLEASE CHECK ONE)

Name(s) on Account: _____

Name of Bank: _____

Bank Routing Number _____

Bank Account Number: _____

Signature: _____ Date: ____ / ____ / ____

Phone: _____

E-Mail: _____

ALL CORRESPONDENCE SENT VIA EMAIL, INCLUDING ACH DEPOSIT STATEMENTS WILL BE SENT TO THIS EMAIL.

Landlord Registration Program

The Tennessee State legislature passed a bill requiring all owners of residential rental property to register their property (Tennessee Code Annotated Title 66, Chapter 28-101).

A notice to register is sent to all registered owners of property in Davidson County. The program requires the owners to submit information about their rental units. The bill requires owners to provide:

- Their full contact information – Name, physical address with contact telephone number (No PO Box)
- The number of units per property (duplex/triplex, etc.)
- Name and contact information for their manager or registered agent who can act on their behalf

This information is maintained in a database and will only be used in the event there is a codes violation at the property which requires correction.

There is a state mandated registration fee of \$10.00. This fee is to be paid by each landlord/residential property owner. Each landlord or property owner is required to pay a single fee for all rental property owned in the County. An owner who owns a single duplex or triplex would only have to pay \$10.00 for that property. If more than one property is owned, the fee is still only \$10.00 for that landlord/owner. ***The fee is paid annually.*** Owners of rental property should contact the Property Standards Office to register at 615-862-6590. The registration fee should be made out to “Metro Codes Administration”.

To download a copy of the registration form, go to

https://www.nashville.gov/Portals/0/SiteContent/Codes/docs/public_docs/Landlord%20Registration%20Form.pdf.

The form and registration fee will need to be submitted Metro Codes. Please see <https://www.nashville.gov/Codes-Administration.aspx> for more information.



HQS Pre-Inspection Checklist

This checklist is provided as a courtesy and is not all-inclusive. It is provided to give you an idea of the items that an Inspector will check for during an inspection. Please look your unit over carefully before the inspector comes out. If you check "No/Needs Repair" to any of these items, the unit WILL FAIL the HQS inspection.

ALL ROOMS	OK/YES	NO/NEEDS REPAIR
Is the unit free of any exposed wiring?		
Are all electrical and switch covers present, secure, and free from cracks? All three prong outlets must be grounded.		
Are all the windows supplied with window glass and do they open and close properly?		
Are all windows free from cracks, missing/broken panes, with no more than 10% moisture between panes that impedes the view?		
Do all windows have secure locks?		
Are doors leading to exterior properly weather stripped?		
Are all floors sound, intact and free from hazardous defects? For initial contracts, has carpet been freshly shampooed?		
Is carpet soiled or damaged free from rips, tears or fraying? Is there missing or damaged floor tile? Is the floor tile free from large cracks that would impose a tripping hazard?		
Are all walls sound, intact (no holes or bowing) and free from hazardous defects? Minor paint drips and small stress cracks are not reasons to fail an inspection.		
Are all painted surfaces free of deteriorated (chipping, peeling, cracking and chalking) paint? Are all repairs patched, sanded and painted?		
Are all floors free of tripping hazards (3/8 inch), such as torn linoleum or carpeting, any phone lines, cables or cords, etc.?		
Are all closet doors hung properly so that they do not fall?		
Is the carpet new or has it been freshly shampooed? Is it free from rips, tears, and fraying?		
Are all doors fitted to openings for privacy and have a door handle?		
Are all rooms free of any other potentially hazardous feature(s)?		
HEATING EQUIPMENT/AIR CONDITIONING	OK/YES	NO/NEEDS REPAIR
Is the heating equipment capable of providing adequate heat to all rooms used for living?		
Is the unit free from unvented fuel-burning space heaters or any other unsafe heating conditions?		

Are all window/wall air conditioning units installed to prevent air infiltration and with proper slant to the outside walls?		
HEATING EQUIPMENT/AIR CONDITIONING	OK/YES	NO/NEEDS REPAIR
Are all vents and ductwork in good condition, is all wrapping in good condition and secure to the ductwork? Is the tape used appropriate for that type of ductwork?		
If the furnace is in a closet, are the doors vented? Also, a gas hot water heater or a gas furnace cannot be located in a bedroom closet.		
BATHROOMS	OK/YES	NO/NEEDS REPAIR
Does the toilet operate properly? Is it secured to the floor? Is the toilet free from leaks?		
Does the sink provide hot and cold running water? Is there enough water pressure? Is the sink free from drips and /or leaks? Does the water drain properly?		
Does the tub or shower provide hot and cold running water?		
Does every bath area or toilet area have a fan vented to the outside or an openable window?		
Are all visible gaps around plumbing pipes properly sealed?		
Are all plumbing fixtures secured to the wall and operational?		
Do all toilet tanks have properly fitting lids without any cracks?		
If there is a toilet in the basement it must be vented to the outside. It must be enclosed with a privacy door or it can be removed and cap off all drains and lines.		
Is the washbasin and/or tub/shower free from hazardous cracks or chips that would impose a safety hazard?		
Are faucets fixtures rust free, in good repair and operational?		
HOT WATER HEATER	OK/YES	NO/NEEDS REPAIR
Does the hot water heater or pipes have leaks? Also are the pipes free from corrosion?		
Is the pressure relief valve free from leaks and does the discharge pipes extend to approximately six inches from floor?		
Are flame shields (cover plates) in place and properly installed?		
Is all electrical wiring encased in conduit?		
Is the flue pipe installed correctly and properly sealed?		
LAUNDRY ROOM	OK/YES	NO/NEEDS REPAIR
Is the dryer properly vented?		
Is the laundry area free of lint and debris?		

EXTERIOR OF UNIT	OK/YES	NO/NEEDS REPAIR
Are all painted surfaces free of deteriorated (chipping, peeling, cracking and chalking) paint?		
Is the foundation sound and free of hazards (deterioration, peeling paint, cracking, etc.)?		
Are exterior surfaces sound, intact (no holes) and free from hazards?		
Is the roof in good repair with shingles, coverings and flashing to prevent the entrance of moisture getting into the dwelling?		
Are the sidewalks, walkways and driveways free from tripping hazards?		
No vehicle shall at any time be in a state of major disassembly, disrepair or in the process of being stripped or dismantled on the property.		
Electric service cable to the house must be free from deterioration or else it must be replaced		
Any exterior vents must have operable vent hoods free from debris or damage.		
Is the correct building address and unit numbers posted and visible?		
Are all gutters & downspouts free of debris or damage and properly secured?		
Are all areas free of weeds or plant overgrowth? Lawns, shrubbery and trees must be cut during growing season.		
All structures on the property (garages, sheds etc.) will also be inspected even if the tenant does not have access to them or is not renting them. There cannot be any safety hazards present. I.e. Broken doors, collapsed roofs, rodent infestation.		
ADDITIONAL REQUIREMENTS	OK/YES	NO/NEEDS REPAIR
Is there a working smoke detector on each level of the dwelling?		
Is there a working Carbon Monoxide alarm? (For all units/buildings with fuel-burning appliance system/equipment or attached garage)		
Are all stairwells (interior and exterior) free from loose, broken or missing steps? Are the handrails properly secured?		
Is the unit free from an accumulation of garbage and debris inside and outside?		
Is the unit free from air pollutants? (Mold, mold like substances, sewer, gas, etc.)		
Is the neighborhood free from hazards, which would seriously endanger the health and safety of residents? (Abandoned and exposed buildings nearby, crumbled retaining walls attached to the property, located next to vacant uncared for properties that would be conducive for rodents or other infestation, etc.)		
Where there are four or more risers on the exterior and interior of the unit, is a handrail present?		
Are there any leaks in the plumbing lines, utility sinks, spickets, faucets, etc.?		

ADDITIONAL REQUIREMENTS	OK/YES	NO/NEEDS REPAIR
Have all inoperable appliances been removed from the premises?		
Are all utilities (water, gas, and electric) on?		
Are the utilities separated and clearly identified so as to ensure the tenant is only paying for utilities they are responsible for?		
Is the unit free of rodents and heavy accumulations of trash, garbage, or other debris that may harbor vermin, infestation by mice, roaches, or other vermin particular to the climate must also be considered? The unit must have adequate barriers to prevent infestation.		
KITCHEN	OK/YES	NO/NEEDS REPAIR
Have all appliances been cleaned and are they operational?		
Does the stove have all knobs intact and do all burners and the oven operate properly? Can you read the words on the dial?		
Is the refrigerator large enough for the family size and able to maintain appropriate temperature and have proper seals?		
Does the refrigerator have all handles and drawers?		
Are cabinets and drawers wiped down and clean? Walls should be clean, free of grease and food splatters.		
Are the counter tops clean and free from knife marks that will allow an accumulation of food/debris?		
Is there adequate space to store and prepare food?		
Does the sink provide hot and cold running water? Is it free of leaks? Does the water drain properly?		

If you have questions or need additional information about the inspection process, please call 615-780-7053 or email rainspectiondepartment@nashville-mdha.org.

Please note the expectation of MDHA is for the unit to be move-in “ready” when the unit is inspected. MDHA will note violations found during the inspection, but will not provide a “punch” list of repairs for owners. This checklist should be used to check for common HQS violations in preparation for the inspection.

The inspector **will not** complete an inspection if more than 12 violations are found and will mark the unit as not “ready”.

The landlord or their agent must be present during the initial inspection. If the unit fails inspection, a copy of the inspection report will be mailed, faxed or emailed to the landlord within two (2) business days from the inspection date. Upon completion of all needed repairs, the landlord must arrange for a re-inspection with the MDHA inspector. Once the unit is approved, the MDHA Specialist will coordinate the lease start date and the execution of the HAP Contract between MDHA and the landlord. **A lease may not begin until the unit has passed the HQS inspection and the family has any tenant provided utility service turned on in the head of household’s name.** Once the HAP Contract is executed, MDHA may begin providing assistance to the landlord on behalf of the family.



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SPC and VASH Programs Security Deposit, Utility Deposit and 1st Month's Rent Assistance Program

MDHA is making funds available to Shelter Plus Care (SPC) and VASH participants for security deposits, utility deposits and 1st month's rent, totaling up to \$1000.00 per participant. Participants are only eligible for the assistance one time, and the assistance must be paid directly to a landlord or utility company. No payments will be made directly to a participant.

Introduction to Program - At the briefing or upon issuing a new voucher to a current participant who is moving to a new unit, MDHA will provide the participant with a commitment letter that they can present to a potential landlord and applicable utility companies that will state MDHA will commit to paying the eligible costs, not to exceed \$1000.00.

Requesting Payment - The tenant or their assigned service provider/VA case manager must submit a signed letter of commitment to MDHA for each eligible cost. **All signed letters of commitment should be returned to Norman Deep, Director of Rental Assistance at the above address, email or fax.** An MDHA representative will contact the landlord or utility company directly to confirm the amount to be paid and the commitment. Upon confirmation, each payment request must be signed-off on by the Department Director or Assistant Director. Upon approving a request, a SPC and VASH Payment Request will be submitted to the MDHA Finance office for payment, specifying the vendor to be paid, the amount of payment, and the category of payment. MDHA Finance will then process the payment within their established time frame of 7-10 business days.

Tracking - A copy of the SPC and VASH CDBG Payment Request is to be maintained in the participant file and a copy forwarded to the Department Director. Each month the Rental Assistance Department will forward an updated Homeless Services Reporting Form to the MDHA Community Development Office, listing all payments for the previous month.

If, upon move-out a participant is entitled to a refund of the any amounts paid on their behalf by MDHA, the refund may be returned to the participant.



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Letter of Commitment for Assistance and Request for Payment

MDHA is making funds available to Shelter Plus Care (SPC) and Veteran Affairs Supportive Housing (VASH) participants for security deposits, utility deposits and 1st month's rent, totaling up to \$1000.00 per participant. Participants are only eligible for the assistance one time, and the assistance must be paid directly to a landlord or utility company. No payments will be made directly to a participant. The participant is responsible for contacting landlord and utility companies to arrange for activation of services and presenting this letter of commitment to them.

The following participant is eligible for this assistance. Upon receipt of a signed request, payment will be processed by MDHA and deposited on behalf of the participant within 7-10 business days.

MDHA Representative (PH: 615-252-)

Date

Name of Participant

SPC or VASH

Address of Unit Moving To

Tenant Code

City, State, Zip Code

Effective Date of Lease

Landlord Name

MDHA Vendor ID, if known

The participant hereby requests that the following payments be made on their behalf:

<u>Payment Type</u>	<u>Amount</u>
___ Security Deposit	\$ _____
___ 1 st Month's Tenant Portion of Rent (may be prorated)	\$ _____
___ Nashville Electric Service Deposit	\$ _____
___ Piedmont Gas Deposit	\$ _____
___ Metro Water Deposit	\$ _____
___ Water Systems Inc.	\$ _____
___ Madison Suburban Utility District	\$ _____

I understand that upon confirmation, MDHA will make the above payments on behalf of the above named participant. The landlord certifies the security deposit amount is not more than the amount normally charged for other tenants. If the move-in does not take place for any reason I understand MDHA is entitled to a refund of any amounts paid. Once a HAP Contract is executed on behalf of the tenant, any refund due in the future may be forwarded to the tenant.

Landlord Signature

Date

Participant Signature

Date

SHARED HOUSING

Shared Housing

[↑ top](#)

§ 982.615 Shared housing: Occupancy.

[↑ top](#)

(a) *Sharing a unit.* An assisted family may reside in shared housing. In shared housing, an assisted family shares a unit with the other resident or residents of the unit. The unit may be a house or an apartment.

(b) *Who may share a dwelling unit with assisted family?* (1) If approved by the HA, a live-in aide may reside with the family to care for a person with disabilities. The PHA must approve a live-in aide if needed as a reasonable accommodation so that the program is readily accessible to and usable by persons with disabilities in accordance with 24 CFR part 8. See §982.316 concerning occupancy by a live-in aide.

(2) Other persons who are assisted under the tenant-based program, or other persons who are not assisted under the tenant-based program, may reside in a shared housing unit.

(3) The owner of a shared housing unit may reside in the unit. A resident owner may enter into a HAP contract with the PHA. However, housing assistance may not be paid on behalf of an owner. An assisted person may not be related by blood or marriage to a resident owner.

§ 982.616 Shared housing: Lease and HAP contract.

[↑ top](#)

For assistance in a shared housing unit, there is a separate HAP contract and lease for each assisted family.

§ 982.617 Shared housing: Rent and voucher housing assistance payment.

[↑ top](#)

(a) *Meaning of pro-rata portion.* For shared housing, the term “pro-rata portion” means the ratio derived by dividing the number of bedrooms in the private space available for occupancy by a family by the total number of bedrooms in the unit. For example, for a family entitled to occupy three bedrooms in a five bedroom unit, the ratio would be 3/5.

(b) *Rent to owner: Reasonable rent.* (1) The rent to owner for the family may not exceed the pro-rata portion of the reasonable rent for the shared housing dwelling unit.

(2) The reasonable rent is determined in accordance with §982.507.

(c) *Payment standard.* The payment standard for a family that resides in a shared housing is the lower of:

(1) The payment standard amount on the PHA payment standard schedule for the family unit size; or

(2) The pro-rata portion of the payment standard amount on the PHA payment standard schedule for the size of the shared housing unit.

(d) *Utility allowance.* The utility allowance for an assisted family residing in shared housing is the pro-rata portion of the utility allowance for the shared housing unit.

SHARED HOUSING

[63 FR 23865, Apr. 30, 1998, as amended by 64 FR 26651, May 14, 1999]

§ 982.618 Shared housing: Housing quality standards.

 [top](#)

(a) *Compliance with HQS.* The PHA may not give approval to reside in shared housing unless the entire unit, including the portion of the unit available for use by the assisted family under its lease, meets the housing quality standards.

(b) *Applicable HQS standards.* The HQS in §982.401 apply to assistance in shared housing. However, the HQS standards in this section apply in place of §982.401(d) (space and security).

(c) *Facilities available for family.* The facilities available for the use of an assisted family in shared housing under the family's lease must include (whether in the family's private space or in the common space) a living room, sanitary facilities in accordance with §982.401(b), and food preparation and refuse disposal facilities in accordance with §982.401(c).

(d) *Space and security: Performance requirements.* (1) The entire unit must provide adequate space and security for all its residents (whether assisted or unassisted).

(2)(i) Each unit must contain private space for each assisted family, plus common space for shared use by the residents of the unit. Common space must be appropriate for shared use by the residents.

(ii) The private space for each assisted family must contain at least one bedroom for each two persons in the family. The number of bedrooms in the private space of an assisted family may not be less than the family unit size.

(iii) A zero or one bedroom unit may not be used for shared housing.



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HOMELESS PROGRAMS ADMINISTERED BY MDHA RENTAL ASSISTANCE

SROs (Single Room Occupancy)

405 Fisk Street, Nashville, TN 37203 and 411 Murfreesboro Road, Nashville, TN 37210

Applicants must be homeless - on the streets or in a shelter (single persons only)

All applications are accepted at the office of Urban Housing Solutions at 822 Woodland St. 37206, or online at www.urbanhousingsolutions.org –phone number **615-726-2696**. Urban Housing Solutions approves all clients. The application is taken by Urban Housing Solutions and then forwards to MDHA for approval.

SPC (Shelter Plus Care)

The purpose of the program is to provide rental housing assistance in connection with supportive services to homeless persons with disabilities. Assistance is provided to homeless individuals and families (on the streets, in a shelter or transitional housing), where at least one adult member is seriously mentally ill; has chronic problems with alcohol, drugs, or both; or has acquired immunodeficiency syndrome (and related diseases).

In order to receive assistance, qualifying homeless families must be referred to MDHA through one of the local service providers who will provide the supportive services to the applicant. Service providers include: Mental Health Cooperative – **615-743-1555**; Centerstone - **615-463-6600, 615-460-4200, or 615-279-6700**; Nashville Cares – **615-242-9909**, and Park Center Housing – **615-228-1164**.

VASH (Veterans Affairs Supportive Housing)

The HUD-Veterans Affairs Supportive Housing (HUD-VASH) program combines Housing Choice Voucher (HCV) rental assistance for homeless Veterans with case management and clinical services provided by the Department of Veterans Affairs (VA). VA provides these services for participating Veterans at VA medical centers (VAMCs) and community-based outreach clinics. All applicants must be certified as eligible by the VA and referred to MDHA. For more information on how to qualify contact the VA at **615-327-4751 ext. 66400**

Housing Choice Voucher (HCV) Set-Aside

A collaboration with the Metropolitan Homelessness Commission (MHC) for MDHA to provide up to 18 HCVs per month to allow most vulnerable homeless very low-income individuals and families to choose and lease safe, decent, and affordable privately-owned rental housing. All clients are referred through the MHC – 615-880-2360 and must include a vulnerability score using the Vulnerability Assessment Tool (VAT) and a commitment for ongoing services through a participating service provider.