

## Agencies To Provide Information

State Wage Information Collection Agencies. (HUD and PHA). This consent is limited to wages and unemployment compensation you have received during period(s) within the last 5 years when you have received assisted housing benefits.

U.S. Social Security Administration (HUD only). This consent is limited to the wage and self employment information from your current form W-2.

National Directory of New Hires contained in the Department of Health and Human Services' system of records. This consent is limited to wages and unemployment compensation you have received during period(s) within the last 5 years when you have received assisted housing benefits.

U.S. Internal Revenue Service (HUD only). This consent is limited to information covered in your current tax return.

This consent is limited to the following information that may appear on your current tax return:

1099-S Statement for Recipients of Proceeds from Real Estate Transactions

1099-B Statement for Recipients of Proceeds from Real Estate Brokers and Barter Exchange Transactions

1099-A Information Return for Acquisition or Abandonment of Secured Property

1099-G Statement for Recipients of Certain Government Payments

1099-DIV Statement for Recipients of Dividends and Distributions

1099-INT Statement for Recipients of Interest Income

1099-MISC Statement for Recipients of Miscellaneous Income

1099-OID Statement for Recipients of Original Issue Discount

1099-PATR Statement for Recipients of Taxable Distributions Received from Cooperatives

1099-R Statement for Recipients of Retirement Plans W2-G Statement of Gambling Winnings

1065-K1 Partners Share of Income, Credits, Deductions, etc.

1041-K1 Beneficiary's Share of Income, Credits, Deductions, etc.

1120S-K1 Shareholder's Share of Undistributed Taxable Income, Credits, Deductions, etc.

I understand that income information obtained from these sources will be used to verify information that I provide in determining initial or continued eligibility for assisted housing programs and the level of benefits.

No action can be taken to terminate, deny, suspend, or reduce the assistance your household receives based on information obtained about you under this consent until the HUD Office, Office of Inspector General (OIG) or the PHA (whichever is applicable) and the O/A have independently verified: 1) the amount of the income, wages, or unemployment compensation involved, 2) whether you actually have (or had) access to such income, wages, or benefits for your own use, and 3) the period or periods when, or with respect to which you actually received such income, wages, or benefits. A photocopy of the signed consent may be used to request a third party to verify any information received under this consent (e.g., employer).

HUD, the O/A, or the PHA shall inform you, or a third party which you designate, of the findings made on the basis of information verified under this consent and shall give you an opportunity to contest such findings in accordance with Handbook 4350.3 Rev. 1.

If a member of the household who is required to sign the consent form is unable to sign the form on time due to extenuating circumstances, the O/A may document the file as to the reason for the delay and the specific plans to obtain the proper signature as soon as possible.

This consent form expires 15 months after signed.

**Privacy Act Statement.** The Department of Housing and Urban Development (HUD) is authorized to collect this information by the U.S. Housing Act of 1937, as amended (42 U.S.C. 1437 et. seq.); the Housing and Urban-Rural Recovery Act of 1983 (P.L. 98-181); the Housing and Community Development Technical Amendments of 1984 (P.L. 98-479); and by the Housing and Community Development Act of 1987 (42 U.S.C. 3543). The information is being collected by HUD to determine an applicant's eligibility, the recommended unit size, and the amount the tenant(s) must pay toward rent and utilities. HUD uses this information to assist in managing certain HUD properties, to protect the Government's financial interest, and to verify the accuracy of the information furnished. HUD, the owner or management agent (O/A), or a public housing agency (PHA) may conduct a computer match to verify the information you provide. This information may be released to appropriate Federal, State, and local agencies, when relevant, and to civil, criminal, or regulatory investigators and prosecutors. However, the information will not be otherwise disclosed or released outside of HUD, except as permitted or required by law. You must provide all of the information requested. Failure to provide any information may result in a delay or rejection of your eligibility approval.

### Penalties for Misusing this Consent:

HUD, the O/A, and any PHA (or any employee of HUD, the O/A, or the PHA) may be subject to penalties for unauthorized disclosures or improper uses of information collected based on the consent form.

Use of the information collected based on the form HUD 9887 is restricted to the purposes cited on the form HUD 9887. Any person who knowingly or willfully requests, obtains, or discloses any information under false pretenses concerning an applicant or tenant may be subject to a misdemeanor and fined not more than \$5,000.

Any applicant or tenant affected by negligent disclosure of information may bring civil action for damages, and seek other relief, as may be appropriate, against the officer or employee of HUD, the Owner or the PHA responsible for the unauthorized disclosure or improper use.

Original is retained on file at the project site

ref. Handbooks 4350.3 Rev-1, 4571.1, 4571.2 & 4571.3 and HOPE II Notice of Program Guidelines

form HUD-9887 (02/2007)

## HOUSING NEEDS

COMPLETE ONLY OF YOU ARE APPLYING TO LIVE AT: COLODNY BUILDING, HOLLISTER HILL, NORTHWOODS, or WELDEN VILLA. (REFER TO PAGE 2)

VSHA uses the following Local Preferences for the Section 8 Voucher program. Please check all that apply to your current housing situation.

- | YES                      | NO                       |   |
|--------------------------|--------------------------|---|
| <input type="checkbox"/> | <input type="checkbox"/> | <b><u>Displaced Families Preference:</u></b> This preference is available to families who are displaced due to fire, flood, natural disaster, or condemnation by a local, state or federal agency, or the applicant is living in housing that has at least one serious defect that threatens their health or safety (such as unusable water or septic system, grossly insufficient heat in winter, severe fire hazard(s) such a grossly defective wiring).  |
| <input type="checkbox"/> | <input type="checkbox"/> | <b><u>Lead-Based Paint Preference:</u></b> This preference is available to a family with a child under the age of six in the household who has tested positive for lead paint poisoning (child must have an elevated blood level of 15 ug/dl or higher) and are occupying a rental unit that contains lead-based paint.   |
| <input type="checkbox"/> | <input type="checkbox"/> | <b><u>Educational/Training Preference:</u></b> This preference is available to families whose head or spouse are recent graduates of or participants in an education or training program designed to prepare the individual for the job market. The number of individuals admitted under this preference is limited to not more than 50 households per year.  |
| <input type="checkbox"/> | <input type="checkbox"/> | <b><u>Homeownership Preference:</u></b> This preference is available to very-low income families that are: (a) receiving homeownership education services through a Neighborworks® Homeownership Center or other HUD approved Homeownership Counseling Center; and (b) are referred to VSHA's Homeownership Program as needing the voucher to become a homeowner. The number of individuals admitted under this preference shall be limited to no more than 20 families per year.   |
| <input type="checkbox"/> | <input type="checkbox"/> | <b><u>Victims of Domestic Violence Preference:</u></b> This preference is available to individuals or families that are homeless due to domestic violence or are currently living in a situation in which they are being subjected to domestic violence. For purposes of this preference, domestic violence is defined as a pattern of coercive control that may be primarily psychological, economic, or sexual, but that is reinforced by one or more act(s) frightening physical violence, credible physical threat, or sexual assault. To qualify for this preference, you must have no other option for safe, long-term housing. |

If you are claiming one of these local preferences, you must provide us with the name, address and phone number of the agency or shelter that can verify your housing situation.

Name: \_\_\_\_\_

Telephone Number: \_\_\_\_\_

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

PLEASE USE THIS PAGE TO PROVIDE ADDITIONAL INFORMATION - COPY OR ADD SHEETS AS NECESSARY