COMMISSIONERS CLARENCE M. BALL, JR. *CHAIRMAN* DONALD L. LANGHAM *VICE-CHAIRMAN* MELVIN CLARK RUBY LANG



DWAYNE C. VAUGHN EXECUTIVE DIRECTOR

MOBILE HOUSING BOARD

www.mhb.gov

Monica Griffin Housing Choice Voucher Program Housing Manager III

mgriffin@mobilehousing.org

Dear Property Owner / Management Agency:

In the event a change occurs which modifies any condition of the original lease or Housing Choice Voucher Program (HCVP) Contract, an amendment is required. The new owner/manager and the resident must sign the amendment. Examples of changes include ownership changes, realtor changes and manager/owner name changes. In most situations, the changes require the new owner/manager must complete a new W-9 tax form, an owner/agency certification and a lead based paint form. Copies of the required forms are attached for your convenience. If there are multiple properties involved, you may use this as a master set to make copies from. You will need 1 set per property.

In addition, if the property has been sold or a new management agency is assuming responsibility of the property, a letter from the previous owner/manager detailing the sale or transfer is required. Basically, if sold, the letter will state the property is sold, to whom it was sold and the effective date. If management has changed, it will state that it has changed, to whom it has changed and the effective date.

The new owner/manager must provide a letter to the HCVP stating they have purchased or assumed management of the property and they are requesting to continue to Housing Assistance Payments (HAP) Contract. The letter to HCVP will also require an effective date for the changes.

Proof of ownership is required for all properties under HCVP Contract, preferable a copy of the deed, or in some cases, a copy of settlement is accepted.

Due to the length in time it may take to obtain the required documents listed above and HCVP processing time, HCVP will hold all payments until all paperwork is completed. Another option available, at the owner/manager's request, would be to continue sending payments to the previous owner until all paperwork is completed.

Upon completion of the necessary documents, please return all information to the HCVP Office. Should you have any questions, you can contact our office at 434-2364.

Sincerely,

Monica Griffin

Monica Griffin Housing Manager III

Attachments Lease Amendment, Lead based paint disclosure, Ownership Certificate, W-9, Direct Deposit Form

<u>Mailing Address</u>: Post Office Box 1345 Mobile Alabama 36633-1345

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## LEASE AMENDMENT

The Mobile Housing Board's He	ousing Assistance Payments (HAP) Contract entered into		
between the initial owner,	, on behalf of the program		
participant,	, for the property located at		
	, is hereby amended, effective		

The change is a result of one of the following:

- A change in ownership of the property
- \_\_\_\_\_ A change in the realty company that manages the property
- Owner/Manager name change

The HAP Contract and/or Lease Agreement are now amended to reflect the manager/owner as: \_\_\_\_\_\_.

By signature of the program participant and the new property owner, this amendment shall be attached to and made part of the HAP Contract and/or Lease Agreement. All other covenants, terms and conditions of the original HAP Contract and/or Lease Agreement remain the same.

Property Owner	Program Participant (Print) Signature Date Signed		Office Assistant 1		
Signature			Signature Date Completed		
Address of Owner					
City, ST & Zip Code					
Telephone Number					
Email Address					
Date Signed					
t Address: 7 Plaza Drive		<u>Mailing Address</u> Post Office Box 1345		Telephone: (251) 434-2300	
pile, Alabama 36605		Mobile Alabama 36633-1345		Facsimile: (251) 434-0004	

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## **OWNERSHIP CERTIFICATION**

I, \_\_\_\_\_, hereby certify that I am the owner of the property located at \_\_\_\_\_\_. A copy of my deed is attached as verification of purchase of this property. I have written the unit address on top of my deed.

By placing my signature below, I also certify that I am not the parent, child, grandparent, grandchild, sister or brother of any member of the Housing Choice Voucher Program family whom I have approved to rent this unit.

Owner's Name (Print)

Signature

Date Signed

SWORN TO AND SUBSCRIBED BEFORE ME THIS \_\_\_\_ DAY OF \_\_\_\_\_, 20\_\_\_.

## **NOTARY PUBLIC**

My commission expires: \_\_\_\_\_