



## **Arlington Housing Authority Housing Choice Voucher Program**



### **Participant Briefing Packet**

501 W. Sanford Street, Suite 20  
Arlington, TX 76011  
Phone: 817-275-3351  
Fax: 682-367-1000



# Arlington Housing Authority

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This is to certify that I have received the documents listed above and they were explained to me by the Arlington Housing Authority. I am also aware that I have access to these materials and the orientation briefing video at [http://www.arlingtontx.gov/housing/rentalassistance\\_hvc.html](http://www.arlingtontx.gov/housing/rentalassistance_hvc.html)

\_\_\_\_\_  
Applicant Name Printed

\_\_\_\_\_  
Applicant Signature

\_\_\_\_\_  
Date

05/2013

# **1. Protect your Housing Benefits**



# PROTECT YOUR HOUSING BENEFITS

## Do you realize...

If you willfully or intentionally make false statements or provide false information to the Housing Authority to obtain assisted housing, you could be:

- Lose your assistance and be evicted from your apartment or house
- Required to repay all rental assistance paid
- Fined up to \$10,000
- Imprisoned for up to 5 years
- Prohibited from receiving future assistance
- Subject to State and local government penalties

## Did you know...

The information you provide on a housing assistance application and recertification forms will be reviewed and verified. The Arlington Housing Authority, HUD, or the Office of Inspector General will check the income and asset information you provide with other Federal, State and local governments and with private agencies. Certifying false information is fraud.

## So be careful...

When you fill out your application and yearly recertification for assisted housing, make sure your answers to the questions are accurate and honest. You must include:

- All sources of income and changes in income you or any members of your household receive, such as wages, welfare payments, social security and veterans' benefits, pensions, retirement, etc.
- Any money you receive on behalf of your children, such as child support, TANF payments, social security for children, etc.
- Any increase in income, such as wages from a new job or an expected pay raise or bonus.
- All assets, such as bank accounts, savings bonds, certificates of deposit, stocks, real estate, etc., that are owned by you or any member of your household.
- All income from assets, such as interest from savings and checking accounts, stock dividends, etc.
- Any business or asset (your home) that you sold in the last two years at less than full value.
- The names of everyone, adults or children, relatives and non-relatives, who are living with you and make up your household.

## **Ask questions...**

If you don't understand something on the application or recertification forms, always ask questions. It's better to be safe than sorry.

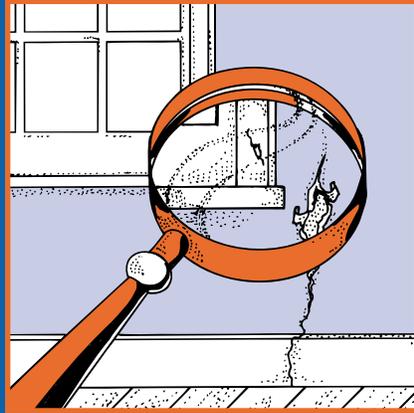
## **Watch out for housing assistance scams...**

- Don't pay money to have someone fill out housing assistance application and recertification forms for you
- Don't pay money to move up on a waiting list
- Get a receipt for any money you pay to your landlord or others
- Get a written explanation if you are required to pay for anything other than rent (maintenance or utility charges)

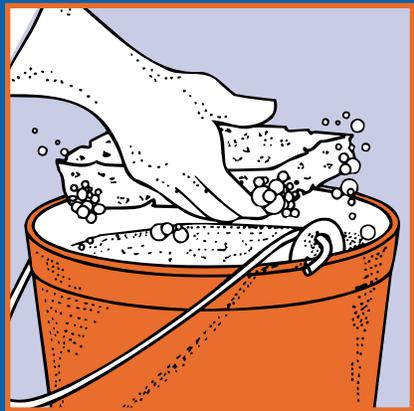
## **Report fraud...**

If you know of anyone who provided false information on a HUD housing assistance application or recertification or if anyone tells you to provide false information, report that person to the Arlington Housing Authority's Compliance Officer at 817-276-6734 or contact the HUD Office or Inspector General Hotline toll-free at 1-800-347-3735 Monday – Friday, from 10:00am to 4:30pm, Eastern Time.

## **2. Protect your Family from Lead in your Home**



# Protect Your Family From Lead In Your Home



 **EPA** United States Environmental Protection Agency



United States Consumer Product Safety Commission



United States Department of Housing and Urban Development

U.S. EPA Washington DC 20460  
U.S. CPSC Washington DC 20207  
U.S. HUD Washington DC 20410

EPA747-K-99-001  
September 2001

## Are You Planning To Buy, Rent, or Renovate a Home Built Before 1978?

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**M**any houses and apartments built before 1978 have paint that contains high levels of lead (called lead-based paint). Lead from paint, chips, and dust can pose serious health hazards if not taken care of properly.

Federal law requires that individuals receive certain information before renting, buying, or renovating pre-1978 housing:



**LANDLORDS** have to disclose known information on lead-based paint and lead-based paint hazards before leases take effect. Leases must include a disclosure form about lead-based paint.



**SELLERS** have to disclose known information on lead-based paint and lead-based paint hazards before selling a house. Sales contracts must include a disclosure form about lead-based paint. Buyers have up to 10 days to check for lead.



**RENOVATORS** have to give you this pamphlet before starting work.

**IF YOU WANT MORE INFORMATION** on these requirements, call the National Lead Information Center at **1-800-424-LEAD (424-5323)**.

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# IMPORTANT!

## Lead From Paint, Dust, and Soil Can Be Dangerous If Not Managed Properly

- FACT:** Lead exposure can harm young children and babies even before they are born.
- FACT:** Even children who seem healthy can have high levels of lead in their bodies.
- FACT:** People can get lead in their bodies by breathing or swallowing lead dust, or by eating soil or paint chips containing lead.
- FACT:** People have many options for reducing lead hazards. In most cases, lead-based paint that is in good condition is not a hazard.
- FACT:** Removing lead-based paint improperly can increase the danger to your family.

If you think your home might have lead hazards, read this pamphlet to learn some simple steps to protect your family.

## Lead Gets in the Body in Many Ways

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**Childhood lead poisoning remains a major environmental health problem in the U.S.**

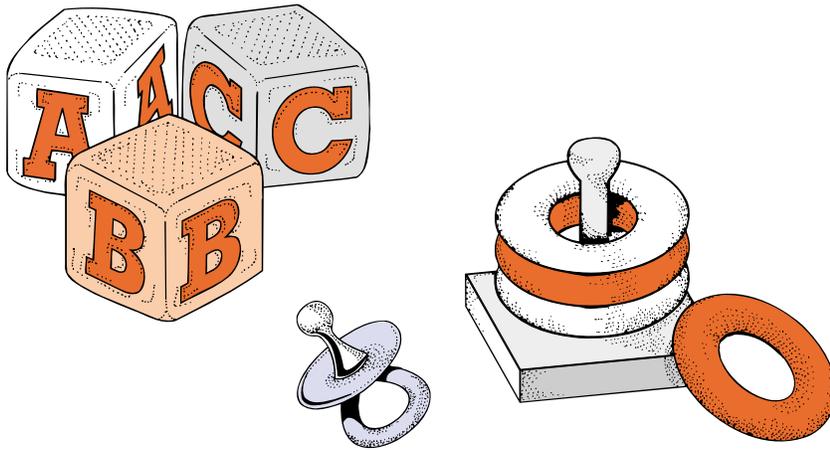
*Even children who appear healthy can have dangerous levels of lead in their bodies.*

### **People can get lead in their body if they:**

- ◆ Breathe in lead dust (especially during renovations that disturb painted surfaces).
- ◆ Put their hands or other objects covered with lead dust in their mouths.
- ◆ Eat paint chips or soil that contains lead.

### **Lead is even more dangerous to children than adults because:**

- ◆ Children's brains and nervous systems are more sensitive to the damaging effects of lead.
- ◆ Children's growing bodies absorb more lead.
- ◆ Babies and young children often put their hands and other objects in their mouths. These objects can have lead dust on them.



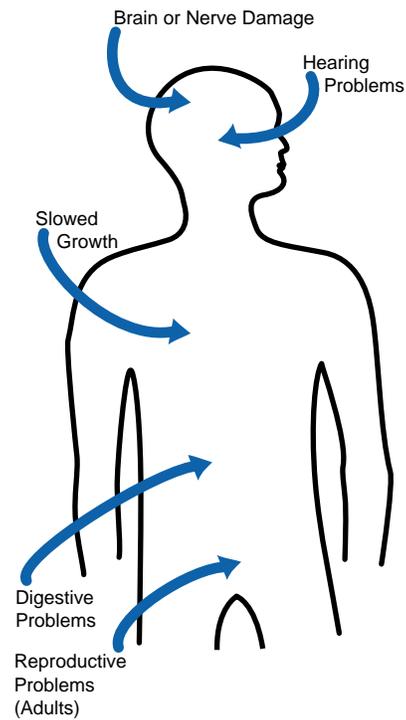
### Lead's Effects

If not detected early, children with high levels of lead in their bodies can suffer from:

- ◆ Damage to the brain and nervous system
- ◆ Behavior and learning problems (such as hyperactivity)
- ◆ Slowed growth
- ◆ Hearing problems
- ◆ Headaches

### Lead is also harmful to adults. Adults can suffer from:

- ◆ Difficulties during pregnancy
- ◆ Other reproductive problems (in both men and women)
- ◆ High blood pressure
- ◆ Digestive problems
- ◆ Nerve disorders
- ◆ Memory and concentration problems
- ◆ Muscle and joint pain



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**Lead affects  
the body in  
many ways.**

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## Where Lead-Based Paint Is Found

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**In general, the older your home, the more likely it has lead-based paint.**

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**Many homes built before 1978 have lead-based paint.** The federal government banned lead-based paint from housing in 1978. Some states stopped its use even earlier. Lead can be found:

- ◆ In homes in the city, country, or suburbs.
- ◆ In apartments, single-family homes, and both private and public housing.
- ◆ Inside *and* outside of the house.
- ◆ In soil around a home. (Soil can pick up lead from exterior paint or other sources such as past use of leaded gas in cars.)

## Checking Your Family for Lead

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**Get your children and home tested if you think your home has high levels of lead.**

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**To reduce your child's exposure to lead, get your child checked, have your home tested (especially if your home has paint in poor condition and was built before 1978), and fix any hazards you may have.**

Children's blood lead levels tend to increase rapidly from 6 to 12 months of age, and tend to peak at 18 to 24 months of age.

Consult your doctor for advice on testing your children. A simple blood test can detect high levels of lead. Blood tests are usually recommended for:

- ◆ Children at ages 1 and 2.
- ◆ Children or other family members who have been exposed to high levels of lead.
- ◆ Children who should be tested under your state or local health screening plan.

Your doctor can explain what the test results mean and if more testing will be needed.

## Identifying Lead Hazards

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**Lead-based paint** is usually not a hazard if it is in good condition, and it is not on an impact or friction surface, like a window. It is defined by the federal government as paint with lead levels greater than or equal to 1.0 milligram per square centimeter, or more than 0.5% by weight.

**Deteriorating lead-based paint (peeling, chipping, chalking, cracking or damaged)** is a hazard and needs immediate attention. It may also be a hazard when found on surfaces that children can chew or that get a lot of wear-and-tear, such as:

- ◆ Windows and window sills.
- ◆ Doors and door frames.
- ◆ Stairs, railings, banisters, and porches.

**Lead dust** can form when lead-based paint is dry scraped, dry sanded, or heated. Dust also forms when painted surfaces bump or rub together. Lead chips and dust can get on surfaces and objects that people touch. Settled lead dust can re-enter the air when people vacuum, sweep, or walk through it. The following two federal standards have been set for lead hazards in dust:

- ◆ 40 micrograms per square foot ( $\mu\text{g}/\text{ft}^2$ ) and higher for floors, including carpeted floors.
- ◆ 250  $\mu\text{g}/\text{ft}^2$  and higher for interior window sills.

**Lead in soil** can be a hazard when children play in bare soil or when people bring soil into the house on their shoes. The following two federal standards have been set for lead hazards in residential soil:

- ◆ 400 parts per million (ppm) and higher in play areas of bare soil.
- ◆ 1,200 ppm (average) and higher in bare soil in the remainder of the yard.

The only way to find out if paint, dust and soil lead hazards exist is to test for them. The next page describes the most common methods used.

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**Lead from paint chips, which you can see, and lead dust, which you can't always see, can both be serious hazards.**

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## Checking Your Home for Lead

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**Just knowing that a home has lead-based paint may not tell you if there is a hazard.**

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You can get your home checked for lead in one of two ways, or both:

- ◆ A paint **inspection** tells you the lead content of every different type of painted surface in your home. It won't tell you whether the paint is a hazard or how you should deal with it.
- ◆ A **risk assessment** tells you if there are any sources of serious lead exposure (such as peeling paint and lead dust). It also tells you what actions to take to address these hazards.

Hire a trained, certified professional who will use a range of reliable methods when checking your home, such as:

- ◆ Visual inspection of paint condition and location.
- ◆ A portable x-ray fluorescence (XRF) machine.
- ◆ Lab tests of paint, dust, and soil samples.

There are standards in place to ensure the work is done safely, reliably, and effectively. Contact your local lead poisoning prevention program for more information, or call **1-800-424-LEAD** for a list of contacts in your area.

**Home test kits for lead are available, but may not always be accurate.** Consumers should not rely on these tests before doing renovations or to assure safety.

## What You Can Do Now To Protect Your Family

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If you suspect that your house has lead hazards, you can take some immediate steps to reduce your family's risk:

- ◆ If you rent, notify your landlord of peeling or chipping paint.
- ◆ Clean up paint chips immediately.
- ◆ Clean floors, window frames, window sills, and other surfaces weekly. Use a mop or sponge with warm water and a general all-purpose cleaner or a cleaner made specifically for lead. REMEMBER: NEVER MIX AMMONIA AND BLEACH PRODUCTS TOGETHER SINCE THEY CAN FORM A DANGEROUS GAS.
- ◆ Thoroughly rinse sponges and mop heads after cleaning dirty or dusty areas.
- ◆ Wash children's hands often, especially before they eat and before nap time and bed time.
- ◆ Keep play areas clean. Wash bottles, pacifiers, toys, and stuffed animals regularly.
- ◆ Keep children from chewing window sills or other painted surfaces.
- ◆ Clean or remove shoes before entering your home to avoid tracking in lead from soil.
- ◆ Make sure children eat nutritious, low-fat meals high in iron and calcium, such as spinach and dairy products. Children with good diets absorb less lead.



## Reducing Lead Hazards In The Home

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**Removing lead improperly can increase the hazard to your family by spreading even more lead dust around the house.**

*Always use a professional who is trained to remove lead hazards safely.*



In addition to day-to-day cleaning and good nutrition:

- ◆ You can **temporarily** reduce lead hazards by taking actions such as repairing damaged painted surfaces and planting grass to cover soil with high lead levels. These actions (called “interim controls”) are not permanent solutions and will need ongoing attention.
- ◆ To **permanently** remove lead hazards, you should hire a certified lead “abatement” contractor. Abatement (or permanent hazard elimination) methods include removing, sealing, or enclosing lead-based paint with special materials. Just painting over the hazard with regular paint is not permanent removal.

Always hire a person with special training for correcting lead problems—someone who knows how to do this work safely and has the proper equipment to clean up thoroughly. Certified contractors will employ qualified workers and follow strict safety rules as set by their state or by the federal government.

Once the work is completed, dust cleanup activities must be repeated until testing indicates that lead dust levels are below the following:

- ◆ 40 micrograms per square foot ( $\mu\text{g}/\text{ft}^2$ ) for floors, including carpeted floors;
- ◆ 250  $\mu\text{g}/\text{ft}^2$  for interior windows sills; and
- ◆ 400  $\mu\text{g}/\text{ft}^2$  for window troughs.

Call your local agency (see page 11) for help with locating certified contractors in your area and to see if financial assistance is available.

## Remodeling or Renovating a Home With Lead-Based Paint

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Take precautions before your contractor or you begin remodeling or renovating anything that disturbs painted surfaces (such as scraping off paint or tearing out walls):

- ◆ **Have the area tested for lead-based paint.**
- ◆ **Do not use a belt-sander, propane torch, heat gun, dry scraper, or dry sandpaper** to remove lead-based paint. These actions create large amounts of lead dust and fumes. Lead dust can remain in your home long after the work is done.
- ◆ **Temporarily move your family** (especially children and pregnant women) out of the apartment or house until the work is done and the area is properly cleaned. If you can't move your family, at least completely seal off the work area.
- ◆ **Follow other safety measures to reduce lead hazards.** You can find out about other safety measures by calling 1-800-424-LEAD. Ask for the brochure "Reducing Lead Hazards When Remodeling Your Home." This brochure explains what to do before, during, and after renovations.

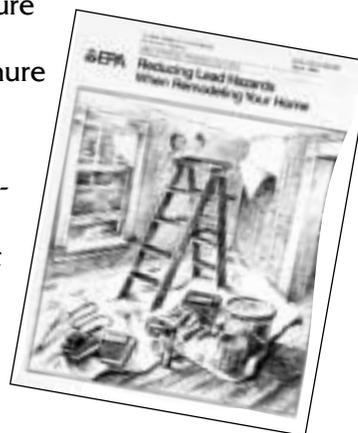
If you have already completed renovations or remodeling that could have released lead-based paint or dust, get your young children tested and follow the steps outlined on page 7 of this brochure.



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**If not conducted properly, certain types of renovations can release lead from paint and dust into the air.**

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## Other Sources of Lead

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*While paint, dust, and soil are the most common lead hazards, other lead sources also exist.*

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- ◆ **Drinking water.** Your home might have plumbing with lead or lead solder. Call your local health department or water supplier to find out about testing your water. You cannot see, smell, or taste lead, and boiling your water will not get rid of lead. If you think your plumbing might have lead in it:
  - Use only cold water for drinking and cooking.
  - Run water for 15 to 30 seconds before drinking it, especially if you have not used your water for a few hours.
- ◆ **The job.** If you work with lead, you could bring it home on your hands or clothes. Shower and change clothes before coming home. Launder your work clothes separately from the rest of your family's clothes.
- ◆ Old painted **toys** and **furniture**.
- ◆ Food and liquids stored in **lead crystal** or **lead-glazed pottery or porcelain**.
- ◆ **Lead smelters** or other industries that release lead into the air.
- ◆ **Hobbies** that use lead, such as making pottery or stained glass, or refinishing furniture.
- ◆ **Folk remedies** that contain lead, such as "greta" and "azarcon" used to treat an upset stomach.

## For More Information

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### **The National Lead Information Center**

Call **1-800-424-LEAD (424-5323)** to learn how to protect children from lead poisoning and for other information on lead hazards. To access lead information via the web, visit **[www.epa.gov/lead](http://www.epa.gov/lead)** and **[www.hud.gov/offices/lead/](http://www.hud.gov/offices/lead/)**.

For the hearing impaired, call the Federal Information Relay Service at **1-800-877-8339** and ask for the National Lead Information Center at **1-800-424-LEAD**.

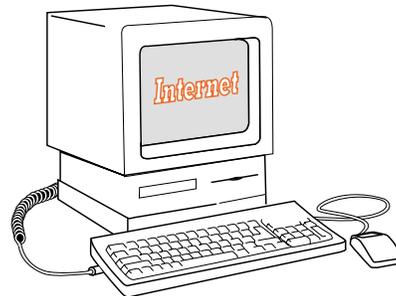


### **EPA's Safe Drinking Water Hotline**

Call **1-800-426-4791** for information about lead in drinking water.

### **Consumer Product Safety Commission (CPSC) Hotline**

To request information on lead in consumer products, or to report an unsafe consumer product or a product-related injury call **1-800-638-2772**, or visit CPSC's website at: **[www.cpsc.gov](http://www.cpsc.gov)**.



### **Health and Environmental Agencies**

Some cities, states, and tribes have their own rules for lead-based paint activities. Check with your local agency to see which laws apply to you. Most agencies can also provide information on finding a lead abatement firm in your area, and on possible sources of financial aid for reducing lead hazards. Receive up-to-date address and phone information for your local contacts on the Internet at **[www.epa.gov/lead](http://www.epa.gov/lead)** or contact the National Lead Information Center at **1-800-424-LEAD**.

## EPA Regional Offices

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Your Regional EPA Office can provide further information regarding regulations and lead protection programs.

### EPA Regional Offices

**Region 1** (Connecticut, Massachusetts, Maine, New Hampshire, Rhode Island, Vermont)

Regional Lead Contact  
U.S. EPA Region 1  
Suite 1100 (CPT)  
One Congress Street  
Boston, MA 02114-2023  
1 (888) 372-7341

**Region 2** (New Jersey, New York, Puerto Rico, Virgin Islands)

Regional Lead Contact  
U.S. EPA Region 2  
2890 Woodbridge Avenue  
Building 209, Mail Stop 225  
Edison, NJ 08837-3679  
(732) 321-6671

**Region 3** (Delaware, Maryland, Pennsylvania, Virginia, Washington DC, West Virginia)

Regional Lead Contact  
U.S. EPA Region 3 (3WC33)  
1650 Arch Street  
Philadelphia, PA 19103  
(215) 814-5000

**Region 4** (Alabama, Florida, Georgia, Kentucky, Mississippi, North Carolina, South Carolina, Tennessee)

Regional Lead Contact  
U.S. EPA Region 4  
61 Forsyth Street, SW  
Atlanta, GA 30303  
(404) 562-8998

**Region 5** (Illinois, Indiana, Michigan, Minnesota, Ohio, Wisconsin)

Regional Lead Contact  
U.S. EPA Region 5 (DT-8J)  
77 West Jackson Boulevard  
Chicago, IL 60604-3666  
(312) 886-6003

**Region 6** (Arkansas, Louisiana, New Mexico, Oklahoma, Texas)

Regional Lead Contact  
U.S. EPA Region 6  
1445 Ross Avenue, 12th Floor  
Dallas, TX 75202-2733  
(214) 665-7577

**Region 7** (Iowa, Kansas, Missouri, Nebraska)

Regional Lead Contact  
U.S. EPA Region 7  
(ARTD-RALI)  
901 N. 5th Street  
Kansas City, KS 66101  
(913) 551-7020

**Region 8** (Colorado, Montana, North Dakota, South Dakota, Utah, Wyoming)

Regional Lead Contact  
U.S. EPA Region 8  
999 18th Street, Suite 500  
Denver, CO 80202-2466  
(303) 312-6021

**Region 9** (Arizona, California, Hawaii, Nevada)

Regional Lead Contact  
U.S. Region 9  
75 Hawthorne Street  
San Francisco, CA 94105  
(415) 947-4164

**Region 10** (Alaska, Idaho, Oregon, Washington)

Regional Lead Contact  
U.S. EPA Region 10  
Toxics Section WCM-128  
1200 Sixth Avenue  
Seattle, WA 98101-1128  
(206) 553-1985

## CPSC Regional Offices

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Your Regional CPSC Office can provide further information regarding regulations and consumer product safety.

### **Eastern Regional Center**

Consumer Product Safety Commission  
201 Varick Street, Room 903  
New York, NY 10014  
(212) 620-4120

### **Western Regional Center**

Consumer Product Safety Commission  
1301 Clay Street, Suite 610-N  
Oakland, CA 94612  
(510) 637-4050

### **Central Regional Center**

Consumer Product Safety Commission  
230 South Dearborn Street, Room 2944  
Chicago, IL 60604  
(312) 353-8260

## HUD Lead Office

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Please contact HUD's Office of Healthy Homes and Lead Hazard Control for information on lead regulations, outreach efforts, and lead hazard control and research grant programs.

### **U.S. Department of Housing and Urban Development**

Office of Healthy Homes and Lead Hazard Control  
451 Seventh Street, SW, P-3206  
Washington, DC 20410  
(202) 755-1785

## Simple Steps To Protect Your Family From Lead Hazards

### If you think your home has high levels of lead:

- ◆ Get your young children tested for lead, even if they seem healthy.
- ◆ Wash children's hands, bottles, pacifiers, and toys often.
- ◆ Make sure children eat healthy, low-fat foods.
- ◆ Get your home checked for lead hazards.
- ◆ Regularly clean floors, window sills, and other surfaces.
- ◆ Wipe soil off shoes before entering house.
- ◆ Talk to your landlord about fixing surfaces with peeling or chipping paint.
- ◆ Take precautions to avoid exposure to lead dust when remodeling or renovating (call 1-800-424-LEAD for guidelines).
- ◆ Don't use a belt-sander, propane torch, heat gun, dry scraper, or dry sandpaper on painted surfaces that may contain lead.
- ◆ Don't try to remove lead-based paint yourself.



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### **3. A Good Place to Live**

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

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# **A Good Place to Live!**

## Introduction

Having a good place to live is important. Through your Public Housing Agency (or PHA) the Section 8 Certificate Program and the Housing Voucher Program help you to rent a good place. You are free to choose any house or apartment you like, as long as it meets certain requirements for quality. Under the Section 8 Certificate Program, the housing cannot cost more than the Fair Market Rent. However, under the Housing Voucher Program, a family may choose to rent an expensive house or apartment and pay the extra amount. Your PHA will give you other information about both programs and the way your part of the rent is determined.

## Housing Quality Standards

Housing quality standards help to insure that your home will be safe, healthy, and comfortable. In the Section 8 Certificate Program and the Housing Voucher Program there are two kinds of housing quality standards.

Things that a home must have in order approved by the PHA, and

Additional things that you should think about for the special needs of your own family. These are items that you can decide.

## The Section 8 Certificate Program and Housing Voucher Program

The Section 8 Certificate Program and Housing Voucher Program allow you to *choose* a house or apartment that you like. It may be where you are living now or somewhere else. The *must have* standards are very basic items that every apartment must have. But a home that has all of the *must have* standards may still not have everything you need or would like. With the help of Section 8 Certificate Program or Housing Voucher Program, you *should* be able to afford a good home, so you should think about what you would like your home to have. You may want a big kitchen or a lot of windows or a first floor apartment. Worn wallpaper or paint may bother you. Think of these things as you are looking for a home. Please take the time to read *A Good Place to Live*. If you would like to stay in your present home, use this booklet to see if your home meets the housing quality standards. If you want to move, use it each time you go to look for a new house or apartment, and good luck in finding your good place to live.

Read each section carefully. After you find a place to live, you can start the *Request for Lease Approval* process. You may find a place you like that has some problems with it. Check with your PHA about what to do, since it may be possible to correct the problems.

## The Requirements

Every house or apartment must have at least a living room, kitchen, and bathroom. A one-room efficiency apartment with a kitchen area is all right. However, there must be a separate bathroom for the private use of your family. Generally there must be one living/sleeping room for every two family members.

# 1. Living Room

**The Living Room must have:**

## **Ceiling**

A ceiling that is in good condition.

- Not acceptable are large cracks or holes that allow drafts, severe bulging, large amounts of loose or falling surface material such as plaster.

## **Walls**

Walls that are in good condition.

- Not acceptable are large cracks or holes that allow drafts, severe bulging or leaning, large amounts of loose or falling surface material such as plaster.

## **Electricity**

At least two electric outlets, or one outlet and one permanent overhead light fixture.

Do not count table or floor lamps, ceiling lamps plugged into a socket, and extension cords: they are not permanent.

- Not acceptable are broken or frayed wiring, light fixtures hanging from wires with no other firm support (such as a chain), missing cover plates on switches or outlets, badly cracked outlets.

## **Floor**

A floor that is in good condition.

- Not acceptable are large cracks or holes, missing or warped floorboards or covering that could cause someone to trip.

## **Window**

At least one window. Every window must be in good condition.

- Not acceptable are windows with badly cracked, broken or missing panes, and windows that do not shut or, when shut, do not keep out the weather.

## **Lock**

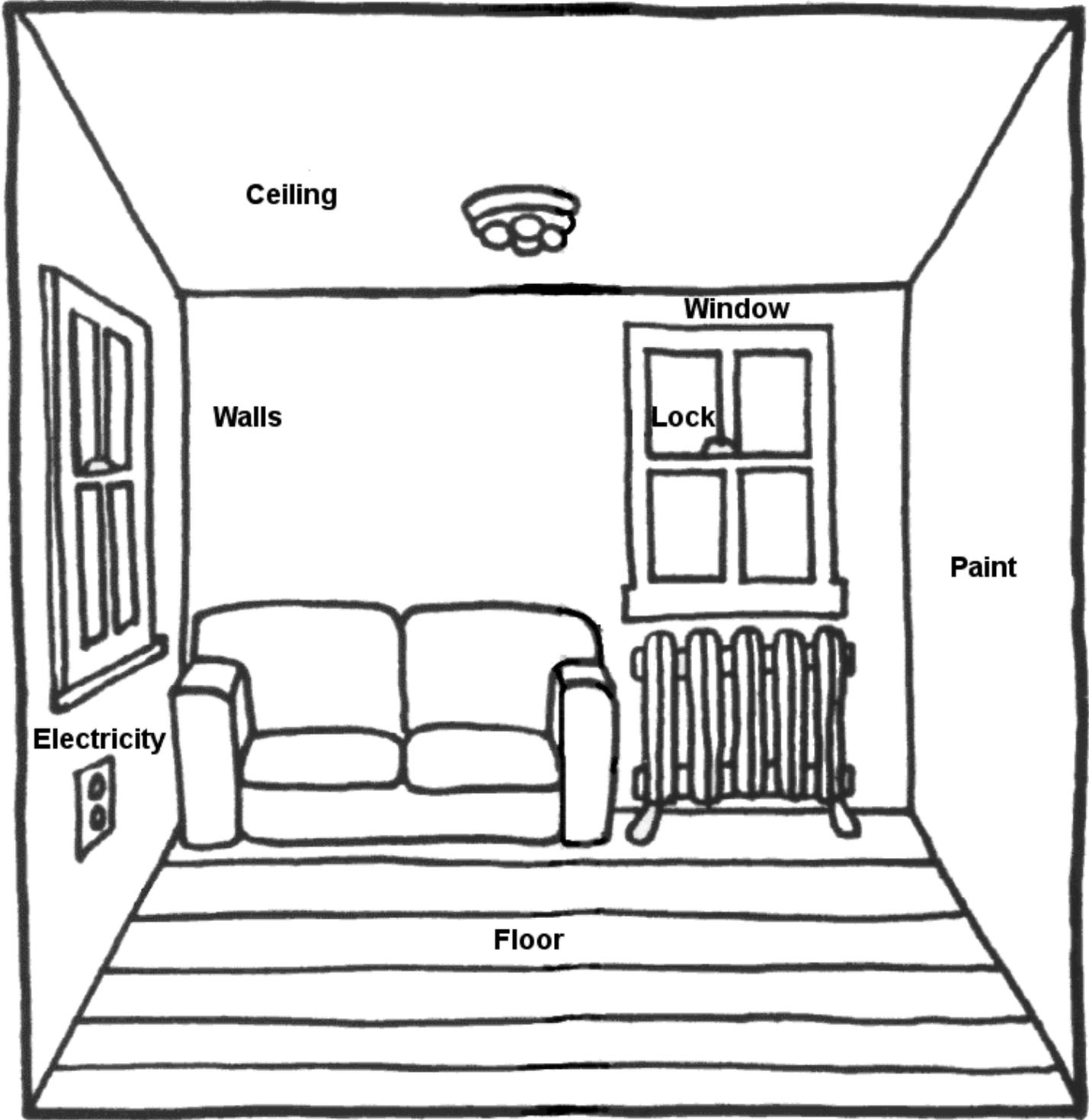
A lock that works on all windows and doors that can be reached from the outside, a common public hallway, a fire escape, porch or other outside place that cannot be reached from the ground. A window that cannot be opened is acceptable.

## **Paint**

- No peeling or chipping paint if you have children under the age of seven and the house or apartment was built before 1978.

### **You should also think about:**

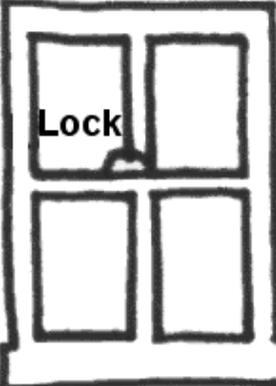
- The types of locks on windows and doors
  - Are they safe and secure?
  - Have windows that you might like to open been nailed shut?
- The condition of the windows.
  - Are there small cracks in the panes?
- The amount of weatherization around doors and windows.
  - Are there storm windows?
  - Is there weather stripping? If you pay your own utilities, this may be important.
- The location of electric outlets and light fixtures.
- The condition of the paint and wallpaper
  - Are they worn, faded, or dirty?
- The condition of the floor.
  - Is it scratched and worn?



Ceiling



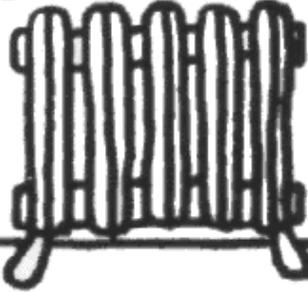
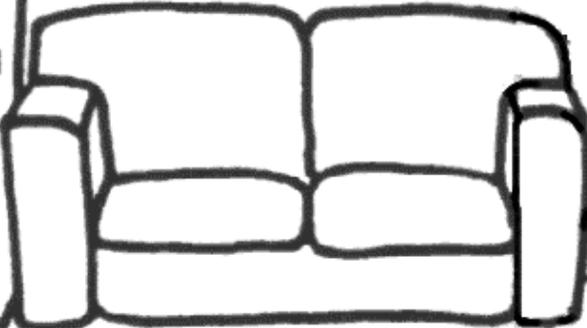
Window



Lock

Walls

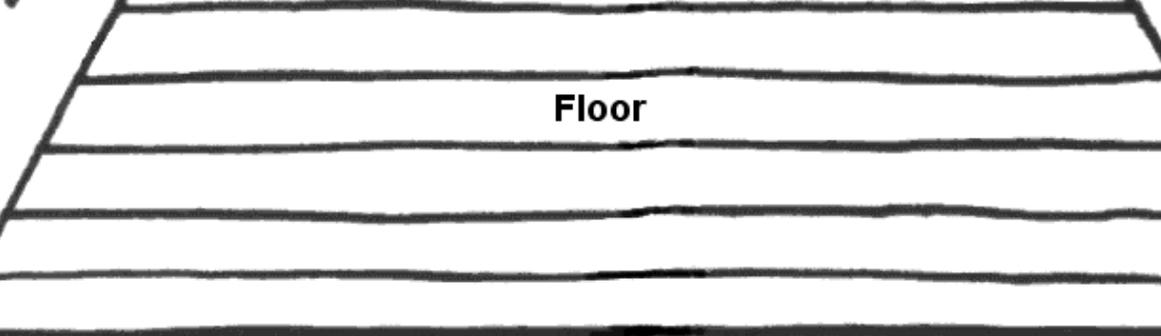
Paint



Electricity



Floor



# 2. Kitchen

## The Kitchen must have:

### Ceiling

A ceiling that is in good condition.

- Not acceptable are large cracks or holes that allow drafts, severe bulging, large amounts of loose or falling surface material such as plaster.

### Storage

Some space to store food.

### Electricity

At least one electric outlet and one permanent light fixture.

Do not count table or floor lamps, ceiling lamps plugged into a socket, and extension cards; they are not permanent.

- Not acceptable are broken or frayed wiring, light fixtures hanging from wires with no other firm support (such as a chain), missing cover plates on switches or outlets, badly cracked outlets.

### Stove and Oven

A stove (or range) and oven that works (This can be supplied by the tenant)

### Floor

A floor that is in good condition.

Not acceptable are large cracks or holes, missing or warped floorboards or covering that could cause someone to trip.

### Preparation Area

Some space to prepare food.

### Paint

No peeling or chipping paint if you have children under the age of seven and the house or apartment was built before 1978.

### Window

If there is a window, it must be in good condition.

### Lock

A lock that works on all windows and doors that can be reached from the outside, a common public hallway, a fire escape, porch or other outside place that can be reached from the ground. A window that cannot be opened is acceptable.

**Walls**

Walls that are in good condition.

- Not acceptable are large cracks or holes that allow drafts, severe bulging or leaning, large amounts of loose or falling surface material such as plaster.

**Serving Area**

Some space to serve food.

- A separate dining room or dining area in the living room is all right.

**Refrigerator**

A refrigerator that keeps temperatures low enough so that food does not spoil. (This can be supplied by the tenant.)

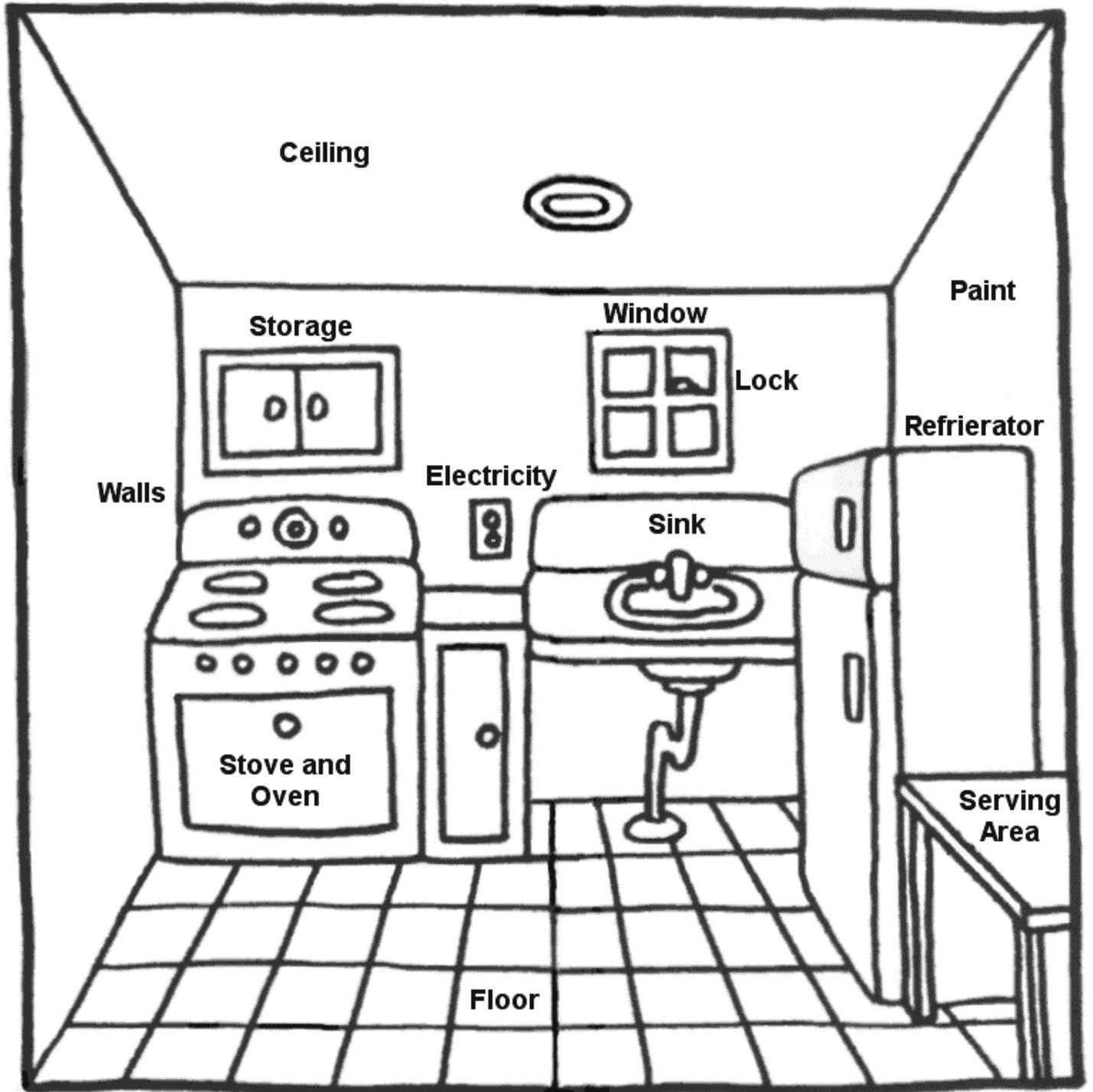
**Sink**

A sink with hot and cold running water.

- A bathroom sink will not satisfy this requirement.

**You should also think about:**

- The size of the kitchen.
- The amount, location, and condition of space to store, prepare, and serve food. Is it adequate for the size of your family?
- The size, condition, and location of the refrigerator. Is it adequate for the size of your family?
- The size, condition, and location of your sink.
- Other appliances you would like provided.
- Extra outlets.



# 3. Bathroom

## The Bathroom must have:

### Ceiling

A ceiling that is in good condition.

- Not acceptable are large cracks or holes that allow drafts, severe bulging, large amounts of loose or falling surface material such as plaster.

### Window

A window that opens or a working exhaust fan.

### Lock

A lock that works on all windows and doors that can be reached from the outside, a common public hallway, a fire escape, porch or other outside place that can be reached from the ground.

### Toilet

A flush toilet that works.

### Tub or Shower

A tub or shower with hot and cold running water.

### Floor

A floor that is in good condition.

- Not acceptable are large cracks or holes, missing or warped floorboards or covering that could cause someone to trip.

### Paint

- No chipping or peeling paint if you have children under the age of seven and the house or apartment was built before 1978.

### Walls

Walls that are in good condition.

- Not acceptable are large cracks or holes that allow drafts, severe bulging or leaning, large amounts of loose or falling surface such as plaster.

## **Electricity**

At least one permanent overhead or wall light fixture.

- Not acceptable are broken or frayed wiring, light fixtures hanging from wires with no other firm support (such as a chain), missing cover plates on switches or outlets, badly cracked outlets.

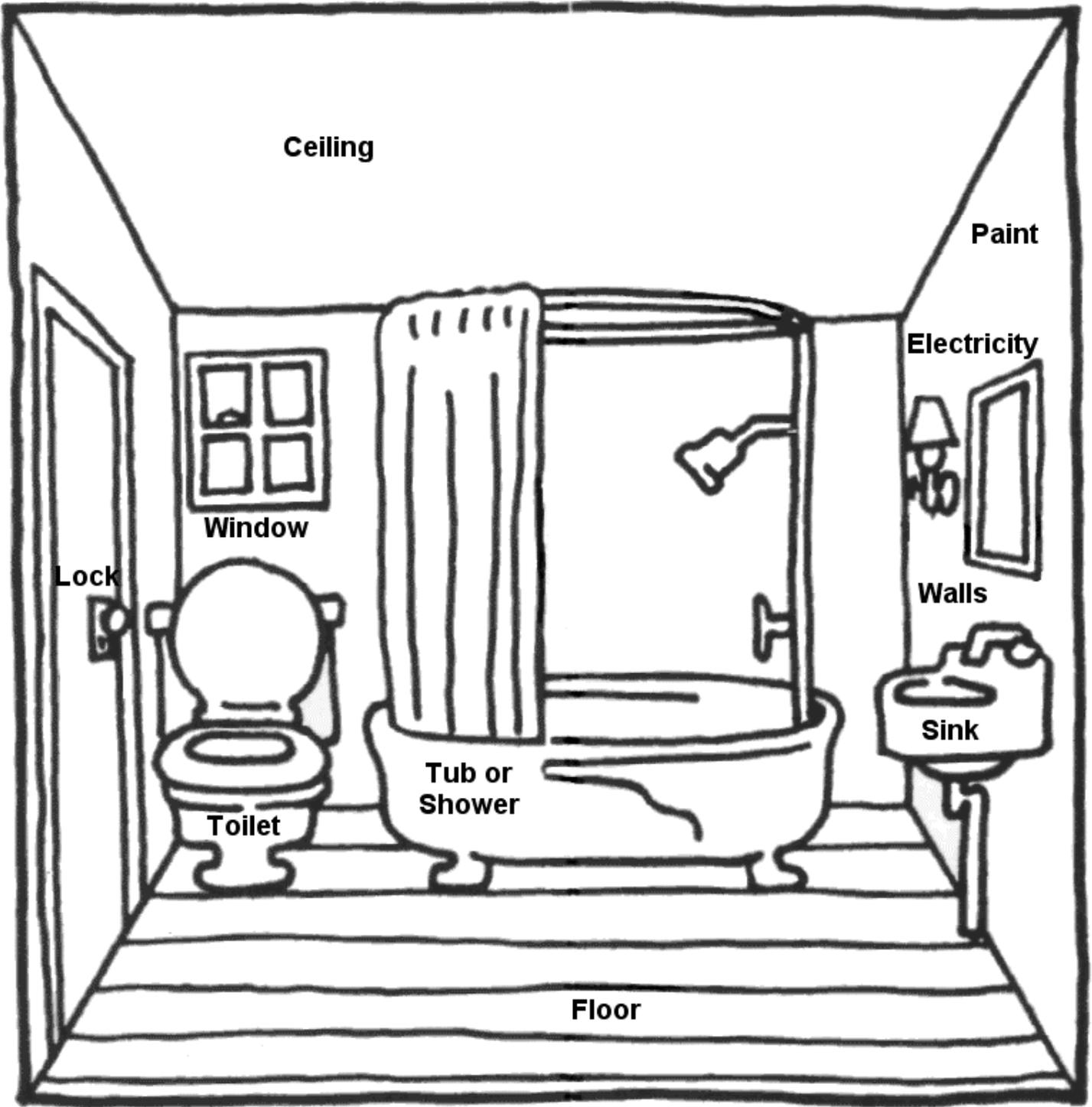
## **Sink**

A sink with hot and cold running water.

- A kitchen sink will not satisfy this requirement.

## **You should also think about:**

- The size of the bathroom and the amount of privacy.
- The appearances of the toilet, sink, and shower or tub.
- The appearance of the grout and seal along the floor and where the tub meets the wall.
- The appearance of the floor and walls.
- The size of the hot water heater.
- A cabinet with a mirror.



Ceiling

Paint

Electricity

Window

Lock

Walls

Toilet

Tub or Shower

Sink

Floor

# 4. Other Rooms

**Other rooms that are lived in include:** bedrooms, dens, halls, and finished basements or enclosed, heated porches. The requirements for other rooms that are lived in are similar to the requirements for the living room as explained below.

## **Other Rooms Used for Living must have:**

### **Ceiling**

A ceiling that is in good condition.

- Not acceptable are large cracks or holes that allow drafts, severe bulging, large amounts of loose or falling surface material such as plaster,

### **Walls**

Walls that are in good condition.

- Not acceptable are large cracks or holes that allow drafts, severe bulging or leaning, large amounts of loose or falling surface material such as plaster.

### **Paint**

- No chipping or peeling paint if you have children under the age of seven and the house or apartment was built before 1978.

### **Electricity in Bedrooms**

Same requirement as for living room.

In All Other Rooms Used for Living: There is no specific standard for electricity, but there must be either natural illumination (a window) or an electric light fixture or outlet.

### **Floor**

A floor that is in good condition.

- Not acceptable are large cracks or holes, missing or warped floorboards or covering that could cause someone to trip.

### **Lock**

A lock that works on all windows and doors that can be reached from the outside, a common public hallway, a fire escape, porch or other outside place that can be reached from the ground.

## **Window**

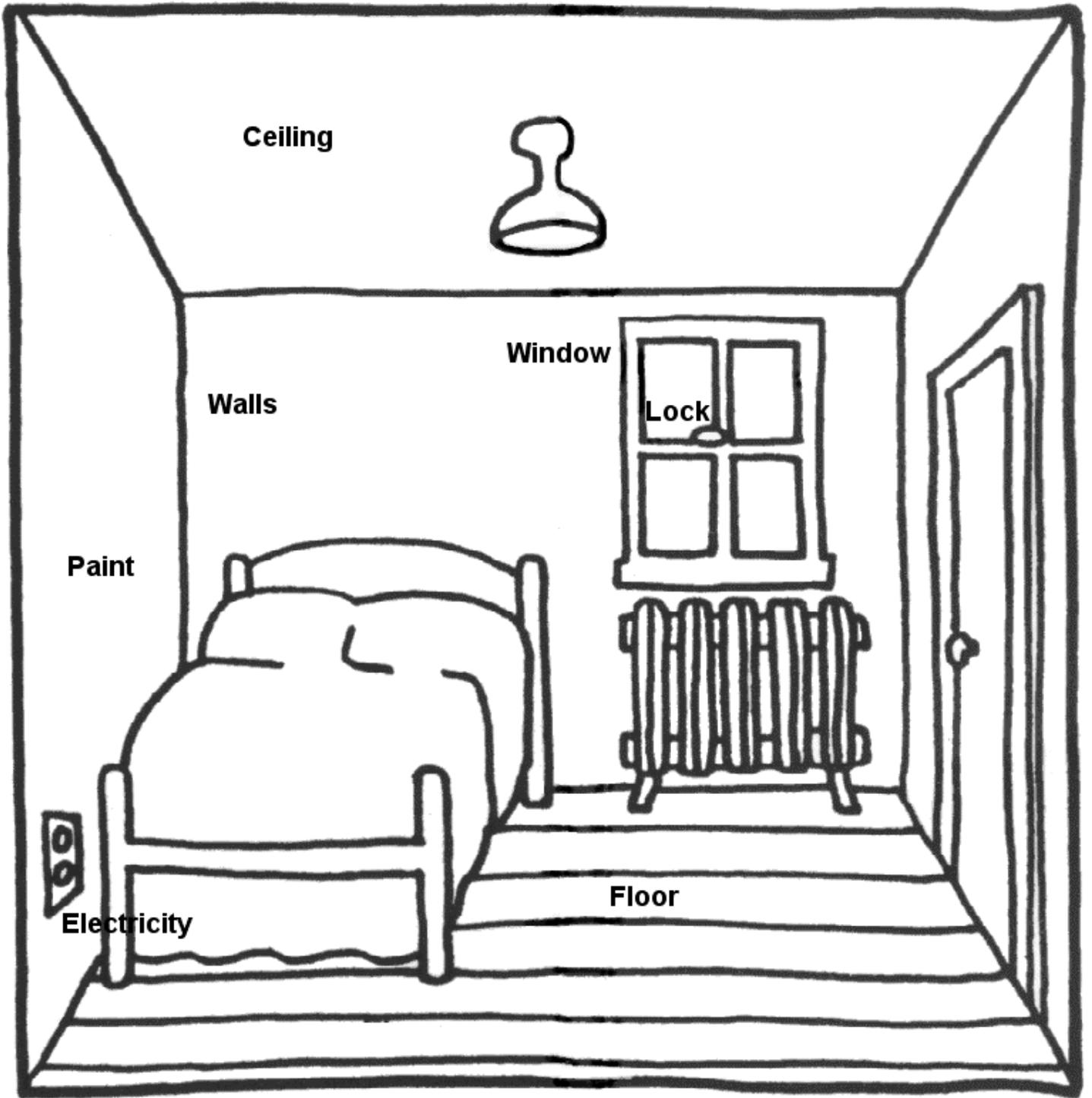
At least one window, which must be openable if it was designed to be opened, in every rooms used for sleeping. Every window must be in good condition.

- Not acceptable are windows with badly cracked, broken or missing panes, and windows that do not shut or, when shut, do not keep out the weather.

**Other rooms that are not lived in may be:** a utility room for washer and dryer, basement or porch. These must be checked for security and electrical hazards and other possible dangers (such as walls or ceilings in danger of falling), since these items are important for the safety of your entire apartment. You should also look for other possible dangers such as large holes in the walls, floors, or ceilings, and unsafe stairways. Make sure to look for these things in all other rooms not lived in.

## **You should also think about:**

- What you would like to do with the other rooms.
  - Can you use them the way you want to?
- The type of locks on windows and doors.
  - Are they safe and secure?
  - Have windows that you might like to open been nailed shut?
- The condition of the windows.
  - Are there small cracks in the panes?
- The amount of weatherization windows.
  - Are there storm windows?
  - Is there weather-stripping? If you pay your own utilities, this may be important.
- The location of electric outlets and light fixtures.
- The condition of the paint and wallpaper
  - Are they worn, faded, or dirty?
- The condition of the floors.
  - Are they scratched and worn?



Ceiling

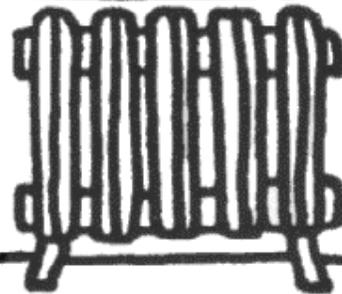
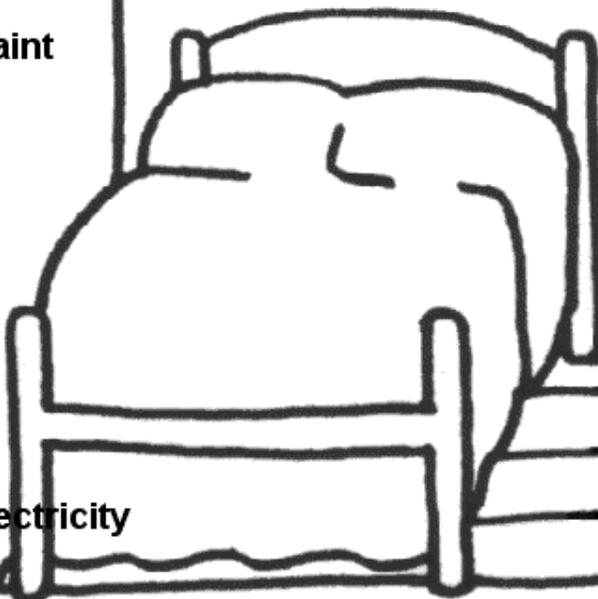


Window

Lock

Walls

Paint



Electricity

Floor

# 5. Building Exterior, Plumbing, and Heating

**The Building must have:**

## **Roof**

A roof in good condition that does not leak, with gutters and downspouts, if present, in good condition and securely attached to the building.

- Evidence of leaks can usually be seen from stains on the ceiling inside the building.

## **Outside Handrails**

Secure handrails on any extended length of stairs (e.g. generally four or more steps) and any porches, balconies, or decks that are 30 inches or more above the ground.

## **Walls**

Exterior walls that are in good condition, with no large holes or cracks that would let a great amount of air get inside.

## **Foundation**

A foundation in good condition that has no serious leaks.

## **Water Supply**

A plumbing system that is served by an approvable public or private water supply system. Ask the manager or owner.

## **Sewage**

A plumbing system that is connected to an approvable public or private sewage disposal system. Ask the manager or owner.

## **Chimneys**

No serious leaning or defects (such as big cracks or many missing bricks) in any chimneys.

## **Paint**

No cracking, peeling, or chipping paint if you have children under the age of seven and the house or apartment was built before 1978.

- This includes exterior walls, stairs, decks, porches, railings, windows, and doors.

**Cooling**

Some windows that open, or some working ventilation or cooling equipment that can provide air circulation during warm months.

**Plumbing**

Pipes that are in good condition, with no leaks and no serious rust that causes the water to be discolored.

**Water Heater**

A water heater located, equipped, and installed in a safe manner. Ask the manager.

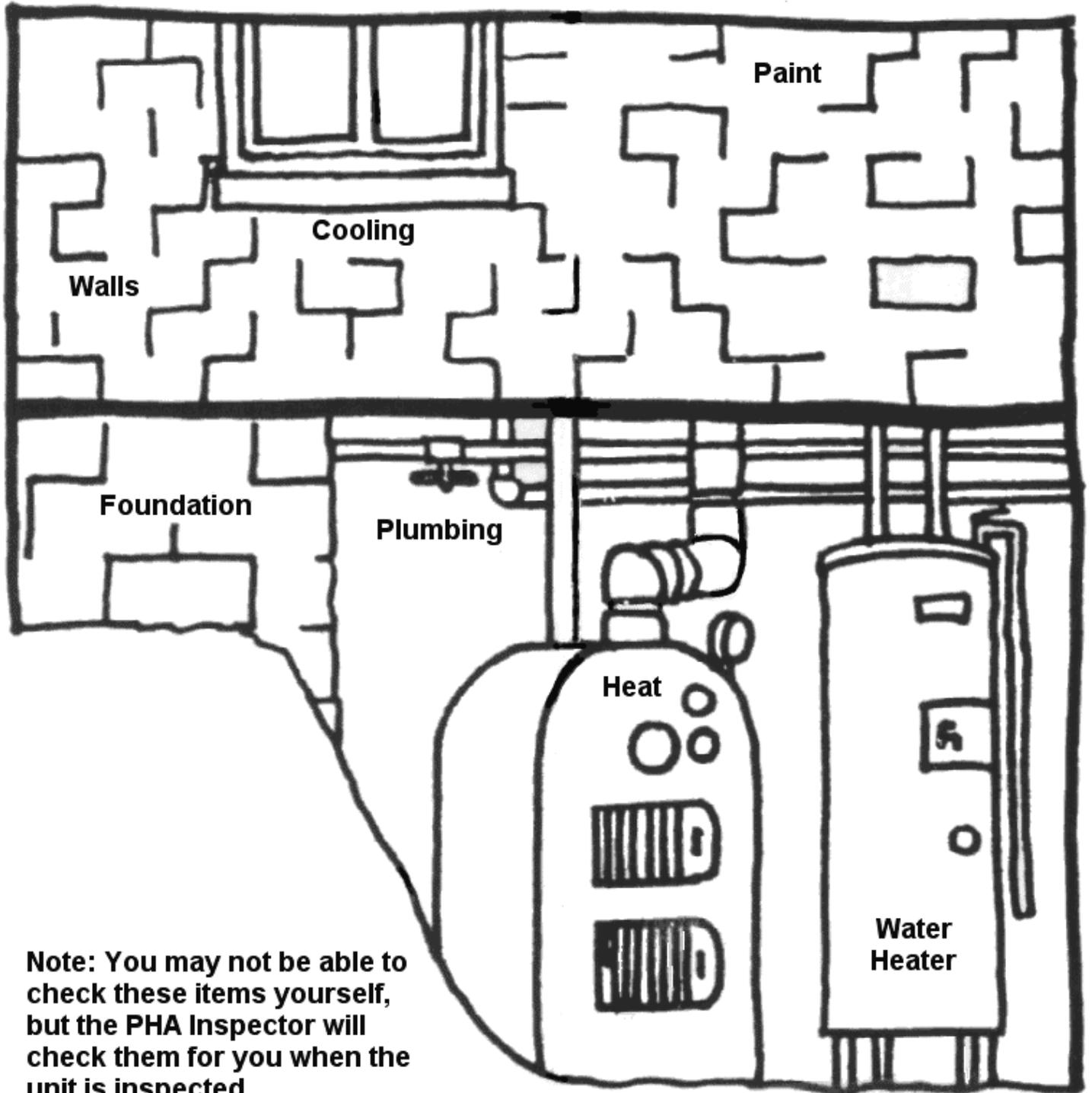
**Heat**

Enough heating equipment so that the unit can be made comfortably warm during cold months.

- Not acceptable are space heaters (or room heaters) that burn oil or gas and are not vented to a chimney. Space heaters that are vented may be acceptable if they can provide enough heat.

**You should also think about:**

- How well maintained the apartment is.
- The type of heating equipment.
  - Will it be able to supply enough heat for you in the winter, to all rooms used for living?
- The amount and type of weatherization and its affect on utility costs.
  - Is there insulation?
  - Are there storm windows?
  - Is there weather-stripping around the windows and doors?
- Air circulation or type of cooling equipment (if any).
  - Will the unit be cool enough for you in the summer?



**Note: You may not be able to check these items yourself, but the PHA Inspector will check them for you when the unit is inspected.**

# 6. Health and Safety

**The Building and Site must have:**

## **Smoke Detectors**

At least one working smoke detector on each level of the unit, including the basement. If any member of your family is hearing-impaired, the smoke detector must have an alarm designed for hearing-impaired persons.

## **Fire Exits**

The building must provide an alternate means of exit in case of fire (such as fire stairs or exit through windows, with the use of a ladder if windows are above the second floor).

## **Elevators**

Make sure the elevators are safe and work properly.

## **Entrance**

An entrance from the outside or from a public hall, so that it is not necessary to go through anyone else's private apartment to get into the unit.

## **Neighborhood**

No dangerous places, spaces, or things in the neighborhood such as:

- Nearby buildings that are falling down
- Unprotected cliffs or quarries
- Fire hazards
- Evidence of flooding

## **Garbage**

No large piles of trash and garbage inside or outside the unit, or in common areas such as hallways. There must be a space to store garbage (until pickup) that is covered tightly so that rats and other animals cannot get into it. Trash should be picked up regularly.

## **Lights**

Lights that work in all common hallways and interior stairs.

## **Stairs and Hallways**

Interior stairs with railings, and common hallways that are safe and in good condition. Minimal cracking, peeling or chipping in these areas.

**Pollution**

No serious air pollution, such as exhaust fumes or sewer gas.

**Rodents and Vermin**

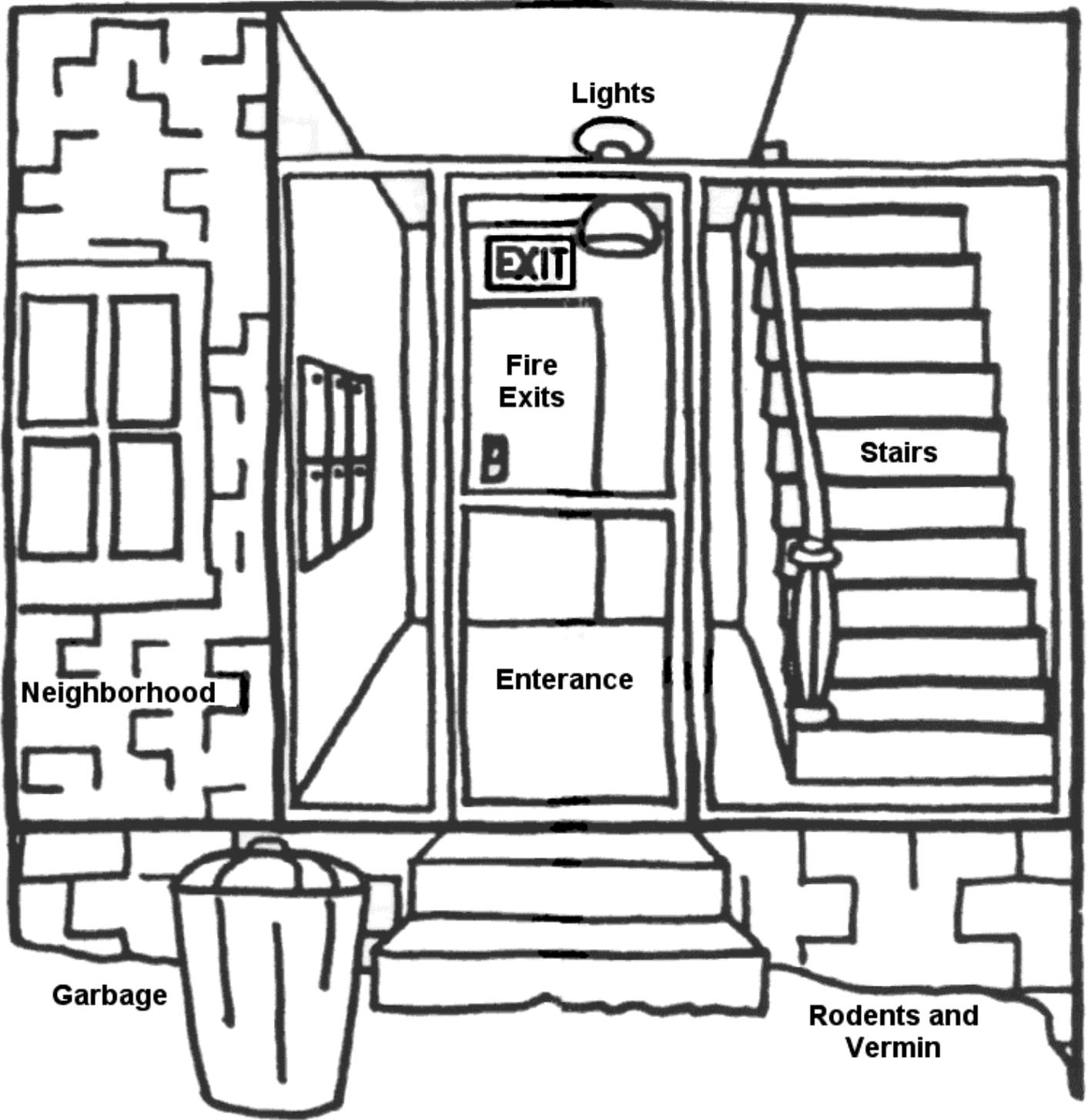
No sign of rats or large numbers of mice or vermin (like roaches).

**For Manufactured Homes: Tie Downs**

Manufactured homes must be placed on the site in a stable manner and be free from hazards such as sliding or wind damage.

**You should also think about:**

- The type of fire exit.  
--Is it suitable for your family?
- How safe the house or apartment is for your family.
- The presence of screens and storm windows.
- Services in the neighborhood.  
--Are there stores nearby?  
--Are there schools nearby?  
--Are there hospitals nearby?  
--Is there transportation nearby?
- Are there job opportunities nearby?
- Will the cost of tenant-paid utilities be affordable and is the unit energy-efficient?
- Be sure to read the lead-based paint brochure given to you by the PHA or owner, especially if the housing or apartment is older (built before 1978).



**Note:** You may not be able to check these items listed here yourself, but the PHA Inspector will check them for you when the unit is inspected.

Now that you have finished this booklet, you know that for a house or apartment to be a good place to live, it must meet two kinds of housing quality standards:

- Things it must have in order to be approved for the Section 8 Rental Certificate Program and the Rental Voucher Program.
- Additional things that you should think about for the special needs of your family.

You know that these standards apply in six areas of a house or apartment.

1. Living Room
2. Kitchen
3. Bathroom
4. Other Rooms
5. Building Exterior, Plumbing and Heating
6. Health and Safety

You know that when a house or apartment meets the housing quality standards, it will be safe, healthy, and comfortable home for your family. It will be a good place to live.

After you find a good place to live, you can begin the *Request for Lease Approval* process. When both you and the owner have signed the *Request for Lease Approval* and the PHA has received it, an official inspection will take place. The PHA will inform both you and the owner of the inspection results.

If the house or apartment passed, a lease can be signed. There may still be some items that you or the PHA would like improved. If so, you and your PHA may be able to bargain for the improvements when you sign the lease. If the owner is not willing to do the work, perhaps you can get him or her to pay for the materials and do it yourself.

If the house or apartment fails, you and/or your PHA may try to convince the owner to make the repairs so it will pass. The likelihood of the owner making the repairs may depend on how serious or costly they are.

If it fails, all repairs must be made, and the house or apartment must be re-inspected before any lease is signed. If the owner cannot or will not repair the house or apartment, even if the repairs are minor, you must look for another home. Make sure you understand why the house or apartment failed, so that you will be more successful in your next search.

### **Responsibilities of the Public Housing Authority:**

- Ensure that all units in the Section 8 Certificate Program and the Housing Voucher Program meet the housing quality standards.
- Inspect unit in response to Request for Lease Approval. Inform potential tenant and owner of results and necessary actions.
- Encourage tenants and owners to maintain units up to standards.
- Make inspection in response to tenant or owner complaint or request. Inform the tenant and owner of the results, necessary actions, and time period for compliance.
- Make annual inspection of the unit to ensure that it still meets the housing quality standards. Inform the tenant and owner of the results, necessary actions, and time period for compliance.

### **Responsibilities of the tenant:**

- Live up to the terms of your lease.
- Do your part to keep the unit safe and sanitary.
- Cooperate with the owner by informing him or her of any necessary repairs.
- Cooperate with the PHA for initial, annual, and complaint inspections.

### **Responsibilities of the owner:**

- Comply with the terms of the lease.
- Generally maintain the unit and keep it up to the housing quality standards outlined in this booklet.
- Cooperate with the tenant by responding promptly to requests for needed repairs.
- Cooperate with the PHA on initial, annual, and complaint inspections, including making necessary repairs.

## **4. Guide to Easy Housekeeping**



# A Guide to Easy Housekeeping

## Why clean house?

- A. Sanitary reasons. When you clean your home, clean with disinfectants or cleaning products designed for a specific task.
- B. Keeps your belonging in better condition. Cleaning on a regular basis will keep appliances, pots and pans, towels, sheets and furniture in better condition and will last a lot longer.
- C. Self esteem. Having a clean home gives you a feeling of accomplishment. It gives you a better outlook when other things may be going wrong. A clean home makes family members feel good about their surroundings and will make them want to pick up after themselves and keep their rooms clean.

## What is a clean house?

1. All trash carried out, stored in closed containers.
2. All rooms free of trash and clutter. DON'T leave food or trash out overnight. This could attract roaches and rats.
3. No insects or vermin in the house.
4. Clean kitchen and bathroom: clean fixtures and free of dirt and hair; clean drains, sink, tub, toilet.
5. Clean kitchen utensils, eating utensils, dishes.
6. Food stored properly, covered.
7. Clean bedding; well made beds.
8. Clean laundry, folded, put away. DON'T leave WET clothes or towels lying around or in piles. This could cause roaches, they like damp areas. This will also cause mildew and the clothes will have to be rewashed.
9. Free of dust, crumbs, surface dirt, cobwebs.
10. Clean curtains, shades, blinds, upholstery, pillows.

11. Clean doors, windows, floors, and woodwork. DON'T clean carpet stains with any type of bleach. This will take the color out and rot the carpet. DON'T let children drink colored fruit juices or Kool-Aid in carpeted rooms, as these liquids will PERMANENTLY STAIN the carpet.
12. Neat surroundings outside the home, free of trash.

## When to clean

Some things require cleaning on a daily basis, while other things may only need to be cleaned weekly or monthly.

Make a list and tape it to the inside of a kitchen cabinet door for easy access.

Below is a sample list and a good guideline for many cleaning chores:

1. DAILY
  - A. Wash dishes after meals, using a clean cloth and lots of water.
  - B. Wipe off kitchen counters, table, range top. Wipe up spills immediately.
  - C. Mop or sweep up kitchen floor. (If feeding small children use newspaper under chair.)
  - D. Make beds.
  - E. Put dirty laundry away or wash if there is a load ready. Hang up clothes.
  - F. Empty trash, especially if it is food items.
2. WEEKLY
  - A. Mop kitchen and bathroom floors.
  - B. Wash out garbage cans if you do not use trash can liners.
  - C. Vacuum floors and rugs. (If pets are in the house, this may have to be done more often.)
  - D. Dust furniture.

- E. Change sheets, pillow cases.
- F. Clean mirrors when needed.
- G. Change towels at least once a week, or when needed.
- H. Wash smudges, fingerprints off walls, woodwork.

## 3. MONTHLY OR WHEN NEEDED

- A. Wash windows. Clean curtains. Dust blinds.
- B. Clean closets and cabinets. Clean drawers.
- C. Clean bedspreads and mattress pads.
- D. Dust walls, ceilings, and baseboards.
- E. Defrost refrigerator.
- F. Clean oven.

## Cleaning tools and supplies

Cleaning is less time consuming when you use the proper tools and supplies for specific tasks.

Below is a list of some of the products and tools you want to keep in stock.

1. Laundry detergent
2. Dishwashing liquid
3. Ammonia or vinegar
4. Bleach
5. Lemon oil, Endust
6. Pine-Sol, Spic-n-Span, etc.
7. Cleanser such as Comet, Ajax
9. Paper towels
10. Dust rags
11. Vacuum cleaner (if possible)
12. Toilet brush
13. Brillo pads
14. Trash bags and trash can liners
15. Lysol disinfectant

## Methods of cleaning

When you have to clean, you want it to be quick and easy and if possible, a pleasant experience.

Organize your work and materials. Make a list of what needs to be done and the tools and supplies needed for the job.

Put all supplies in a basket or box to carry from room to room.

Before you start cleaning, pick up all the clutter throughout the house such as newspapers, clothes, trash, etc.

Decide which is easier for you - to clean a room at a time or to do the same job in every room before you change tools or supplies. For instance, vacuum or dust all rooms at the same time, or vacuum or dust each room as you clean that particular room.

Once you get a system that is easiest for you, then you will not dread the task.

## Inexpensive cleaning tips

1. Wash windows with a solution of 1/2 cup ammonia, 1/8 cup white vinegar, 1 gallon of warm water. Your windows will glow with no streaks and this solution is less expensive than a prepared spray.
2. Wipe windows dry with newspaper. It leaves no lint on the glass.
3. Clean window screens with your vacuum cleaner. This removes dust thoroughly and easily.
4. Remove paint from windows by rubbing with a cloth soaked in heated vinegar. Brush stubborn decals with several coats of vinegar. After vinegar has soaked in, decals will wash off.
5. Remove hairspray on your bathroom mirror by wiping with a cloth dampened in rubbing alcohol.
6. To polish metal surface and bathroom fixtures, rub with a soft cloth dipped in alcohol.
7. Add a few drops of vinegar to rinse water when washing plastic curtains, shower curtains, or table cloth. This cuts down static that attracts dust.
8. To remove mildew from shower curtains, drop the curtains into a cup of bleach water (enough to cover curtains). Let them soak for a half-hour, then scrub with a brush. Rinse curtains and hang on shower rod to dry.
9. Water softener or inexpensive bubble bath in the bath water eliminates bathtub rings and other stains.
10. A hint for alleviating smoke filled rooms or to get rid of cooking odors is to put out saucers of vinegar.
11. A handful or two of salt followed by boiling water does an excellent job of cleaning the drain. **For clogged drains**, change to bicarbonate of soda. Pour in a handful, followed by 1/2 cup vinegar.
12. For burned pans, fill with old water and lots of salt... 1/2 cup for a small pan. Add small piece of onion. Let stand overnight. Bring to a boil slowly, and boil for 5 minutes. Set pan aside and let water cool. When cold, clean and scour. You may also use paste of soda and liquid detergent and a small amount of water. Let stand.

## Rewards

Reward yourself and other members of the family who have helped you clean the house.

Rewarding yourself may be as simple as sitting down, relaxing and reading a book or watching television. Or maybe taking a nap or a bubble bath. But try to arrange some time for yourself to do something you enjoy after you have accomplished your cleaning task.

Reward your children after they have done their cleaning chores. This will make it easier for you to get them to help you next time.

Be sure to praise them for their accomplishments. Some ways you may reward them is to read them a story, take them to the park, or let them have their favorite snack.

*Whatever the reward may be for you or your children, be proud of your accomplishment. It WILL make you feel better.*

## **5. Payment Standards and Utility Allowances**

## Payment Standards

### Housing Authority of the City of Arlington's Housing Choice Voucher Program Fiscal Year 2013

HUD published final FMRs in the *Federal Register* which became effective on October 1, 2012. The table below identifies the HUD published FMRs for FY 2012. The CY2013 Payment Standards for Arlington and Irving were adopted by the Board of Commissioners on October 17, 2012, to be implemented January 1, 2013. The City of Irving is located in Dallas County and is subject to the HUD published demonstration schedule of FMRs by zip code for Dallas County.

<b>Arlington</b>	<b>0BR</b>	<b>1BR</b>	<b>2BR</b>	<b>3BR</b>	<b>4BR</b>	<b>5BR</b>	<b>6BR</b>
2013 Payment Standards (effective 1/1/13)	*610	716	871	1,176	1,328	1,526	1,725
2012 Payment Standards (effective 1/1/12)	673	716	871	1,176	1,314	1,482	1,676

<b>Irving</b>	<b>0BR</b>	<b>1BR</b>	<b>2BR</b>	<b>3BR</b>	<b>4BR</b>	<b>5BR</b>	<b>6BR</b>
2013 Payment Standards as a percent of FMR	100%	100%	100%	100%	100%	100%	100%
2013 FMRs by Zip Code:							
75038	580	700	880	1,170	1,420	1,633	1,846
75060	530	640	810	1,080	1,300	1,495	1,690
75061	500	600	760	1,010	1,220	1,403	1,586
75062	550	660	840	1,120	1,350	1,553	1,755

\*CFR 982.505: "At the second regular reexamination following the decrease in the payment standard amount, the lower payment standard amount shall be used to calculate the monthly housing assistance payment..."

**Allowances for  
Tenant-Furnished Utilities  
and Other Services**

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

Locality		Age		Unit Type				Date (mm/dd/yyyy)
<b>Arlington Housing Authority</b>		<b>Mixed Age</b>		<b>Single Family - ARLINGTON</b>				<b>1/1/2013</b>
Utility or Service		Monthly Dollar Allowances						
		0 BR	1 BR	2 BR	3 BR	4 BR	5 BR	6 BR
Heating	a. Natural Gas	41	58	74	91	116	132	149
	b. Bottle Gas							
	c. Electric	28	39	50	62	78	90	101
	d. Oil / Coal / Other							
Cooking	a. Natural Gas	11	16	21	25	32	37	41
	b. Bottle Gas							
	c. Electric	8	11	14	17	21	24	27
	d. Other							
Other Electric	15	21	27	33	42	48	54	
Air Conditioning	12	17	22	27	35	40	45	
Water Heating	a. Natural Gas	23	32	41	50	63	72	81
	b. Bottle Gas							
	c. Electric	18	25	32	39	49	56	63
	d. Oil / Coal / Other							
Water	12	16	18	22	27	39	46	
Sewer	24	30	33	39	45	57	63	
Trash Collection	12	12	12	12	12	12	12	
Range/Microwave	3	3	3	3	3	3	3	
Refrigerator	5	5	5	5	5	5	5	
Other - Specify								
<b>Actual Family Allowances</b> To be used by the family to compute allowance.						Utility or Service		per month cost
Complete below for the actual unit rented.						Heating		\$
Name of Family						Cooking		
						Other Electric		
						Air Conditioning		
						Water Heating		
Address of Use						Water		
						Sewer		
						Trash Collection		
						Range/Microwave		
						Refrigerator		
						Other		
						Total		\$
Number of Bedrooms								

**Allowances for  
Tenant-Furnished Utilities  
and Other Services**

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

Locality		Age		Unit Type				Date (mm/dd/yyyy)
<b>Arlington Housing Authority</b>		<b>Mixed Age</b>		<b>Multi Family - ARLINGTON</b>				<b>1/1/2013</b>
Utility or Service		Monthly Dollar Allowances						
		0 BR	1 BR	2 BR	3 BR	4 BR	5 BR	
Heating	a. Natural Gas	42	59	76	92	118	134	151
	b. Bottle Gas							
	c. Electric	19	26	34	41	53	60	68
	d. Oil / Coal / Other							
Cooking	a. Natural Gas	12	16	21	26	33	37	42
	b. Bottle Gas							
	c. Electric	5	7	9	11	14	16	18
	d. Other							
Other Electric	10	14	18	22	29	33	37	
Air Conditioning	8	12	15	18	23	27	30	
Water Heating	a. Natural Gas	23	32	41	51	64	73	83
	b. Bottle Gas							
	c. Electric	12	16	21	26	33	38	42
	d. Oil / Coal / Other							
Water	12	16	18	22	27	39	46	
Sewer	24	30	33	39	45	57	63	
Trash Collection	12	12	12	12	12	12	12	
Range/Microwave	3	3	3	3	3	3	3	
Refrigerator	5	5	5	5	5	5	5	
Other - Specify								
<b>Actual Family Allowances</b> To be used by the family to compute allowance.						Utility or Service		per month cost
Complete below for the actual unit rented.						Heating		\$
Name of Family						Cooking		
						Other Electric		
						Air Conditioning		
						Water Heating		
Address of Use						Water		
						Sewer		
						Trash Collection		
						Range/Microwave		
						Refrigerator		
						Other		
Number of Bedrooms						Total		\$

**Allowances for  
Tenant-Furnished Utilities  
and Other Services**

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

Locality		Age		Unit Type				Date (mm/dd/yyyy)
<b>Arlington Housing Authority</b>		<b>Mixed Age</b>		<b>Duplex - ARLINGTON</b>				<b>1/1/2013</b>
Utility or Service		Monthly Dollar Allowances						
		0 BR	1 BR	2 BR	3 BR	4 BR	5 BR	
Heating	a. Natural Gas	28	39	50	61	77	88	99
	b. Bottle Gas							
	c. Electric	32	45	58	71	90	103	116
	d. Oil / Coal / Other							
Cooking	a. Natural Gas	8	11	14	17	21	24	28
	b. Bottle Gas							
	c. Electric	9	12	16	19	24	28	31
	d. Other							
Other Electric		17	24	31	38	48	55	62
Air Conditioning		14	20	25	31	40	45	51
Water Heating	a. Natural Gas	15	21	27	33	42	48	54
	b. Bottle Gas							
	c. Electric	20	28	36	44	56	64	72
	d. Oil / Coal / Other							
Water		12	16	18	22	27	39	46
Sewer		24	30	33	39	45	57	63
Trash Collection		12	12	12	12	12	12	12
Range/Microwave		3	3	3	3	3	3	3
Refrigerator		5	5	5	5	5	5	5
Other - Specify								
<b>Actual Family Allowances</b> To be used by the family to compute allowance.						Utility or Service		per month cost
Complete below for the actual unit rented.						Heating		\$
Name of Family						Cooking		
						Other Electric		
						Air Conditioning		
						Water Heating		
Address of Use						Water		
						Sewer		
						Trash Collection		
						Range/Microwave		
						Refrigerator		
						Other		
						Total		
Number of Bedrooms								
						Total		\$

**Allowances for  
Tenant-Furnished Utilities  
and Other Services**

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

Locality		Age		Unit Type				Date (mm/dd/yyyy)
<b>Arlington Housing Authority</b>		<b>Mixed Age</b>		<b>Mobile Home - ARLINGTON</b>				<b>1/1/2013</b>
Utility or Service		Monthly Dollar Allowances						
		0 BR	1 BR	2 BR	3 BR	4 BR	5 BR	
Heating	a. Natural Gas	34	48	62	76	96	110	124
	b. Bottle Gas							
	c. Electric	29	40	52	64	81	93	104
	d. Oil / Coal / Other							
Cooking	a. Natural Gas	10	13	17	21	27	31	34
	b. Bottle Gas							
	c. Electric	8	11	14	17	22	25	28
	d. Other							
Other Electric		16	22	28	34	44	50	56
Air Conditioning		13	18	23	28	36	41	46
Water Heating	a. Natural Gas	19	26	34	41	53	60	68
	b. Bottle Gas							
	c. Electric	18	25	33	40	51	58	65
	d. Oil / Coal / Other							
Water		12	16	18	22	27	39	46
Sewer		24	30	33	39	45	57	63
Trash Collection		12	12	12	12	12	12	12
Range/Microwave		3	3	3	3	3	3	3
Refrigerator		5	5	5	5	5	5	5
Other - Specify								
<b>Actual Family Allowances</b> To be used by the family to compute allowance.						Utility or Service		per month cost
Complete below for the actual unit rented.						Heating		\$
Name of Family						Cooking		
						Other Electric		
						Air Conditioning		
						Water Heating		
Address of Use						Water		
						Sewer		
						Trash Collection		
						Range/Microwave		
						Refrigerator		
						Other		
						Total		
Number of Bedrooms								

**Allowances for  
Tenant-Furnished Utilities  
and Other Services**

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

Locality		Age		Unit Type				Date (mm/dd/yyyy)
<b>Arlington Housing Authority</b>		<b>Mixed Age</b>		<b>Multi Family - IRVING</b>				<b>1/1/2013</b>
Utility or Service		Monthly Dollar Allowances						
		0 BR	1 BR	2 BR	3 BR	4 BR	5 BR	6 BR
Heating	a. Natural Gas	43	61	78	96	122	139	156
	b. Bottle Gas							
	c. Electric	19	26	34	41	53	60	68
	d. Oil / Coal / Other							
Cooking	a. Natural Gas	12	17	22	27	34	39	43
	b. Bottle Gas							
	c. Electric	5	7	9	11	14	16	18
	d. Other							
Other Electric	10	14	18	22	29	33	37	
Air Conditioning	8	12	15	18	23	27	30	
Water Heating	a. Natural Gas	24	33	43	52	66	76	85
	b. Bottle Gas							
	c. Electric	12	16	21	26	33	38	42
	d. Oil / Coal / Other							
Water	12	20	23	31	38	53	61	
Sewer	15	20	23	29	34	46	51	
Trash Collection	18	18	18	18	18	18	18	
Range/Microwave	3	3	3	3	3	3	3	
Refrigerator	5	5	5	5	5	5	5	
Other - Specify								
<b>Actual Family Allowances</b> To be used by the family to compute allowance.					Utility or Service		per month cost	
Complete below for the actual unit rented.					Heating		\$	
Name of Family					Cooking			
					Other Electric			
					Air Conditioning			
					Water Heating			
Address of Use					Water			
					Sewer			
					Trash Collection			
					Range/Microwave			
					Refrigerator			
					Other			
					Total		\$	
Number of Bedrooms								

**Allowances for  
Tenant-Furnished Utilities  
and Other Services**

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

Locality		Age		Unit Type				Date (mm/dd/yyyy)
<b>Arlington Housing Authority</b>		<b>Mixed Age</b>		<b>Duplex - IRVING</b>				<b>1/1/2013</b>
Utility or Service		Monthly Dollar Allowances						
		0 BR	1 BR	2 BR	3 BR	4 BR	5 BR	6 BR
Heating	a. Natural Gas	28	40	51	63	80	91	102
	b. Bottle Gas							
	c. Electric	32	45	58	71	90	103	116
	d. Oil / Coal / Other							
Cooking	a. Natural Gas	8	11	14	17	22	25	28
	b. Bottle Gas							
	c. Electric	9	12	16	19	24	28	31
	d. Other							
Other Electric	17	24	31	38	48	55	62	
Air Conditioning	14	20	25	31	40	45	51	
Water Heating	a. Natural Gas	16	22	28	34	44	50	56
	b. Bottle Gas							
	c. Electric	20	28	36	44	56	64	72
	d. Oil / Coal / Other							
Water	12	20	23	31	38	53	61	
Sewer	15	20	23	29	34	46	51	
Trash Collection	18	18	18	18	18	18	18	
Range/Microwave	3	3	3	3	3	3	3	
Refrigerator	5	5	5	5	5	5	5	
Other - Specify								
<b>Actual Family Allowances</b> To be used by the family to compute allowance.					Utility or Service		per month cost	
Complete below for the actual unit rented.					Heating		\$	
Name of Family					Cooking			
					Other Electric			
Address of Use					Air Conditioning			
					Water Heating			
					Water			
					Sewer			
					Trash Collection			
					Range/Microwave			
					Refrigerator			
					Other			
Number of Bedrooms								
					Total		\$	

## **6. Voucher Extension Request Form**



Housing Specialist: \_\_\_\_\_

Case #: \_\_\_\_\_

## VOUCHER EXTENSION REQUEST FORM

The Housing Choice Voucher expires at the end of sixty (60) days from the date of issuance unless the family submits a written request to extend their voucher. To request an extension of a voucher, the family is responsible for completing the *Voucher Extension Request Form*. An extension may be granted for additional days for extenuating circumstances. Examples of such circumstances include: hospitalization; the family size or special requirements make finding a unit difficult; or a family emergency affecting an immediate family member. The extension is recorded on the voucher in the family's file and the family will be notified in writing.

Expired vouchers will be reassigned to the next eligible applicant on the Waiting List.

Reason for requesting an extension:

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Today's Date: \_\_\_\_\_

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

Social Security Number: \_\_\_\_\_

Mailing Address, Apt #: \_\_\_\_\_

City, State, Zip Code: \_\_\_\_\_

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

For Housing Staff Use Only				
_____	_____	_____	_____	_____
Approved	Denied	Expiration Date	Housing Coordinator	Today's Date

## **7. Portability**

# Housing Choice Voucher Portability

An eligible family that has been issued a housing choice voucher may use that voucher to lease a unit anywhere in the United States where there is a housing agency operating a Housing Choice Voucher Program. This feature of the program is referred to as “portability”. Portability provides flexibility for those who need to relocate with assistance to follow job opportunities in a new location, select the best school districts, or be near family members or child care providers. In this way, portability allows a family with housing subsidies the same choices available to others in the community.

## Applicants

If neither the head nor spouse had a legal residence in the Arlington Housing Authority’s (AHA) jurisdiction at the date of their initial application for assistance, the family is not permitted to exercise portability upon initial issuance of a voucher. The family must use their voucher in Arlington and reside in the Arlington assisted unit for 1 year.

A family is expected to initiate the portability process by informing the AHA of its interest in moving to another jurisdiction. After the family has made a request to exercise portability, the AHA will provide the family with information to contact the Public Housing Authority (PHA) in the jurisdiction where the family wishes to live. The following is a list of PHAs located in North Central Texas.

North Central Texas Public Housing Authorities	Phone Number	Point of Contact Information
<b>Arlington Housing Authority</b> 501 W Sanford Ste 20, Arlington, TX 76011	(817) 275-3351	POC - Nina Von Falkenstein <a href="mailto:ninav@arlingtonhousing.us">ninav@arlingtonhousing.us</a>
<b>Balch Sprints Housing</b> 3117 Hickory Tree Rd, Balch Springs, TX 75180	(972) 557-6069	POC- Annette Bedell <a href="mailto:abedell@cityofbalchsprings.com">abedell@cityofbalchsprings.com</a>
<b>Dallas County Housing</b> 2377 N. Stemmons Freeway, Dallas, TX 75207	(214) 819-1871	POC - George Moss <a href="mailto:George.Moss@dallascounty.org">George.Moss@dallascounty.org</a>
<b>Dallas Housing Authority</b> 3939 N. Hampton Rd, Dallas, TX 75212	(214) 951-8300	POC - Tanisha Smith <a href="mailto:CSmith2@dhadal.com">CSmith2@dhadal.com</a>
<b>Denton Housing Authority</b> 308 S. Ruddell St, Denton, TX 76205	(940) 383-3039	POC N/A Handled by Individual Case Workers
<b>Fort Worth Housing Authority</b> 1201 East 13th St, Fort Worth, TX 76102	(817) 333-3400	POC - Kelli Knoll <a href="mailto:Knoll@ftwha.org">Knoll@ftwha.org</a>
<b>Garland Housing Agency</b> 210 Carver Drive, Suite 201B, Garland, TX 75040	(972) 205-3393	POC - Olivia Rudd <a href="mailto:Orudd@garlandtx.gov">Orudd@garlandtx.gov</a>
<b>Grand Prairie Housing Assistance</b> 205 W. Church St, Grand Prairie, TX 75053	(972) 237-8176	POC - Andrea Paredes <a href="mailto:Aparedes@GPTX.org">Aparedes@GPTX.org</a>
<b>Grapevine Housing Authority</b> 131 Starr Place, Grapevine, TX 76051	(817) 488-8132	POC - Remona Barron <a href="mailto:rbarron@grapevinetexas.gov">rbarron@grapevinetexas.gov</a>
<b>McKinney Housing Authority</b> 603 N. Tennessee St, McKinney, TX 75069	(972) 542-5641	POC - Maria Hernandez <a href="mailto:Mhernandez@mckinneyha.org">Mhernandez@mckinneyha.org</a>
<b>Mesquite Housing Division</b> 1616 N. Galloway Ave, Mesquite, TX 75149	(972) 216-6424	POC - Vickie Majors <a href="mailto:vmajors@ci.mesquite.tx.us">vmajors@ci.mesquite.tx.us</a>
<b>Plano Housing Authority</b> 1740 G Ave, Plano, TX 75074	(972) 423-4928	POC - Tangela Caldwell <a href="mailto:tcaldwell@planoha.org">tcaldwell@planoha.org</a>
<b>Rockwall Housing Authority</b> 100 Lakemeadow Dr, Rockwall, TX 75087	(972) 771-0211	POC - Cassie Simpson <a href="mailto:cassie.simpson@verizon.net">cassie.simpson@verizon.net</a>
<b>Tarrant County Housing Assistance Ofc</b> 2100 Circle Dr, Suite 200, Fort Worth, TX 76119	(817) 531-7640	POC - Blanca Ramos <a href="mailto:beramos@TarrantCounty.com">beramos@TarrantCounty.com</a>
<b>Waxahachie Housing Authority</b> 208 N. Patrick St, Waxahachie, TX 75165	(972) 937-5730	POC - Willie Faye Hurd, TDHCA <a href="mailto:willie.hurd@tdhca.state.tx.us">willie.hurd@tdhca.state.tx.us</a>

## **8. Family Obligations**

**Arlington Housing Authority**  
**Housing Choice Voucher Program Family Obligations**

Violation of any of the following may result in termination of participation in the Housing Choice Voucher rental housing assistance program and / or other administrative, civil and criminal actions.

1. The assisted household must supply any information determined by the Arlington Housing Authority (AHA) or HUD to be necessary for the administration of the program including, but not limited to, the following:
  - a. Evidence of citizenship or eligible immigration status
  - b. Documentation of household income or verification of \$0 household income
  - c. Documentation of household composition
  - d. Documentation of social security numbers of all household members age 6 or older, or is under the age of 6 and has an assigned SSN.
  - e. Release of Information Authorization
  - f. Drug Free Certification
  - g. Criminal Background records or records from the courts
  - h. All information provided must be true and complete.
2. The assisted household must provide any documentation required for recertification or to complete an interim examination within the timeframe allowed by the AHA.
3. The assisted household must promptly report any change in household composition and request AHA approval of any addition to the household. Unless stated otherwise by the Lease or House Rules, Guests who remain in the unit 30 days (consecutive or sporadic) in a 12 month period will no longer be considered visitors and must be considered for addition to the lease as a household member.
4. The assisted household must report any and all changes in household income to the AHA at admission to the program and at annual re-certification.
5. Participants who have previously reported that their household has zero income must promptly report any and all changes in household income in writing to the AHA within 30 days of the date of onset. **Failure to report required changes in household income within 30 days of occurrence will result in a Repayment Agreement and/or termination from the program.**
6. The AHA will continue to re-verify all income at annual recertification. Failure to report income will constitute misrepresentation on the part of the family and may result in termination of rental housing assistance. If there is any question about what to report, report any change in household income to the AHA and AHA staff will determine the appropriate manner in which the reported change is to be handled pursuant to the HUD regulations and AHA Administrative Plan.
7. Any decrease in household income may be reported to the AHA.
8. The assisted household must promptly notify the AHA in writing of any absence from the unit.
9. The assisted household must not commit fraud, bribery or any other corrupt or criminal act in connection with the program.
10. No member of the assisted household, guest, or person in the unit with express or implied permission of the assisted household, may engage in drug related criminal activity, violent criminal activity, other criminal activity, or alcohol abuse which interferes with the health, safety, or right to peaceful enjoyment of the vicinity of the premises by other residents.
11. An assisted household may not receive HCV (Section 8) assistance while receiving any other housing subsidy under any federal, state or local housing assistance program.
12. The assisted household must keep all appointments scheduled with the AHA unless canceled in advance. Failure to keep two scheduled appointments will be grounds for termination.

**Arlington Housing Authority**  
**Housing Choice Voucher Program Family Obligations**

13. The assisted household must not engage in or threaten abusive or violent behavior toward AHA personnel.
14. Any assisted household participating in the Family Self Sufficiency Program (FSS) must comply with the terms of the FSS Contract of Participation. Failure to comply with the FSS Contract of Participation, without good cause, may be grounds for termination from the FSS program and / or the HCV program.
15. The assisted household must promptly notify the AHA if any family member no longer resides in the unit.
16. The assisted household must promptly notify the AHA in writing of the birth, adoption, or court-awarded custody of a child and submit a request to add an additional household member to the assisted household. If the AHA has given approval, a foster child or live-in aide may reside in the unit. If the family does not request approval or AHA approval is denied, the family may not allow a foster child, live-in aide or any other additional persons to reside with the assisted family.
17. Members of the assisted household may engage in legal profit-making activities in the unit, but only if such activities are incidental to the primary use of the unit as a residence by members of the family.
18. The assisted household is responsible to provide any utilities that the owner is not required to provide and to maintain utility service at all times. Lack of utility service makes the unit substandard and ineligible for assistance.
19. The assisted household is responsible to provide and maintain any appliances unless the owner is responsible to provide them as specified in the lease agreement. Lack of required appliances makes the unit substandard and ineligible for assistance.
20. The assisted household is responsible for any damages done to the unit during tenancy, beyond normal wear and tear.
21. The assisted household must allow the AHA to inspect the unit at reasonable times and after reasonable notice.
22. The assisted household may not commit any serious or repeated violation of the lease and must pay their monthly portion of tenant rent, identified by the AHA, in accordance with the lease agreement.
23. The assisted household must notify the AHA at least 30-days prior to ending participation in the program or at least 60-days prior to moving or terminating the lease and notify the owner at least 30 days prior to moving or terminating the lease. The assisted household is eligible to move anytime after one year of tenancy. The assisted household must provide at least 60 days advanced written notice prior to the end of the lease to the AHA and at least 30 days notice to the owner. The lease will terminate on the last day of the month following the 30 day notice to the owner. The assisted household may not move, within the jurisdiction or outside the jurisdiction through portability, during the first year of the lease and may move, within the jurisdiction or outside the jurisdiction through portability only once during any 12 month period.
24. The assisted household must comply with the terms and conditions in the lease agreement. The family must promptly give the AHA a copy of any owner issued eviction notice.
25. The assisted unit must be used by the family as its primary residence. The assisted unit must be the family's only residence.
26. The assisted household may not receive housing choice voucher program housing assistance while residing in a unit owned by a parent, child, grandparent, grandchild, sister or brother of any member of the family, unless the AHA has determined that approving rental of the unit,

**Arlington Housing Authority  
Housing Choice Voucher Program Family Obligations**

notwithstanding such relationship, would provide reasonable accommodation for a family member who is a person with disabilities.

27. The assisted unit may not be sub-let nor the lease transferred to another person.
28. The assisted household must not own or have any interest in the unit.
29. The assisted household must keep the unit safe, decent and sanitary at all times and must report any needed repair to the landlord.
30. The assisted household must make monthly payments on executed Repayment Agreements. Missing two consecutive payments or being habitually late in making payments is grounds for termination.
31. The address of the assisted unit may not be used by anyone other than those persons listed on the lease. Use of the address for receipt of mail, or any other reason, by another person will be considered evidence that the subject individual is residing in the unit without authorization and will be grounds for termination of HCV assistance for the assisted household.
32. The assisted household is responsible for a Housing Quality Standard (HQS) violation caused by the family.

**WARNING** -- Title 18 United States Section 1001 states that a person is guilty of a felony for knowingly and willingly making a false or fraudulent statement to any department or agency of the United States. If you provide false or incomplete information, you may be required to repay any and all overpaid rental housing assistance you received, you may be also be fined up to \$10,000, imprisoned for up to 5 years; and/or prohibited from receiving future rental housing assistance.

Be sure to give correct information. Theft by Deception makes it a crime to knowingly give false information to get a lower rent, or to receive aid or benefits under any state or federally funded assistance program. I, the undersigned, certify that I have attended a briefing about the AHA's Housing Choice Voucher rental housing assistance program, that I have read the above statement or it has been read to me, and that I understand and agree to abide by the Family Obligations.

I understand that violation of any of the above items is grounds for termination from the Section 8 Housing Choice Voucher Program and may result in the loss of eligibility to participate in or receive rental housing assistance and that I am entitled to an Informal Hearing to appeal a determination to terminate rental housing assistance made by the Arlington Housing Authority in accordance with the AHA Administrative Plan Policies and Procedures.

Head of Household (Please Print): \_\_\_\_\_

\_\_\_\_\_  
Signature of Head of Household

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Spouse or Other Adult Household Member

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Spouse or Other Adult Household Member

\_\_\_\_\_  
Date

# 9. Housing Discrimination Complaint Form

# Are You a Victim of Housing Discrimination?

Fair Housing is Your Right!

If you have been denied your housing rights...you may have experienced unlawful discrimination.



U.S. Department of Housing and Urban Development

## WHERE TO MAIL YOUR FORM OR INQUIRE ABOUT YOUR CLAIM

**For Connecticut, Maine, Massachusetts,  
New Hampshire, Rhode Island, and Vermont:  
NEW ENGLAND OFFICE**

Fair Housing Hub  
U.S. Dept. of Housing and Urban Development  
Thomas P. O'Neill, Jr. Federal Building  
10 Causeway Street, Room 321  
Boston, MA 02222-1092  
Telephone (617) 994-8320 or 1-800-827-5005  
Fax (617) 565-7313 • TTY (617) 565-5453  
E-mail: [Complaints\\_office\\_01@hud.gov](mailto:Complaints_office_01@hud.gov)

**For New Jersey and New York:  
NEW YORK/NEW JERSEY OFFICE**

Fair Housing Hub  
U.S. Dept. of Housing and Urban Development  
26 Federal Plaza, Room 3532  
New York, NY 10278-0068  
Telephone (212) 264-1290 or 1-800-496-4294  
Fax (212) 264-9829 • TTY (212) 264-0927  
E-mail: [Complaints\\_office\\_02@hud.gov](mailto:Complaints_office_02@hud.gov)

**For Delaware, District of Columbia, Maryland,  
Pennsylvania, Virginia, and West Virginia:  
MID-ATLANTIC OFFICE**

Fair Housing Hub  
U.S. Dept. of Housing and Urban Development  
The Wanamaker Building  
100 Penn Square East  
Philadelphia, PA 19107  
Telephone (215) 656-0663 or 1-888-799-2085  
Fax (215) 656-3419 • TTY (215) 656-3450  
E-mail: [Complaints\\_office\\_03@hud.gov](mailto:Complaints_office_03@hud.gov)

**For Alabama, the Caribbean, Florida, Georgia, Kentucky, Missis-  
sippi, North Carolina, South Carolina, and Tennessee:  
SOUTHEAST/CARIBBEAN OFFICE**

Fair Housing Hub  
U.S. Dept. of Housing and Urban Development  
Five Points Plaza  
40 Marietta Street, 16th Floor  
Atlanta, GA 30303-2808  
Telephone (404) 331-5140 or 1-800-440-8091  
Fax (404) 331-1021 • TTY (404) 730-2654  
E-mail: [Complaints\\_office\\_04@hud.gov](mailto:Complaints_office_04@hud.gov)

**For Illinois, Indiana, Michigan, Minnesota,  
Ohio, and Wisconsin:  
MIDWEST OFFICE**

Fair Housing Hub  
U.S. Dept. of Housing and Urban Development  
Ralph H. Metcalfe Federal Building  
77 West Jackson Boulevard, Room 2101  
Chicago, IL 60604-3507  
Telephone (312) 353-7776 or 1-800-765-9372  
Fax (312) 886-2837 • TTY (312) 353-7143  
E-mail: [Complaints\\_office\\_05@hud.gov](mailto:Complaints_office_05@hud.gov)

**For Arkansas, Louisiana, New Mexico, Oklahoma, and Texas:  
SOUTHWEST OFFICE**

Fair Housing Hub  
U.S. Dept. of Housing and Urban Development  
801 North Cherry, 27th Floor  
Fort Worth, TX 76102  
Telephone (817) 978-5900 or 1-888-560-8913  
Fax (817) 978-5876 or 5851 • TTY (817) 978-5595  
E-mail: [Complaints\\_office\\_06@hud.gov](mailto:Complaints_office_06@hud.gov)

**For Iowa, Kansas, Missouri and Nebraska:  
GREAT PLAINS OFFICE**

Fair Housing Hub  
U.S. Dept. of Housing and Urban Development  
Gateway Tower II  
400 State Avenue, Room 200, 4th Floor  
Kansas City, KS 66101-2406  
Telephone (913) 551-6958 or 1-800-743-5323  
Fax (913) 551-6856 • TTY (913) 551-6972  
E-mail: [Complaints\\_office\\_07@hud.gov](mailto:Complaints_office_07@hud.gov)

**For Colorado, Montana, North Dakota, South Dakota,  
Utah, and Wyoming:  
ROCKY MOUNTAINS OFFICE**

Fair Housing Hub  
U.S. Dept. of Housing and Urban Development  
1670 Broadway  
Denver, CO 80202-4801  
Telephone (303) 672-5437 or 1-800-877-7353  
Fax (303) 672-5026 • TTY (303) 672-5248  
E-mail: [Complaints\\_office\\_08@hud.gov](mailto:Complaints_office_08@hud.gov)

**For Arizona, California, Hawaii, and Nevada:  
PACIFIC/HAWAII OFFICE**

Fair Housing Hub  
U.S. Dept. of Housing and Urban Development  
600 Harrison Street, Third Floor  
San Francisco, CA 94107-1300  
Telephone (415) 489-6524 or 1-800-347-3739  
Fax (415) 489-6558 • TTY (415) 436-6594  
E-mail: [Complaints\\_office\\_09@hud.gov](mailto:Complaints_office_09@hud.gov)

**For Alaska, Idaho, Oregon, and Washington:  
NORTHWEST/ALASKA OFFICE**

Fair Housing Hub  
U.S. Dept. of Housing and Urban Development  
Seattle Federal Office Building  
909 First Avenue, Room 205  
Seattle, WA 98104-1000  
Telephone (206) 220-5170 or 1-800-877-0246  
Fax (206) 220-5447 • TTY (206) 220-5185  
E-mail: [Complaints\\_office\\_10@hud.gov](mailto:Complaints_office_10@hud.gov)

***If after contacting the local office nearest you, you still have ques-  
tions – you may contact HUD further at:***

U.S. Dept. of Housing and Urban Development  
Office of Fair Housing and Equal Opportunity  
451 7th Street, S.W., Room 5204  
Washington, DC 20410-2000  
Telephone (202) 708-0836 or 1-800-669-9777  
Fax (202) 708-1425 • TTY 1-800-927-9275

To file electronically, visit: [www.hud.gov](http://www.hud.gov)

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PLACE  
POSTAGE  
HERE

MAIL TO:

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Public Reporting Burden for this collection of information is estimated to average 20 minutes per response, 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 is authorized to collect this information by Title VIII of the Civil Rights Act of 1968, as amended by the Fair Housing Amendments Act of 1988, (P.L. 100-430); Title VI of the Civil Rights Act of 1964, (P.L. 88-352); Section 504 of the Rehabilitation Act of 1973, as amended, (P.L. 93-112); Section 109 of Title I- Housing and Community Development Act of 1974, as amended, (P.L. 97-35); Americans with Disabilities Act of 1990, (P.L. 101-336); and by the Age Discrimination Act of 1975, as amended, (42 U.S.C. 6103).

The information will be used to investigate and to process housing discrimination complaints. The information may be disclosed to the United States Department of Justice for its use in the filing of pattern and practice suits of housing discrimination or the prosecution of the person(s) who committed that discrimination where violence is involved; and to State or local fair housing agencies that administer substantially equivalent fair housing laws for complaint processing. Failure to provide some or all of the requested information will result in delay or denial of HUD assistance.

Disclosure of this information is voluntary.



# HOUSING DISCRIMINATION INFORMATION

Departamento de Vivienda y Desarrollo Urbano    Oficina de Derecho Equitativo a la Vivienda  
U.S. Department of Housing and Urban Development    Office of Fair Housing and Equal Opportunity

**Instructions:** (Please type or print) Read this form carefully. Try to answer all questions. If you do not know the answer or a question does not apply to you, leave the space blank. You have one year from the date of the alleged discrimination to file a complaint. Your form should be signed and dated.

---

Your Name

---

Your Address

---

City

State

Zip Code

---

Best time to call

Your Daytime Phone No

Evening Phone No

## Who else can we call if we cannot reach you?

---

Contact's Name

Best Time to call

---

Daytime Phone No

Evening Phone No

---

Contact's Name

Best Time to call

---

Daytime Phone No

Evening Phone No

## 1 What happened to you?

How were you discriminated against?

For example: were you refused an opportunity to rent or buy housing? Denied a loan? Told that housing was not available when in fact it was? Treated differently from others seeking housing?

State briefly what happened.

# HOUSING DISCRIMINATION INFORMATION

Departamento de Vivienda y Desarrollo Urbano    Oficina de Derecho Equitativo a la Vivienda  
U.S. Department of Housing and Urban Development    Office of Fair Housing and Equal Opportunity

## 2 Why do you think you are a victim of housing discrimination?

Is it because of your:

· race · color · religion · sex · national origin · familial status (families with children under 18) · disability?

For example: were you denied housing because of your race? Were you denied a mortgage loan because of your religion? Or turned down for an apartment because you have children?

Briefly explain why you think your housing rights were denied and circle the factor(s) listed above that you believe apply.

## 3 Who do you believe discriminated against you?

For example: was it a landlord, owner, bank, real estate agent, broker, company, or organization?

Identify who you believe discriminated against you.

\_\_\_\_\_  
Name

\_\_\_\_\_  
Address

## 4 Where did the alleged act of discrimination occur?

For example: Was it at a rental unit? Single family home? Public or Assisted Housing? A Mobile Home?

Did it occur at a bank or other lending institution?

Provide the address.

\_\_\_\_\_  
Address

\_\_\_\_\_  
City

\_\_\_\_\_  
State

\_\_\_\_\_  
Zip Code

## 5 When did the last act of discrimination occur?

Enter the date

\_\_\_\_ / \_\_\_\_ / \_\_\_\_

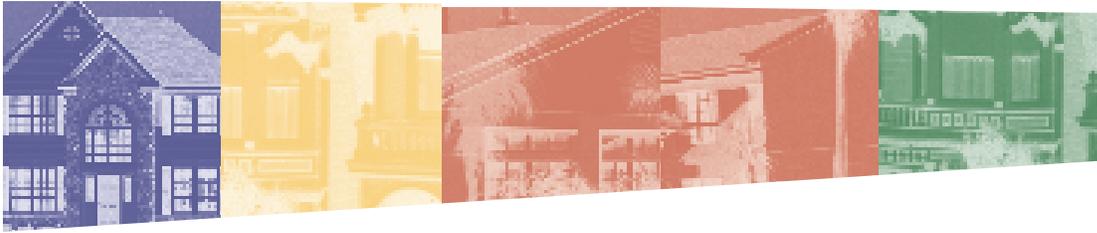
Is the alleged discrimination continuing or ongoing?

Yes No \_\_\_\_\_

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

Send this form to HUD or to the fair housing agency nearest you. If you are unable to complete this form, you may call that office directly. See address and telephone listings on back page.



## It is Unlawful to Discriminate in Housing Based on These Factors...

- Race
- Color
- National origin
- Religion
- Sex
- Familial status (families with children under the age of 18, or who are expecting a child)
- Handicap (if you or someone close to you has a disability)

## If You Believe Your Rights Have Been Violated...

- HUD or a State or local fair housing agency is ready to help you file a complaint.
- After your information is received, HUD or a State or local fair housing agency will contact you to discuss the concerns you raise.

Detach here. Fold and close with glue or tape (no staples)

Keep this information for your records.

Date you mailed your information to HUD: \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

Address to which you sent the information:

Office \_\_\_\_\_

Telephone \_\_\_\_\_

Street \_\_\_\_\_

City \_\_\_\_\_

State \_\_\_\_\_

Zip Code \_\_\_\_\_

If you have not heard from HUD or a State or local fair housing agency within three weeks from the date you mailed this form, you may call to inquire about the status of your complaint. See address and telephone listings on back page.

## ARE YOU A VICTIM OF HOUSING DISCRIMINATION?

“The American Dream of having a safe and decent place to call ‘home’ reflects our shared belief that in this nation, opportunity and success are within everyone’s reach.

Under our Fair Housing laws, every citizen is assured the opportunity to build a better life in the home or apartment of their choice — regardless of their race, color, religion, sex, national origin, family status or disability.”

Alphonso Jackson  
Secretary

## HOW DO YOU RECOGNIZE HOUSING DISCRIMINATION?

### Under the Fair Housing Act, it is Against the Law to:

- Refuse to rent to you or sell you housing
- Tell you housing is unavailable when in fact it is available
- Show you apartments or homes only in certain neighborhoods
- Set different terms, conditions, or privileges for sale or rental of a dwelling
- Provide different housing services or facilities
- Advertise housing to preferred groups of people only
- Refuse to provide you with information regarding mortgage loans, deny you a mortgage loan, or impose different terms or conditions on a mortgage loan
- Deny you property insurance
- Conduct property appraisals in a discriminatory manner
- Refuse to make reasonable accommodations for persons with a disability if the accommodation may be necessary to afford such person a reasonable and equal opportunity to use and enjoy a dwelling.
- Fail to design and construct housing in an accessible manner
- Harass, coerce, intimidate, or interfere with anyone exercising or assisting someone else with his/her fair housing rights

## **10. Things you Need to Know – Frequently Asked Questions**

# Housing Choice Voucher Program

## Things you Need to Know - Frequently Asked Questions

### 1. What is the term of the Housing Voucher?

The term of the voucher is the amount of time the voucher recipient has available to search for suitable rental housing. The Arlington Housing Authority (AHA) normally issues a Housing Voucher with a term of 60-days; however, the term of the voucher is subject to the discretion of the AHA. The recipient may use the Housing Voucher to search for suitable rental housing during the term of the voucher. The recipient is responsible to select rental housing of their choice, complete a Request for Tenancy Approval form, and return the completed form to the AHA before the term of their voucher expires.

### 2. Can the term of my housing voucher be extended?

While it may be possible to obtain an extension to the term of the Housing Voucher, it is not the normal practice of the AHA to grant extensions. Thirty days (30) is considered ample time to locate suitable rental housing in Arlington. Voucher recipients may submit a written request for an extension stating the reasons for the request including the reasons why the recipient was unable to select suitable rental housing during the voucher term. The AHA will evaluate the request and make a determination in writing. Requests are evaluated on a case by case basis. An example of an instance when an extension was approved was for a recipient who became ill and was hospitalized for two weeks during their voucher term. The documentation of their illness included hospital records and medical records demonstrating that they were unable to search for rental housing during a substantial term of their voucher as a result of medical conditions that were beyond the control of the recipient.

### 3. How does the AHA determine the Payment Standard assigned to my household?

The Payment Standards are adopted by the AHA Board of Commissioners and are within a range of 90% to 110% of the HUD published Fair Market Rents for the Arlington-Fort Worth area. A separate Payment Standard is identified for each bedroom category (1, 2, 3, 4, 5 bedroom category). For example, a household that qualifies for a 1-bedroom Housing Voucher is required to utilize the AHA's 1-bedroom Payment Standard. The AHA assigns a Housing Voucher size (1, 2, 3, 4, 5 bedroom category) to each recipient based on the number of persons that will be living in the assisted household, in accordance with the AHA's subsidy standards. A copy of the AHA's Payment Standards is included in the AHA's Briefing Orientation packet of materials made available to all persons that receive a Housing Choice Voucher. The subsidy standards are based on a minimum of one person per bedroom and a maximum of two persons per bedroom. The living room may also be used as a living/sleeping room. The AHA consistently applies the smallest number of bedrooms needed to house a family without overcrowding.

AHA Subsidy Standards:

<b>BEDROOMS*</b>	<b>MINIMUM NO. OF PERSONS IN HOUSEHOLD</b>	<b>MAXIMUM NUMBER OF PERSONS IN HOUSEHOLD</b>
0 BR	1	2
1 BR	1	4
2 BR	3	6
3 BR	5	8
4 BR	7	10

\* In addition to the bedrooms, the living room may be used as a living/sleeping room

**4. How does the AHA select applicants from its HCV waiting list?**

The AHA does not have sufficient funding to assist all applicants that applied and placed applications on its waiting list. The AHA contacts applicants that it selects from the waiting list by mail or e-mail. It is the responsibility of the applicant to notify the AHA of any changes to the information they provided on their application especially their contact information. Applicants may continue to update their application or check the status of their application online.

The AHA selects applications from the waiting list when funding becomes available to provide rental housing assistance for additional households. Applicants are selected from the waiting list in order of the date and time of application and based on local preference criteria; Preference Criteria #1: Applicants that live or work in Arlington, TX, and Preference Criteria # 2: Applicants that are employed (the head of household or their spouse who are elderly or disabled automatically meet this preference)

Selection Criteria:

1. Applicants that meet preference criteria #1 and #2.
2. Applicants that meet preference criteria #1 or #2.
3. Applicants that do not meet preference criteria # 1 or #2

**5. Will the AHA consider granting exceptions to its subsidy standards?**

The AHA will consider exceptions to its subsidy standards. Recipients must submit a written request for an exception. The AHA will evaluate the request giving consideration to the relationship, age, gender, health or disability of family members, or other individual circumstances. The following circumstances may support exceptions to the Subsidy Standards:

- a) Medical reasons requiring a family member to have a separate bedroom, if properly verified and documented by a medical doctor, health care agency or other qualified professional.
- b) Special circumstances relating to family relationships, age, gender or disability, if properly verified and documented by qualified professional (i.e. allows two elderly or disabled household members to be given separate bedrooms).

This documentation must be provided to the AHA in writing. The AHA will review the request, verify the documentation and issue a determination in writing. Requests for exceptions are considered on a case by case basis.

## **6. How does the AHA determine the Total Tenant Payment?**

The Total Tenant Payment is a HUD term that means 30% of the assisted household's monthly adjusted income. The AHA determines the Total Tenant Payment (TTP) by applying the HUD formula for all participants. The AHA sums the annual income including income from assets from all members of the assisted household. In addition, the AHA provides deductions and allowances in accordance with HUD regulations. Deductions are provided for family medical expenses. Allowances are provided for dependent children and for the elderly. Allowances and deductions are subtracted from the annual income which provides the net household income. The net household income is divided by 12 and multiplied by 30%. The result is the monthly adjusted income, or TTP.

The TTP is the highest of the following amounts, rounded to the nearest dollar:

- 30 percent of the family's monthly adjusted income
- 10 percent of the family's monthly gross income (annual income)
- or a minimum rent of \$50

### **EXAMPLE – CALCULATING TOTAL TENANT PAYMENT**

The Jones household is a family of four. The Jones' annual gross income is \$10,680. Their annual adjusted income is \$9,600.

- a.) 30% of monthly adjusted income ( $\$800 \times .30$ ) = \$240
- b.) 10% of monthly gross income ( $\$890 \times .10$ ) = \$89
- c.) PHA minimum rent: \$50

The highest of the three amounts shown above is \$240. Thus, the total tenant payment is \$240. This means that the Jones household will pay a minimum of \$240 for the rental unit that they actually select.

## **7. How does the AHA determine the amount that it will pay in rental Housing Assistance and the tenant's share of rent?**

The AHA applies the HUD formula to determine the Housing Assistance Payment and tenant share of rent. Variables in the formula include the Payment Standard, Utility Allowance, Contract rent, and the Total Tenant Payment. If a voucher recipient selects a dwelling whose rent is at, or below, their payment standard for their voucher size the family will pay about 30% of their income for rent and utilities. If the voucher recipient selects a dwelling where the rent is greater than their payment standard, they will pay a portion of rent that is greater than 30% of their income for rent and utilities. HUD rules prohibit participants from paying more than 40% of their income for rent. The AHA will not enter into a contract for units selected by the voucher recipient that result in the participant paying more than 40% of their income for rent.

**8. How does the AHA determine the maximum rent for an assisted unit?**

Upon receipt of the completed Request for Tenancy Approval, the AHA contacts the landlord to schedule an inspection. The AHA inspects the dwelling unit selected by the family to determine if the dwelling meets HUD Housing Quality Standards. The AHA also conducts a Rent Reasonableness assessment comparing the rent requested by the owner to other similar rental units in the area. The rent charged by the owner for the rental unit may not exceed the amount of rent for other similar rental units in the area.

**9. Can a recipient of a Housing Choice Voucher locate assisted housing in another jurisdiction outside the city of Arlington?**

An eligible family that has been issued a housing choice voucher may use their housing voucher to lease a unit anywhere in the United States where there is a housing agency operating a Housing Choice Voucher Program. This feature of the program is referred to as “portability”. Portability provides flexibility for those who need to relocate with assistance to follow job opportunities in a new location, select the best school districts, or be near family members or child care providers. In this way, portability allows an assisted family the same choices available to others in the community.

If neither the head of household nor their spouse had a legal residence in the city of Arlington at the date of their initial application for assistance, the family is not permitted to exercise portability upon initial issuance of a voucher. The family must use their voucher in Arlington and reside in the city of Arlington with Housing Choice Voucher assistance for one year.

A family is expected to initiate the portability process by informing the AHA of its interest in moving to another jurisdiction. After the family has made a request to exercise portability, the AHA will provide the family with information to contact the Public Housing Authority (PHA) in the jurisdiction where the family wishes to live.

The AHA’s Briefing Orientation materials include a list of area Public Housing Agencies and their contact information. Additional information about portability is available upon request.

**10. Can a landlord charge a security deposit to Housing Choice Voucher participants?**

Yes, landlords can charge and collect a reasonable security deposit. Security deposits may not exceed those charged to unassisted tenants. For participants that use their voucher for the unit in which they have been residing and have paid the security deposit prior to move in, any additional amounts that the landlord seeks to charge for security deposit in this instance must be settled prior to the start of housing assistance.

**11. What type of information will the AHA provide to property owners / property managers about participants in the HCV program?**

The AHA will provide property owners with the following information upon request:

- a) The family’s current address as shown in the AHA records;
- b) The name and address, if known, of the property owner at the family’s current unit; and
- c) The prior address of the family.

**12. Does the AHA provide information about the location of housing units that are accessible to persons with disabilities?**

Yes, the AHA utilizes a service known as GoSection8 that provides a list of rental units that may be available for rent to persons with a Housing Voucher. The information provided by GoSection8 also contains a list of accessible dwelling units. GoSection8 can be contacted at [www.gosection8.com](http://www.gosection8.com) or at 1-866-466-7328. If you are unable to access the GoSection8 website or its data, you may contact the AHA for a list of accessible units known to the AHA that may be available for rent.

# **11. Finding a Place to Live – GoSection8.com**

# Find a Place to Live



## About GoSection8

GoSection8.com is the largest rental-listing service for the Section 8 housing market. They service families, landlords and public-housing agencies across the United States. Hundreds of thousands of tenants and landlords nationwide benefit from the programs. Their core mission is to help Americans living in poverty. They provide free information about current housing options under HUD's Section 8 Housing Voucher (Section 8) Program in every market in the country. Their comprehensive database lets families locate and compare affordable rental homes currently available in their area. There's never a charge for family members to access their rental listings.

GoSection8.com's listings are available online as well as through their bi-lingual call center. Receive free call center support by calling toll free 1-866-466-SEC8 (7328) or email [tenantsupport@gosection8.com](mailto:tenantsupport@gosection8.com)

## To Search for a Property:

1. Access property listings at <http://www.gosection8.com>
2. Type "Arlington, Texas" in the search box and press enter. This provides a list of all available properties in Arlington that have been listed by property owners on the website.
3. Properties can be viewed by scrolling down or printed by selecting the print list button.
4. Property details can be viewed by clicking on the property address.
5. Property search can be refined to only include certain criteria such as disabled-accessible units, capped price range, number of bedrooms, etc. by entering applicable information on the right side of the screen under "Refine Search".

*Note: The use of this website is not a requirement, nor is the Arlington Housing Authority responsible for the property information that is posted. The website is provided as an option to assist applicants/clients in search of housing.*

## Accessible Housing for Persons with Disabilities - Arlington, TX

PROPERTY NAME	STREET ADDRESS	ZIP CODE	PHONE	TOTAL UNITS	BED ROOMS
ARLINGTON NEW BEGINNINGS	311 NL ROBINSON COURT	76011	(817) 860-6763	14	1
ARLINGTON VILLA ASSISTED LIVING -seniors only-	2601 W RANDOL MILL ROAD	76012	(817) 274-5571	60	eff, 1
ATRIUM GARDENS (formerly CARRIAGE SQUARE)	1017 W. PIONEER PKWY.	76013	(817) 275-4800	70	1,2,3
CLAREMONT-MATURE LIVING APARTMENT COMMUNITY	971 E SANFORD STREET	76011	(817) 226-6633	261	1,2
COUNTRYWOOD APARTMENTS -first floor access for disabled persons-	525 W. LAMAR	76011	(817) 422-9819	176	1,2,3
CROSSWAY APARTMENTS (formerly L'ATRIUM ON THE CREEK)	1676 CARTER DRIVE	76010	(817) 804-0442	484	1,2,3
HIDDEN HOLLOW	2019 COOPER CORNER	76010	(817) 265-3473	140	1,2
HILL HOUSE INDEPENDENT LIVING APTS	1515 GINA DRIVE	76013	(817) 861-5074	24	eff
NUESTRO HOGAR APARTMENTS -seniors only-	709 MAGNOLIA STREET	76010	(817) 261-0608	7	eff, 1
PARKLAND POINTE	907 PINION DRIVE	76017	(817) 472-9888	250	1,2,3,4
PRIMROSE AT JOHNSON CREEK (formerly VILLAGE AT JOHNSON CREEK)	815 SENIOR CREEK DRIVE	76010	(817) 226-8800	140	1,2
STONE RIDGE APARTMENTS	600 E. ARKANSAS LANE	76014	(817) 261-5601	204	1,2,3
VISTA PLACE APARTMENTS -first floor access for disabled persons- -also manages several single story duplexes-	808 N. CENTER STREET	76011	(817) 381-5572	6	1

## Security Deposit Requirements

The owner may collect a security deposit from the tenant. Security deposits charged by owners may not exceed those charged to unassisted tenants.

For lease-in-place families, a security deposit should have already been paid. In these cases, the owner should settle the issue with the tenant prior to the beginning of the AHA assistance.

## Information to Owners

As required by the Conforming Rule [CFR 982.307(b)(2)], the AHA will provide property owners with the information specifically required by the rule. This includes:

1. The family's current address as shown in the AHA records;
2. The name and address, if known, of the property owner at the family's current unit; and
3. The prior address of the family.

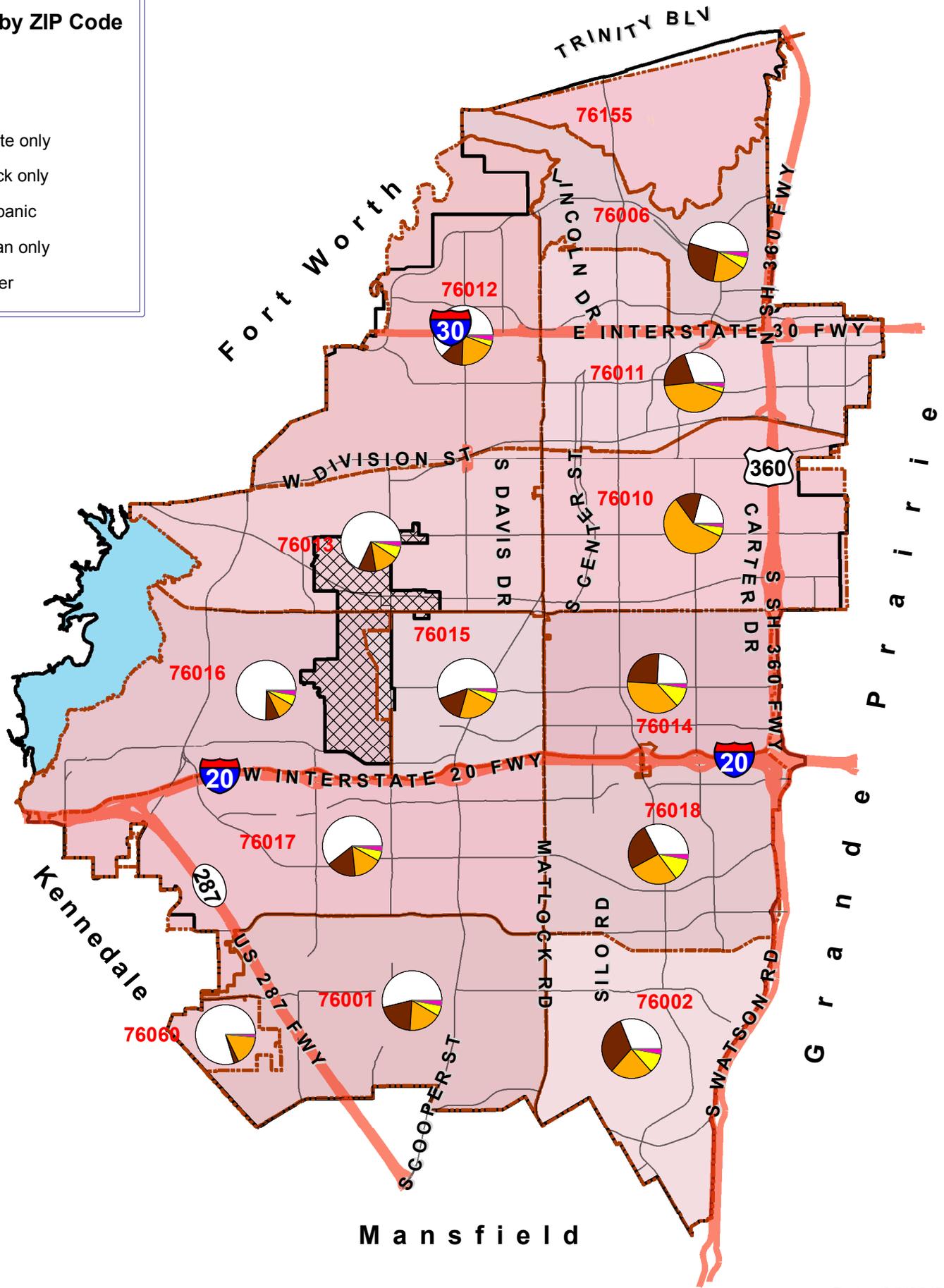
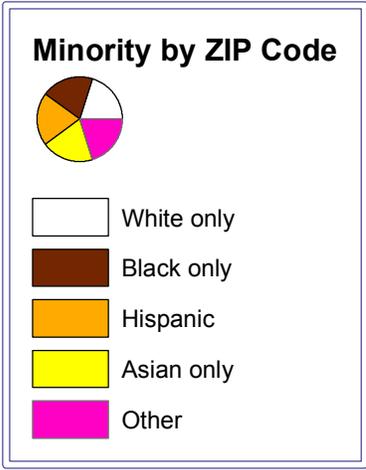
The AHA will also advise all property owners that AHA applicant screening is the property owner's responsibility.

Top 10 Arlington Employers			
Employer	Industry	Employer	Industry
1. Arlington ISD	Public Education	6. Arlington Memorial Hospital	Medical Center
2. University of Texas at Arlington	Higher Education	7. Americredit	Financial Services
3. Six Flags Over Texas	Amusement Park	8. Providian Financial	Financial Services
4. General Motors	Automobile Assembly	9. National Semiconductor	Manufacturer
5. City of Arlington	Municipality	10. Daskocil Manufacturing	Manufacturer

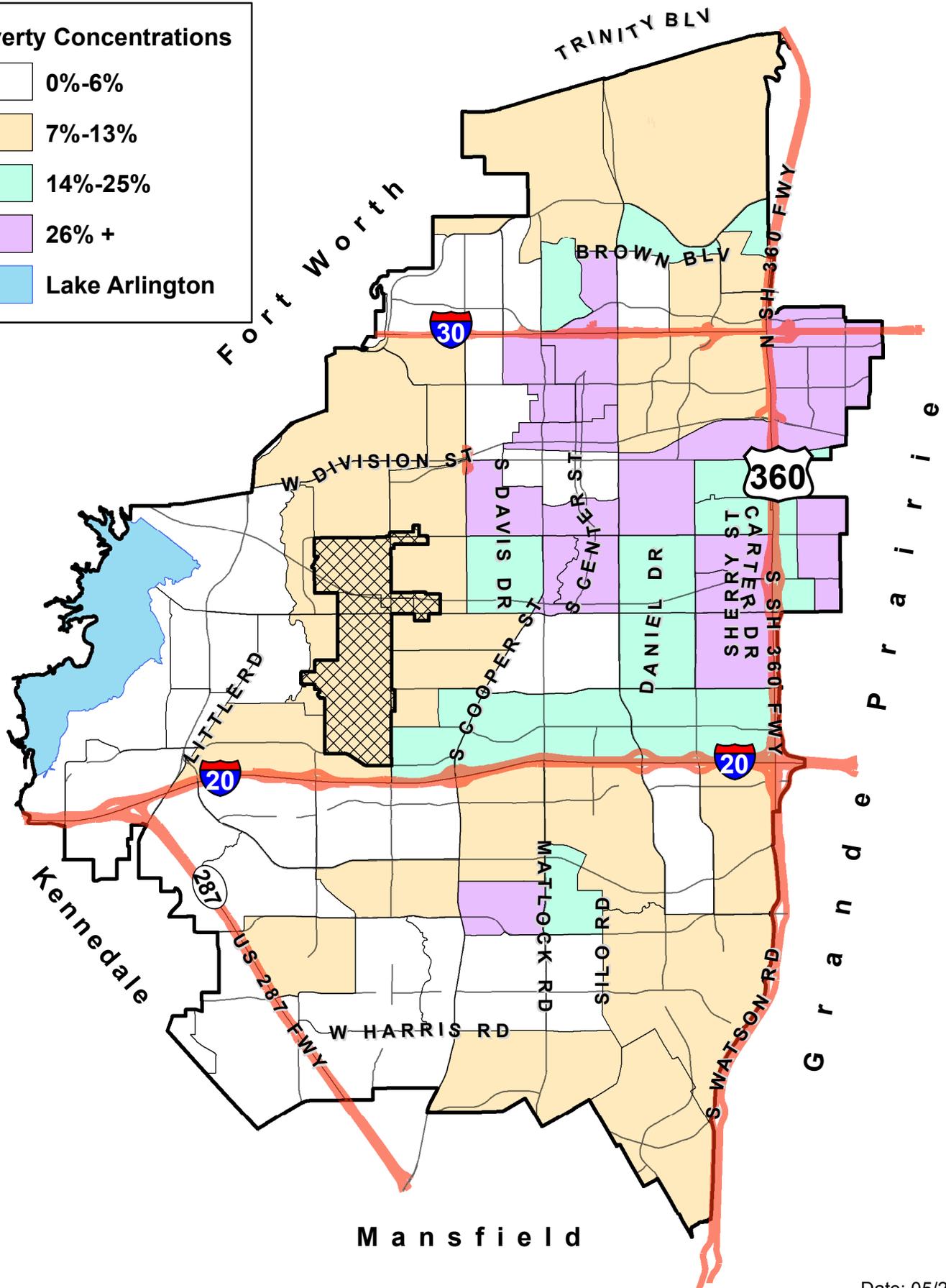
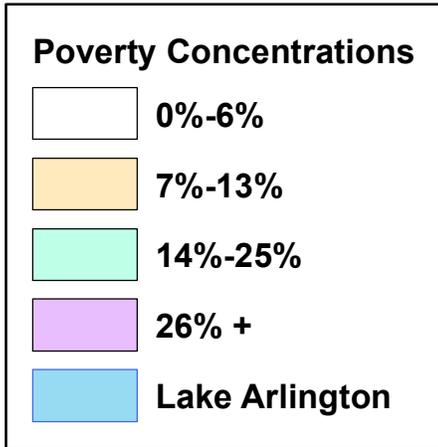
Arlington and Neighboring Cities - Independent School District (ISD) Listings		
<p><b>Arlington ISD</b>            1203 West Pioneer Parkway            Arlington , TX 76013            682-867-4611  <a href="http://www.aisd.net">www.aisd.net</a></p>	<p><b>Fort Worth ISD</b>            100 North University Drive            Fort Worth, TX 76107            817-871-2000  <a href="http://www.fortworthisd.org">www.fortworthisd.org</a></p>	<p><b>Texas Education Agency</b>            School Report Ratings            District Maps            TAKS/STAR Statistics  <a href="http://www.tea.state.tx.us/index.html">www.tea.state.tx.us/index.html</a></p>
<p><b>Grand Prairie ISD</b>            2602 South Belt Line Road            Grand Prairie, TX 75052            972-264-6141  <a href="http://www.gpisd.org">www.gpisd.org</a></p>	<p><b>Mansfield ISD</b>            605 East Broad Street            Mansfield , TX 76063            817-299-6300  <a href="http://www.mansfieldisd.org">www.mansfieldisd.org</a></p>	

# 12. Maps

# Minority Concentrations of Arlington and Surrounding Cities by ZIP Code Based on 2010 Census Data



# Poverty Concentrations in Arlington



Date: 05/23/2013

# 13. Housing Voucher Form Sample

**Voucher**  
**Housing Choice Voucher Program**

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

OMB No. 2577-0169  
(exp. 9/30/2012)

Public Reporting Burden for this collection of information is estimated to average 0.05 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. This agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless that collection displays a valid OMB control number. Assurances of confidentiality are not provided under this collection. This collection of information is authorized under Section 8 of the U.S. Housing Act of 1937 (42 U.S.C. 1437f). The information is used to authorize a family to look for an eligible unit and specifies the size of the unit. The information also sets forth the family's obligations under the Housing Choice Voucher Program.

**Privacy Act Statement.** The Department of Housing and Urban Development (HUD) is authorized to collect the information required on this form by Section 8 of the U.S. Housing Act of 1937 (42 U.S.C. 1437f). Collection of family members' names is mandatory. The information is used to authorize a family to look for an eligible unit and specifies the size of the unit. The information also sets forth the family's obligations under the Housing Choice Voucher Program. HUD may disclose this information to Federal, State and local agencies when relevant to civil, criminal, or regulatory investigations and prosecutions. It will not be otherwise disclosed or released outside of HUD, except as permitted or required by law. Failure to provide any of the information may result in delay or rejection of family voucher issuance.

Please read <b>entire</b> document before completing form Fill in all blanks below. Type or print clearly.		Voucher Number
1. Insert <b>unit size</b> in number of bedrooms. (This is the number of bedrooms for which the Family qualifies, and is used in determining the amount of assistance to be paid on behalf of the Family to the owner.)		1. Unit Size
2. <b>Date Voucher Issued (mm/dd/yyyy)</b> Insert actual date the Voucher is issued to the Family.		2. Issue Date (mm/dd/yyyy)
3. <b>Date Voucher Expires (mm/dd/yyyy)</b> Insert date sixty days after date Voucher is issued. (See Section 6 of this form.)		3. Expiration Date (mm/dd/yyyy)
4. <b>Date Extension Expires</b> (if applicable)(mm/dd/yyyy) (See Section 6. of this form)		4. Date Extension Expires (mm/dd/yyyy)
5. Name of Family Representative	6. Signature of Family Representative	Date Signed (mm/dd/yyyy)
7. Name of Public Housing Agency (PHA)		
8. Name and Title of PHA Official	9. Signature of PHA Official	Date Signed (mm/dd/yyyy)

**I. Housing Choice Voucher Program**

- A. The public housing agency (PHA) has determined that the above named family (item 5) is eligible to participate in the housing choice voucher program. Under this program, the family chooses a decent, safe and sanitary unit to live in. If the owner agrees to lease the unit to the family under the housing choice voucher program, and if the PHA approves the unit, the PHA will enter into a housing assistance payments (HAP) contract with the owner to make monthly payments to the owner to help the family pay the rent.
- B. The PHA determines the amount of the monthly housing assistance payment to be paid to the owner. Generally, the monthly housing assistance payment by the PHA is the difference between the applicable payment standard and 30 percent of monthly adjusted family income. In determining the maximum initial housing assistance payment for the family, the PHA will use the payment standard in effect on the date the tenancy is approved by the PHA. The family may choose to rent a unit for more than the payment standard, but this choice does not change the amount of the PHA's assistance payment. The actual amount of the PHA's assistance payment will be determined using the gross rent for the unit selected by the family.

**2. Voucher**

- A. When issuing this voucher the PHA expects that if the family finds an approvable unit, the PHA will have the money available to enter into a HAP contract with the owner. However, the PHA is under no obligation to the family, to any owner, or to any other person, to approve a tenancy. The PHA does not have any liability to any party by the issuance of this voucher.
- B. The voucher does not give the family any right to participate in the PHA's housing choice voucher program. The family becomes a participant in the PHA's housing choice voucher program when the HAP contract between the PHA and the owner takes effect.
- C. During the initial or any extended term of this voucher, the PHA may require the family to report progress in leasing a unit at such intervals and times as determined by the PHA.

### 3. PHA Approval or Disapproval of Unit or Lease

- A. When the family finds a suitable unit where the owner is willing to participate in the program, the family must give the PHA the request for tenancy approval (on the form supplied by the PHA), signed by the owner and the family, and a copy of the lease, including the HUD-prescribed tenancy addendum. **Note: Both documents must be given to the PHA no later than the expiration date stated in item 3 or 4 on top of page one of this voucher.**
- B. The family must submit these documents in the manner that is required by the PHA. PHA policy may prohibit the family from submitting more than one request for tenancy approval at a time.
- C. The lease must include, word-for-word, all provisions of the tenancy addendum required by HUD and supplied by the PHA. This is done by adding the HUD tenancy addendum to the lease used by the owner. If there is a difference between any provisions of the HUD tenancy addendum and any provisions of the owner's lease, the provisions of the HUD tenancy addendum shall control.
- D. After receiving the request for tenancy approval and a copy of the lease, the PHA will inspect the unit. The PHA may not give approval for the family to lease the unit or execute the HAP contract until the PHA has determined that all the following program requirements are met: the unit is eligible; the unit has been inspected by the PHA and passes the housing quality standards (HQS); the rent is reasonable; and the landlord and tenant have executed the lease including the HUD-prescribed tenancy addendum.
- E. If the PHA approves the unit, the PHA will notify the family and the owner, and will furnish two copies of the HAP contract to the owner.
  - 1. The owner and the family must execute the lease.
  - 2. The owner must sign both copies of the HAP contract and must furnish to the PHA a copy of the executed lease and both copies of the executed HAP contract.
  - 3. The PHA will execute the HAP contract and return an executed copy to the owner.
- F. If the PHA determines that the unit or lease cannot be approved for any reason, the PHA will notify the owner and the family that:
  - 1. The proposed unit or lease is disapproved for specified reasons, and
  - 2. If the conditions requiring disapproval are remedied to the satisfaction of the PHA on or before the date specified by the PHA, the unit or lease will be approved.

### 4. Obligations of the Family

- A. When the family's unit is approved and the HAP contract is executed, the family must follow the rules listed below in order to continue participating in the housing choice voucher program.
- B. The family must:
  - 1. Supply any information that the PHA or HUD determines to be necessary including evidence of citizenship or eligible immigration status, and information for use in a regularly scheduled reexamination or interim reexamination of family income and composition.
  - 2. Disclose and verify social security numbers and sign and submit consent forms for obtaining information.
  - 3. Supply any information requested by the PHA to verify that the family is living in the unit or information related to family absence from the unit.
  - 4. Promptly notify the PHA in writing when the family is away from the unit for an extended period of time in accordance with PHA policies.
  - 5. Allow the PHA to inspect the unit at reasonable times and after reasonable notice.
  - 6. Notify the PHA and the owner in writing before moving out of the unit or terminating the lease.
  - 7. Use the assisted unit for residence by the family. The unit must be the family's only residence.
  - 8. Promptly notify the PHA in writing of the birth, adoption, or court-awarded custody of a child.
  - 9. Request PHA written approval to add any other family member as an occupant of the unit.
  - 10. Promptly notify the PHA in writing if any family member no longer lives in the unit.
  - 11. Give the PHA a copy of any owner eviction notice.
  - 12. Pay utility bills and provide and maintain any appliances that the owner is not required to provide under the lease.
- C. Any information the family supplies must be true and complete.
- D. The family (including each family member) must not:
  - 1. Own or have any interest in the unit (other than in a cooperative, or the owner of a manufactured home leasing a manufactured home space).
  - 2. Commit any serious or repeated violation of the lease.
  - 3. Commit fraud, bribery or any other corrupt or criminal act in connection with the program.
  - 4. Engage in drug-related criminal activity or violent criminal activity or other criminal activity that threatens the health, safety or right to peaceful enjoyment of other residents and persons residing in the immediate vicinity of the premises.
  - 5. Sublease or let the unit or assign the lease or transfer the unit.

6. Receive housing choice voucher program housing assistance while receiving another housing subsidy, for the same unit or a different unit under any other Federal, State or local housing assistance program.
7. Damage the unit or premises (other than damage from ordinary wear and tear) or permit any guest to damage the unit or premises.
8. Receive housing choice voucher program housing assistance while residing in a unit owned by a 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 rental of the unit, notwithstanding such relationship, would provide reasonable accommodation for a family member who is a person with disabilities.
9. Engage in abuse of alcohol in a way that threatens the health, safety or right to peaceful enjoyment of the other residents and persons residing in the immediate vicinity of the premises

#### **5. Illegal Discrimination**

If the family has reason to believe that, in its search for suitable housing, it has been discriminated against on the basis of age, race, color, religion, sex, disability, national origin, or familial status, the family may file a housing discrimination complaint with any HUD Field Office in person, by mail, or by telephone. The PHA will give the family information on how to fill out and file a complaint.

#### **6. Expiration and Extension of Voucher**

The voucher will expire on the date stated in item 3 on the top of page one of this voucher unless the family requests an extension in writing and the PHA grants a written extension of the voucher in which case the voucher will expire on the date stated in item 4. At its discretion, the PHA may grant a family's request for one or more extensions of the initial term.

# 14. Rent Estimator Worksheet

# RENT ESTIMATE WORKSHEET EFFECTIVE JANUARY 1, 2013

HEAD OF HOUSEHOLD NAME \_\_\_\_\_

ELIGIBLE VOUCHER SIZE \_\_\_\_\_

TOTAL TENANT PAYMENT AT 30% \_\_\_\_\_ / 3 = \_\_\_\_\_

PAYMENT STANDARD \_\_\_\_\_

MAXIMUM GROSS RENT (MGR) \_\_\_\_\_

EFFECTIVE 01/01/2013		MAXIMUM RENT TO OWNER			
		DUPLEX / TRIPLEX	MOBILE HOME	HOUSE	APARTMENT / TOWNHOME
<b>1</b> <small>BEDROOM \$716</small>	ALL BILLS PAID				
	ELECTRIC ONLY				
	ELECTRIC & WATER				
	ELECTRIC, GAS, & WATER				
<b>2</b> <small>BEDROOM \$871</small>	ALL BILLS PAID				
	ELECTRIC ONLY				
	ELECTRIC & WATER				
	ELECTRIC, GAS, & WATER				
<b>3</b> <small>BEDROOM \$1,176</small>	ALL BILLS PAID				
	ELECTRIC ONLY				
	ELECTRIC & WATER				
	ELECTRIC, GAS, & WATER				
<b>4</b> <small>BEDROOM \$1,328</small>	ALL BILLS PAID				
	ELECTRIC ONLY				
	ELECTRIC & WATER				
	ELECTRIC, GAS, & WATER				
<b>5</b> <small>BEDROOM \$1,526</small>	ALL BILLS PAID				
	ELECTRIC ONLY				
	ELECTRIC & WATER				
	ELECTRIC, GAS, & WATER				

ESTIMATE TENANT RENT PORTION RANGE		
ADJUSTED MONTHLY INCOME	30% -	40%

\_\_\_\_\_  
APPLICANT/PARTICIPANT SIGNATURE

\_\_\_\_\_  
DATE

\_\_\_\_\_  
HOUSING SPECIALIST SIGNATURE

\_\_\_\_\_  
DATE

# 15. Request for Tenancy Approval Packet

# 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. 4/30/2014)

Public reporting burden for this collection of information is estimated to average .08 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. This agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless that collection displays a valid OMB control number. Assurances of confidentiality are not provided under this collection. Eligible families submit this information to the Public Housing Authority (PHA) when applying for housing assistance under Section 8 of the U.S. Housing Act of 1937 (42 U.S.C. 1437f). The PHA uses the information to determine if the family is eligible, if the unit is eligible, and if the lease complies with program and statutory requirements. Responses are required to obtain a benefit from the Federal Government. The information requested does not lend itself to confidentiality.

1. Name of Public Housing Agency (PHA)			2. Address of Unit (street address, apartment number, city, State & zip code)			
3. Requested Beginning Date of Lease	4. Number of Bedrooms	5. Year Constructed	6. Proposed Rent	7. Security Deposit Amt.	8. Date Unit Available for Inspection	

9. Type of House/Apartment

Single Family Detached  
  Semi-Detached / Row House  
  Manufactured Home  
  Garden / Walkup  
  Elevator / High-Rise

10. If this 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) \_\_\_\_\_

11. Utilities and Appliances

The owner shall provide or pay for the utilities and appliances indicated below by an "O". The tenant shall provide or pay for the utilities and appliances indicated below by a "T". Unless otherwise specified below, the owner shall pay for all utilities and appliances provided by the owner.

Item	Specify fuel type	Provided by	Paid by
Heating	<input type="checkbox"/> Natural gas <input type="checkbox"/> Bottle gas <input type="checkbox"/> Oil <input type="checkbox"/> Electric <input type="checkbox"/> Coal or Other		
Cooking	<input type="checkbox"/> Natural gas <input type="checkbox"/> Bottle gas <input type="checkbox"/> Oil <input type="checkbox"/> Electric <input type="checkbox"/> Coal or Other		
Water Heating	<input type="checkbox"/> Natural gas <input type="checkbox"/> Bottle gas <input type="checkbox"/> Oil <input type="checkbox"/> Electric <input type="checkbox"/> Coal or Other		
Other Electric			
Water			
Sewer			
Trash Collection			
Air Conditioning			
Refrigerator			
Range/Microwave			
Other (specify)			

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 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 family as to whether or not the unit will be approved.

Print or Type Name of Owner/Owner Representative		Print or Type Name of Household Head	
Signature		Signature (Household Head)	
Business Address		Present Address of Family (street address, apartment no., city, State, & zip code)	
Telephone Number	Date (mm/dd/yyyy)	Telephone Number	Date (mm/dd/yyyy)

# Disclosure Form for Target Housing Rentals and Leases

## Disclosure of Information on Lead-Based Paint and/or Lead-Based Paint Hazards

### Lead Warning Statement

Housing built before 1978 may contain lead-based paint. Lead from paint, paint chips, and dust can pose health hazards if not managed properly. Lead exposure is especially harmful to young children and pregnant women. Before renting pre-1978 housing, lessors must disclose the presence of known lead-based paint and/or lead-based paint hazards in the dwelling. Lessees must also receive a federally approved pamphlet on lead poisoning prevention.

### Lessor's Disclosure (initial)

\_\_\_\_\_ (a) Presence of lead-based paint or lead-based paint hazards (check one below):

Known lead-based paint and/or lead-based paint hazards are present in the housing (explain).  
\_\_\_\_\_

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

\_\_\_\_\_ (b) Records and reports available to the lessor (check one below):

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

Lessor has no reports or records pertaining to lead-based paint and/or lead-based paint hazards in the housing.

### Lessee's Acknowledgment (initial)

\_\_\_\_\_ (c) Lessee has received copies of all information listed above.

\_\_\_\_\_ (d) Lessee has received the pamphlet *Protect Your Family From Lead in Your Home*.

### Agent's Acknowledgment (initial)

\_\_\_\_\_ (e) Agent has informed the lessor of the lessor's obligations under 42 U.S.C. 4852d and is aware of his/her responsibility to ensure compliance.

### Certification of Accuracy

The following parties have reviewed the information above and certify, to the best of their knowledge, that the information provided by the signatory is true and accurate.

\_\_\_\_\_  
Lessor

\_\_\_\_\_  
Date

\_\_\_\_\_  
Lessor

\_\_\_\_\_  
Date

\_\_\_\_\_  
Lessee

\_\_\_\_\_  
Date

\_\_\_\_\_  
Lessee

\_\_\_\_\_  
Date

\_\_\_\_\_  
Agent

\_\_\_\_\_  
Date

\_\_\_\_\_  
Agent

\_\_\_\_\_  
Date

**TENANCY ADDENDUM**  
**Section 8 Tenant-Based Assistance**  
**Housing Choice Voucher Program (To**  
be attached to Tenant Lease)

**U.S. Department of Housing  
and Urban Development**  
Office of Public and Indian Housing  
OMB Approval No. 2577-0169  
Exp. 04/30/2014

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**1. Section 8 Voucher Program**

- a. The owner is leasing the contract unit to the tenant for occupancy by the tenant's family with assistance for a tenancy under the Section 8 housing choice voucher program (voucher program) of the United States Department of Housing and Urban Development (HUD).
- b. The owner has entered into a Housing Assistance Payments Contract (HAP contract) with the PHA under the voucher program. Under the HAP contract, the PHA will make housing assistance payments to the owner to assist the tenant in leasing the unit from the owner.

**2. Lease**

- a. The owner has given the PHA a copy of the lease, including any revisions agreed by the owner and the tenant. The owner certifies that the terms of the lease are in accordance with all provisions of the HAP contract and that the lease includes the tenancy addendum.
- b. The tenant shall have the right to enforce the tenancy addendum against the owner. If there is any conflict between the tenancy addendum and any other provisions of the lease, the language of the tenancy addendum shall control.

**3. Use of Contract Unit**

- a. During the lease term, the family will reside in the contract unit with assistance under the voucher program.
- b. The composition of the household must be approved by the PHA. The family must promptly inform the PHA of the birth, adoption or court-awarded custody of a child. Other persons may not be added to the household without prior written approval of the owner and the PHA.
- c. The contract unit may only be used for residence by the PHA-approved household members. The unit must be the family's only residence. Members of the household may engage in legal profit making activities incidental to primary use of the unit for residence by members of the family.
- d. The tenant may not sublease or let the unit.
- e. The tenant may not assign the lease or transfer the unit.

**4. Rent to Owner**

- a. The initial rent to owner may not exceed the amount approved by the PHA in accordance with HUD requirements.
- b. Changes in the rent to owner shall be determined by the provisions of the lease. However, the owner may not raise the rent during the initial term of the lease.
- c. During the term of the lease (including the initial term of the lease and any extension term), the rent to owner may at no time exceed:

- (1) The reasonable rent for the unit as most recently determined or redetermined by the PHA in accordance with HUD requirements, or
- (2) Rent charged by the owner for comparable unassisted units in the premises.

**5. Family Payment to Owner**

- a. The family is responsible for paying the owner any portion of the rent to owner that is not covered by the PHA housing assistance payment.
- b. Each month, the PHA will make a housing assistance payment to the owner on behalf of the family in accordance with the HAP contract. The amount of the monthly housing assistance payment will be determined by the PHA in accordance with HUD requirements for a tenancy under the Section 8 voucher program.
- c. The monthly housing assistance payment shall be credited against the monthly rent to owner for the contract unit.
- d. The tenant is not responsible for paying the portion of rent to owner covered by the PHA housing assistance payment under the HAP contract between the owner and the PHA. A PHA failure to pay the housing assistance payment to the owner is not a violation of the lease. The owner may not terminate the tenancy for nonpayment of the PHA housing assistance payment.
- e. The owner may not charge or accept, from the family or from any other source, any payment for rent of the unit in addition to the rent to owner. Rent to owner includes all housing services, maintenance, utilities and appliances to be provided and paid by the owner in accordance with the lease.
- f. The owner must immediately return any excess rent payment to the tenant.

**6. Other Fees and Charges**

- a. Rent to owner does not include cost of any meals or supportive services or furniture which may be provided by the owner.
- b. The owner may not require the tenant or family members to pay charges for any meals or supportive services or furniture which may be provided by the owner. Nonpayment of any such charges is not grounds for termination of tenancy.
- c. The owner may not charge the tenant extra amounts for items customarily included in rent to owner in the locality, or provided at no additional cost to unsubsidized tenants in the premises.

**7. Maintenance, Utilities, and Other Services**

- a. **Maintenance**
  - (1) The owner must maintain the unit and premises in accordance with the HQS.
  - (2) Maintenance and replacement (including

redecoration) must be in accordance with the standard practice for the building concerned as established by the owner.

b **Utilities and appliances**

- (1) The owner must provide all utilities needed to comply with the HQS.
- (2) The owner is not responsible for a breach of the HQS caused by the tenant's failure to:
  - (a) Pay for any utilities that are to be paid by the tenant.
  - (b) Provide and maintain any appliances that are to be provided by the tenant.

c **Family damage.** The owner is not responsible for a breach of the HQS because of damages beyond normal wear and tear caused by any member of the household or by a guest.

d **Housing services.** The owner must provide all housing services as agreed to in the lease.

## 8. Termination of Tenancy by Owner

a **Requirements.** The owner may only terminate the tenancy in accordance with the lease and HUD requirements.

b **Grounds.** During the term of the lease (the initial term of the lease or any extension term), the owner may only terminate the tenancy because of:

- (1) Serious or repeated violation of the lease;
- (2) Violation of Federal, State, or local law that imposes obligations on the tenant in connection with the occupancy or use of the unit and the premises;
- (3) Criminal activity or alcohol abuse (as provided in paragraph c); or
- (4) Other good cause (as provided in paragraph d).

c **Criminal activity or alcohol abuse.**

- (1) The owner may terminate the tenancy during the term of the lease if any member of the household, a guest or another person under a resident's control commits any of the following types of criminal activity:
  - (a) Any criminal activity that threatens the health or safety of, or the right to peaceful enjoyment of the premises by, other residents (including property management staff residing on the premises);
  - (b) Any criminal activity that threatens the health or safety of, or the right to peaceful enjoyment of their residences by, persons residing in the immediate vicinity of the premises;
  - (c) Any violent criminal activity on or near the premises; or
  - (d) Any drug-related criminal activity on or near the premises.
- (2) The owner may terminate the tenancy during the term of the lease if any member of the household is:
  - (a) Fleeing to avoid prosecution, or custody or confinement after conviction, for a crime, or attempt to commit a crime, that

is a felony under the laws of the place from which the individual flees, or that, in the case of the State of New Jersey, is a high misdemeanor; or

(b) Violating a condition of probation or parole under Federal or State law.

(3) The owner may terminate the tenancy for criminal activity by a household member in accordance with this section if the owner determines that the household member has committed the criminal activity, regardless of whether the household member has been arrested or convicted for such activity.

(4) The owner may terminate the tenancy during the term of the lease if any member of the household has engaged in abuse of alcohol that threatens the health, safety or right to peaceful enjoyment of the premises by other residents.

d **Other good cause for termination of tenancy**

- (1) During the initial lease term, other good cause for termination of tenancy must be something the family did or failed to do.
- (2) During the initial lease term or during any extension term, other good cause may include:
  - (a) Disturbance of neighbors,
  - (b) Destruction of property, or
  - (c) Living or housekeeping habits that cause damage to the unit or premises.
- (3) After the initial lease term, such good cause may include:
  - (a) The tenant's failure to accept the owner's offer of a new lease or revision;
  - (b) The owner's desire to use the unit for personal or family use or for a purpose other than use as a residential rental unit; or
  - (c) A business or economic reason for termination of the tenancy (such as sale of the property, renovation of the unit, the owner's desire to rent the unit for a higher rent).
- (4) The examples of other good cause in this paragraph do not preempt any State or local laws to the contrary.
- (5) In the case of an owner who is an immediate successor in interest pursuant to foreclosure during the term of the lease, requiring the tenant to vacate the property prior to sale shall not constitute other good cause, except that the owner may terminate the tenancy effective on the date of transfer of the unit to the owner if the owner: (a) will occupy the unit as a primary residence; and (b) has provided the tenant a notice to vacate at least 90 days before the effective date of such notice. This provision shall not affect any State or local law that provides for longer time periods or addition protections for tenants. **This provision will sunset on December 31, 2012 unless extended by law.**

#### **e. Protections for Victims of Abuse.**

- (1) An incident or incidents of actual or threatened domestic violence, dating violence, or stalking will not be construed as serious or repeated violations of the lease or other “good cause” for termination of the assistance, tenancy, or occupancy rights of such a victim.
- (2) Criminal activity directly relating to abuse, engaged in by a member of a tenant’s household or any guest or other person under the tenant’s control, shall not be cause for termination of assistance, tenancy, or occupancy rights if the tenant or an immediate member of the tenant’s family is the victim or threatened victim of domestic violence, dating violence, or stalking.
- (3) Notwithstanding any restrictions on admission, occupancy, or terminations of occupancy or assistance, or any Federal, State or local law to the contrary, a PHA, owner or manager may “bifurcate” a lease, or otherwise remove a household member from a lease, without regard to whether a household member is a signatory to the lease, in order to evict, remove, terminate occupancy rights, or terminate assistance to any individual who is a tenant or lawful occupant and who engages in criminal acts of physical violence against family members or others. This action may be taken without evicting, removing, terminating assistance to, or otherwise penalizing the victim of the violence who is also a tenant or lawful occupant. Such eviction, removal, termination of occupancy rights, or termination of assistance shall be effected in accordance with the procedures prescribed by Federal, State, and local law for the termination of leases or assistance under the housing choice voucher program.
- (4) Nothing in this section may be construed to limit the authority of a public housing agency, owner, or manager, when notified, to honor court orders addressing rights of access or control of the property, including civil protection orders issued to protect the victim and issued to address the distribution or possession of property among the household members in cases where a family breaks up.
- (5) Nothing in this section limits any otherwise available authority of an owner or manager to evict or the public housing agency to terminate assistance to a tenant for any violation of a lease not premised on the act or acts of violence in question against the tenant or a member of the tenant’s household, provided that the owner, manager, or public housing agency does not subject an individual who is or has been a victim of domestic violence, dating violence, or stalking to a more demanding standard than other tenants in determining whether to evict or terminate.
- (6) Nothing in this section may be construed to limit the authority of an owner or manager to evict, or the public housing agency to terminate assistance, to any tenant if the owner, manager, or public

housing agency can demonstrate an actual and imminent threat to other tenants or those employed at or providing service to the property if the tenant is not evicted or terminated from assistance.

- (7) Nothing in this section shall be construed to supersede any provision of any Federal, State, or local law that provides greater protection than this section for victims of domestic violence, dating violence, or stalking.

**f. Eviction by court action.** The owner may only evict the tenant by a court action.

#### **g. Owner notice of grounds**

- (1) At or before the beginning of a court action to evict the tenant, the owner must give the tenant a notice that specifies the grounds for termination of tenancy. The notice may be included in or combined with any owner eviction notice.
- (2) The owner must give the PHA a copy of any owner eviction notice at the same time the owner notifies the tenant.
- (3) Eviction notice means a notice to vacate, or a complaint or other initial pleading used to begin an eviction action under State or local law.

#### **9. Lease: Relation to HAP Contract**

If the HAP contract terminates for any reason, the lease terminates automatically.

#### **10. PHA Termination of Assistance**

The PHA may terminate program assistance for the family for any grounds authorized in accordance with HUD requirements. If the PHA terminates program assistance for the family, the lease terminates automatically.

#### **11. Family Move Out**

The tenant must notify the PHA and the owner before the family moves out of the unit.

#### **12. Security Deposit**

- a. The owner may collect a security deposit from the tenant. (However, the PHA may prohibit the owner from collecting a security deposit in excess of private market practice, or in excess of amounts charged by the owner to unassisted tenants. Any such PHA-required restriction must be specified in the HAP contract.)
- b. When the family moves out of the contract unit, the owner, subject to State and local law, may use the security deposit, including any interest on the deposit, as reimbursement for any unpaid rent payable by the tenant, any damages to the unit or any other amounts that the tenant owes under the lease.
- c. The owner must give the tenant a list of all items charged against the security deposit, and the amount of each item. After deducting the amount, if any, used to reimburse the owner, the owner must promptly refund the full amount of the unused balance to the tenant.

- d. If the security deposit is not sufficient to cover amounts the tenant owes under the lease, the owner may collect the balance from the tenant.

### 13. Prohibition of Discrimination

In accordance with applicable equal opportunity statutes, Executive Orders, and regulations, the owner must not discriminate against any person because of race, color, religion, sex, national origin, age, familial status or disability in connection with the lease.

### 14. Conflict with Other Provisions of Lease

- a. The terms of the tenancy addendum are prescribed by HUD in accordance with Federal law and regulation, as a condition for Federal assistance to the tenant and tenant's family under the Section 8 voucher program.
- b. In case of any conflict between the provisions of the tenancy addendum as required by HUD, and any other provisions of the lease or any other agreement between the owner and the tenant, the requirements of the HUD-required tenancy addendum shall control.

### 15. Changes in Lease or Rent

- a. The tenant and the owner may not make any change in the tenancy addendum. However, if the tenant and the owner agree to any other changes in the lease, such changes must be in writing, and the owner must immediately give the PHA a copy of such changes. The lease, including any changes, must be in accordance with the requirements of the tenancy addendum.
- b. In the following cases, tenant-based assistance shall not be continued unless the PHA has approved a new tenancy in accordance with program requirements and has executed a new HAP contract with the owner:
  - (1) If there are any changes in lease requirements governing tenant or owner responsibilities for utilities or appliances;
  - (2) If there are any changes in lease provisions governing the term of the lease;
  - (3) If the family moves to a new unit, even if the unit is in the same building or complex.
- c. PHA approval of the tenancy, and execution of a new HAP contract, are not required for agreed changes in the lease other than as specified in paragraph b.
- d. The owner must notify the PHA of any changes in the amount of the rent to owner at least sixty days before any such changes go into effect, and the amount of the rent to owner following any such agreed change may not exceed the reasonable rent for the unit as most recently determined or redetermined by the PHA in accordance with HUD requirements.

### 16. Notices

Any notice under the lease by the tenant to the owner or by the owner to the tenant must be in writing.

### 17. Definitions

**Contract unit.** The housing unit rented by the tenant with assistance under the program.

**Family.** The persons who may reside in the unit with assistance under the program.

**HAP contract.** The housing assistance payments contract between the PHA and the owner. The PHA pays housing assistance payments to the owner in accordance with the HAP contract.

**Household.** The persons who may reside in the contract unit. The household consists of the family and any PHA-approved live-in aide. (A live-in aide is a person who resides in the unit to provide necessary supportive services for a member of the family who is a person with disabilities.)

**Housing quality standards (HQS).** The HUD minimum quality standards for housing assisted under the Section 8 tenant-based programs.

**HUD.** The U.S. Department of Housing and Urban Development.  
**HUD requirements.** HUD requirements for the Section 8 program. HUD requirements are issued by HUD headquarters, as regulations, Federal Register notices or other binding program directives.

**Lease.** The written agreement between the owner and the tenant for the lease of the contract unit to the tenant. The lease includes the tenancy addendum prescribed by HUD.

**PHA.** Public Housing Agency.

**Premises.** The building or complex in which the contract unit is located, including common areas and grounds.

**Program.** The Section 8 housing choice voucher program.

**Rent to owner.** The total monthly rent payable to the owner for the contract unit. The rent to owner is the sum of the portion of rent payable by the tenant plus the PHA housing assistance payment to the owner.

**Section 8.** Section 8 of the United States Housing Act of 1937 (42 United States Code 1437f).

**Tenant.** The family member (or members) who leases the unit from the owner.

**Voucher program.** The Section 8 housing choice voucher program. Under this program, HUD provides funds to a PHA for rent subsidy on behalf of eligible families. The tenancy under the lease will be assisted with rent subsidy for a tenancy under the voucher program.

## Basic Housing Quality Standards (HQS) Checklist\*

**This checklist is provided to assist property owners/agents in ensuring that common violations are cleared, prior to the Arlington Housing Authority's HQS Inspection. Please review this list with the prospective unit.**

- Unit must be vacant prior to inspection appointment
- All utilities must be on and all appliances in unit at time of inspection. Appliances must be clean and in good working order
- Unit requires a working smoke detector on each level of the unit AND in each bedroom in accordance with Texas Property Code for Rental Properties 92.255
- Water heater must be properly vented and have a pressure relief valve with discharge line directed to the floor or outside
- Bathrooms must have a window that opens with secure locking device or has a working exhaust vent system
- Bedrooms must have an openable window and with operable locks
- Windows must be in good working condition, weather-tight, free of broken panes and have operable latches
- Doors must be free of holes, weather-tight (if exterior), and have operable locks
- All plumbing must be in good working condition
- All walls and ceilings must be clean and be free of holes
- No peeling interior or exterior paint
- All electrical wiring must be properly installed and covered (no exposed wiring or missing covers). City of Arlington or Licensed Electrician must complete electrical repairs.
- Heat and A/C must be in good working condition, vented properly, and filters should be clean
- Floors must be clean (no loose tiles or torn carpet)
- Inside and outside of unit must be free of garbage and debris
- Unit must be free of any hazards not specifically identified previously

\*This is not the required HUD: HQS Inspection. This checklist only sites common violations

**16. Criminal Background Checks (CBC),  
Electronic Income Verification (EIV),  
Debts Owed to Public Housing Agencies,  
and Terminations**



# Arlington Housing Authority

501 W. Sanford Street, Suite 20  
Arlington, TX 76011  
Phone: 817-275-3351  
Fax: 682-367-1000

## Participant Notice of Criminal Background Screening, Electronic Income Verification Matching, Debts Owed to Public Housing Agencies, and Terminations

### Criminal Background

The Arlington Housing Authority (AHA) conducts a review of the criminal background records for all program participants and their adult family members prior to admission to the program and at least annually. A review of criminal background records will also be conducted on adult persons proposed for addition to the participant's household, or when AHA receives a reliable complaint or information indicating that the participant or members of the household are involved in drug-related criminal activity, violent criminal activity, or if any household member is, or becomes, a registered sex offender. The AHA may deny or terminate housing assistance for persons with criminal records.

### Electronic Income Verification (EIV) Matching

The AHA participates in a computer matching process that compares the income information reported to the AHA by housing participants and members of their household with actual income, reported through computer matching performed by the United States Department of Housing and Urban Development (HUD). The purpose of this system, known as EIV, is to verify participant's reported income. By my signature below, I acknowledge that the AHA has provided me with the Rental Housing Integrity Information Project (RHIP) document titled *What You Should Know About EIV*.

### Debts Owed to Public Housing Agencies and Terminations

By my signature below, I acknowledge that the AHA has provided me with the document titled *Debts Owed to PHAs & Termination Notice*.

\_\_\_\_\_  
Participant Name Printed

\_\_\_\_\_  
Participant Signature

\_\_\_\_\_  
Date

*Participant signature acknowledges that the information contained herein was reviewed by and explained to the participant.*



U.S. Department of Housing and Urban Development

Office of Public and Indian Housing (PIH)



## ***What You Should Know About EIV***

### **A Guide for Applicants & Tenants of Public Housing & Section 8 Programs**

#### **What is EIV?**

The Enterprise Income Verification (EIV) system is a web-based computer system that contains employment and income information of individuals who participate in HUD rental assistance programs. All Public Housing Agencies (PHAs) are required to use HUD's EIV system.

#### **What information is in EIV and where does it come from?**

HUD obtains information about you from your local PHA, the Social Security Administration (SSA), and U.S. Department of Health and Human Services (HHS).

HHS provides HUD with wage and employment information as reported by employers; and unemployment compensation information as reported by the State Workforce Agency (SWA).

SSA provides HUD with death, Social Security (SS) and Supplemental Security Income (SSI) information.

#### **What is the EIV information used for?**

Primarily, the information is used by PHAs (and management agents hired by PHAs) for the following purposes to:

1. Confirm your name, date of birth (DOB), and Social Security Number (SSN) with SSA.
2. Verify your reported income sources and amounts.
3. Confirm your participation in only one HUD rental assistance program.
4. Confirm if you owe an outstanding debt to any PHA.
5. Confirm any negative status if you moved out of a subsidized unit (in the past) under the Public Housing or Section 8 program.
6. Follow up with you, other adult household members, or your listed emergency contact regarding deceased household members.

EIV will alert your PHA if you or anyone in your household has used a false SSN, failed to report complete and accurate income information, or is receiving rental assistance at another address. **Remember, you may receive rental assistance at only one home!**

EIV will also alert PHAs if you owe an outstanding debt to any PHA (in any state or U.S. territory) and any negative status when you voluntarily or involuntarily moved out of a subsidized unit under the Public Housing or Section 8 program. This information is used to determine your eligibility for rental assistance at the time of application.

The information in EIV is also used by HUD, HUD's Office of Inspector General (OIG), and auditors to ensure that your family and PHAs comply with HUD rules.

Overall, the purpose of EIV is to identify and prevent fraud within HUD rental assistance programs, so that limited taxpayer's dollars can assist as many eligible families as possible. EIV will help to improve the integrity of HUD rental assistance programs.

#### **Is my consent required in order for information to be obtained about me?**

Yes, your consent is required in order for HUD or the PHA to obtain information about you. By law, you are required to sign one or more consent forms. When you sign a form HUD-9886 (*Federal Privacy Act Notice and Authorization for Release of Information*) or a PHA consent form (which meets HUD standards), you are giving HUD and the PHA your consent for them to obtain information about you for the purpose of determining your eligibility and amount of rental assistance. The information collected about you will be used only to determine your eligibility for the program, unless you consent in writing to authorize additional uses of the information by the PHA.

***Note:*** *If you or any of your adult household members refuse to sign a consent form, your request for initial or continued rental assistance may be denied. You may also be terminated from the HUD rental assistance program.*

#### **What are my responsibilities?**

As a tenant (participant) of a HUD rental assistance program, you and each adult household member must disclose complete and accurate information to the PHA, including full name, SSN, and DOB; income information; and certify that your reported household composition (household members), income, and expense information is true to the best of your knowledge.

**February 2010**

Remember, you must notify your PHA if a household member dies or moves out. You must also obtain the PHA's approval to allow additional family members or friends to move in your home prior to them moving in.

### **What are the penalties for providing false information?**

Knowingly providing false, inaccurate, or incomplete information is **FRAUD** and a **CRIME**.

If you commit fraud, you and your family may be subject to any of the following penalties:

1. Eviction
2. Termination of assistance
3. Repayment of rent that you should have paid had you reported your income correctly
4. Prohibited from receiving future rental assistance for a period of up to 10 years
5. Prosecution by the local, state, or Federal prosecutor, which may result in you being fined up to \$10,000 and/or serving time in jail.

**Protect yourself by following HUD reporting requirements.** When completing applications and reexaminations, you must include all sources of income you or any member of your household receives.

If you have any questions on whether money received should be counted as income or how your rent is determined, ask your PHA. When changes occur in your household income, contact your PHA immediately to determine if this will affect your rental assistance.

### **What do I do if the EIV information is incorrect?**

Sometimes the source of EIV information may make an error when submitting or reporting information about you. If you do not agree with the EIV information, let your PHA know.

If necessary, your PHA will contact the source of the information directly to verify disputed income information. Below are the procedures you and the PHA should follow regarding incorrect EIV information.

**Debts owed to PHAs and termination information** reported in EIV originates from the PHA who provided you assistance in the past. If you dispute this information, contact your former PHA directly in writing to dispute this information and provide any documentation that supports your dispute. If the PHA determines that the disputed information is incorrect, the PHA will update or delete the record from EIV.

**Employment and wage information** reported in EIV originates from the employer. If you dispute this information, contact the employer in writing to dispute and request correction of the disputed employment and/or wage information. Provide your PHA with a copy of the letter that you sent to the employer. If you are unable to get the employer to correct the information, you should contact the SWA for assistance.

**Unemployment benefit information** reported in EIV originates from the SWA. If you dispute this information, contact the SWA in writing to dispute and request correction of the disputed unemployment benefit information. Provide your PHA with a copy of the letter that you sent to the SWA.

**Death, SS and SSI benefit information** reported in EIV originates from the SSA. If you dispute this information, contact the SSA at (800) 772-1213, or visit their website at: [www.socialsecurity.gov](http://www.socialsecurity.gov). You may need to visit your local SSA office to have disputed death information corrected.

**Additional Verification.** The PHA, with your consent, may submit a third party verification form to the provider (or reporter) of your income for completion and submission to the PHA.

You may also provide the PHA with third party documents (i.e. pay stubs, benefit award letters, bank statements, etc.) which you may have in your possession.

**Identity Theft.** Unknown EIV information to you can be a sign of identity theft. Sometimes someone else may use your SSN, either on purpose or by accident. So, if you suspect someone is using your SSN, you should check your Social Security records to ensure your income is calculated correctly (call SSA at (800) 772-1213); file an identity theft complaint with your local police department or the Federal Trade Commission (call FTC at (877) 438-4338, or you may visit their website at: <http://www.ftc.gov>). Provide your PHA with a copy of your identity theft complaint.

### **Where can I obtain more information on EIV and the income verification process?**

Your PHA can provide you with additional information on EIV and the income verification process. You may also read more about EIV and the income verification process on HUD's Public and Indian Housing EIV web pages at: <http://www.hud.gov/offices/pih/programs/pih/hiip/iv.cfm>.

**The information in this Guide pertains to applicants and participants (tenants) of the following HUD-PIH rental assistance programs:**

1. Public Housing (24 CFR 960); and
2. Section 8 Housing Choice Voucher (HCV), (24 CFR 982); and
3. Section 8 Moderate Rehabilitation (24 CFR 882); and
4. Project-Based Voucher (24 CFR 983)

**My signature below is confirmation that I have received this Guide.**

Signature

Date



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

### DEBTS OWED TO PUBLIC HOUSING AGENCIES AND TERMINATIONS

**Paperwork Reduction Notice:** The information collection requirements contained in this notice have been approved by the Office of Management and Budget (OMB) under the Paperwork Reduction Act of 1995 (44 U.S.C. 3520) and assigned OMB control number 2577-0266. In accordance with the Paperwork Reduction Act, HUD may not conduct or sponsor, and a person is not required to respond to a collection of information unless the collection displays a current valid OMB control number.

#### **NOTICE TO APPLICANTS AND PARTICIPANTS OF THE FOLLOWING HUD RENTAL ASSISTANCE PROGRAMS:**

- Public Housing (24 CFR 960)
- Section 8 Housing Choice Voucher, including the Disaster Housing Assistance Program (24 CFR 982)
- Section 8 Moderate Rehabilitation (24 CFR 882)
- Project-Based Voucher (24 CFR 983)

The U.S. Department of Housing and Urban Development maintains a national repository of debts owed to Public Housing Agencies (PHAs) or Section 8 landlords and adverse information of former participants who have voluntarily or involuntarily terminated participation in one of the above-listed HUD rental assistance programs. This information is maintained within HUD's Enterprise Income Verification (EIV) system, which is used by Public Housing Agencies (PHAs) and their management agents to verify employment and income information of program participants, as well as, to reduce administrative and rental assistance payment errors. The EIV system is designed to assist PHAs and HUD in ensuring that families are eligible to participate in HUD rental assistance programs and determining the correct amount of rental assistance a family is eligible for. All PHAs are required to use this system in accordance with HUD regulations at 24 CFR 5.233.

HUD requires PHAs, which administers the above-listed rental housing programs, to report certain information at the conclusion of your participation in a HUD rental assistance program. This notice provides you with information on what information the PHA is required to provide HUD, who will have access to this information, how this information is used and your rights. PHAs are required to provide this notice to all applicants and program participants and you are required to acknowledge receipt of this notice by signing page 2. Each adult household member must sign this form.

#### **What information about you and your tenancy does HUD collect from the PHA?**

The following information is collected about each member of your household (family composition): full name, date of birth, and Social Security Number.

The following adverse information is collected once your participation in the housing program has ended, whether you voluntarily or involuntarily move out of an assisted unit:

1. Amount of any balance you owe the PHA or Section 8 landlord (up to \$500,000) and explanation for balance owed (i.e. unpaid rent, retroactive rent (due to unreported income and/ or change in family composition) or other charges such as damages, utility charges, etc.); and
2. Whether or not you have entered into a repayment agreement for the amount that you owe the PHA; and
3. Whether or not you have defaulted on a repayment agreement; and
4. Whether or not the PHA has obtained a judgment against you; and
5. Whether or not you have filed for bankruptcy; and
6. The negative reason(s) for your end of participation or any negative status (i.e. abandoned unit, fraud, lease violations, criminal activity, etc.) as of the end of participation date.

**Who will have access to the information collected?**

This information will be available to HUD employees, PHA employees, and contractors of HUD and PHAs.

**How will this information be used?**

PHAs will have access to this information during the time of application for rental assistance and reexamination of family income and composition for existing participants. PHAs will be able to access this information to determine a family's suitability for initial or continued rental assistance, and avoid providing limited Federal housing assistance to families who have previously been unable to comply with HUD program requirements. If the reported information is accurate, your current rental assistance may be terminated and your future request for HUD rental assistance may be denied for a period of up to ten years from the date you moved out of an assisted unit or were terminated from a HUD rental assistance program.

**How long is the debt owed and termination information maintained in EIV?**

Debt owed and termination information will be maintained in EIV for a period of up to ten (10) years from the end of participation date.

**What are my rights?**

In accordance with the Federal Privacy Act of 1974, as amended (5 USC 552a) and HUD regulations pertaining to its implementation of the Federal Privacy Act of 1974 (24 CFR Part 16), you have the following rights:

1. To have access to your records maintained by HUD.
2. To have an administrative review of HUD's initial denial of your request to have access to your records maintained by HUD.
3. To have incorrect information in your record corrected upon written request.
4. To file an appeal request of an initial adverse determination on correction or amendment of record request within 30 calendar days after the issuance of the written denial.
5. To have your record disclosed to a third party upon receipt of your written and signed request.

**What do I do if I dispute the debt or termination information reported about me?**

You should contact the PHA, who has reported this information about you, in writing, if you disagree with the reported information. The PHA's name, address, and telephone numbers are listed on the Debts Owed and Termination Report. You have a right to request and obtain a copy of this report from the PHA. Inform the PHA why you dispute the information and provide any documentation that supports your dispute. Disputes must be made within three years from the end of participation date. Otherwise the debt and termination information is presumed correct. Only the PHA who reported the adverse information about you can delete or correct your record.

Your filing of bankruptcy will not result in the removal of debt owed or termination information from HUD's EIV system. However, if you have included this debt in your bankruptcy filing and/or this debt has been discharged by the bankruptcy court, your record will be updated to include the bankruptcy indicator, when you provide the PHA with documentation of your bankruptcy status.

The PHA will notify you in writing of its action regarding your dispute within 30 days of receiving your written dispute. If the PHA determines that the disputed information is incorrect, the PHA will update or delete the record. If the PHA determines that the disputed information is correct, the PHA will provide an explanation as to why the information is correct.

**This Notice was provided by the below-listed PHA:**

**I hereby acknowledge that the PHA provided me with the Debts Owed to PHAs & Termination Notice:**

**Signature**

**Date**

**Printed Name**

# **17. Denial or Termination of Assistance**

## **DENIAL OR TERMINATION OF ASSISTANCE**

The AHA may deny or terminate assistance for a family because of the family's action or failure to act. The AHA will provide families with a written description of the family obligations under the program, the grounds under which the AHA can deny or terminate assistance, and the AHA's informal hearing procedures. This chapter describes when the AHA is required to deny or terminate assistance, and the AHA's policies for the denial of a new commitment of assistance and the grounds for termination of assistance under an outstanding HAP contract.

### **GROUNDINGS FOR DENIAL/TERMINATION**

If denial or termination is based upon behavior resulting from a disability, the AHA will delay the denial or termination in order to determine if there is an accommodation that would negate the behavior resulting from the disability.

#### **Form of Denial/Termination**

Denial of assistance for an applicant may include any or all of the following:

- Denial for placement on the AHA waiting list.
- Denying or withdrawing a voucher.
- Refusing to enter into a HAP contract or approve a tenancy.
- Refusing to process or provide assistance under portability procedures.

#### **Termination of assistance for a participant may include any or all of the following:**

- Refusing to enter into a HAP contract or approve a tenancy.
- Terminating housing assistance payments under an outstanding HAP contract.
- Refusing to process or provide assistance under portability procedures.

#### **Mandatory Denial and Termination**

- The AHA must deny assistance to applicants, and terminate assistance for participants if the family is under contract and 180 days have elapsed since the AHA's last housing assistance payment was made.
- The AHA must permanently deny assistance to applicants and terminate the participation of persons convicted of manufacturing or producing methamphetamine.
- The AHA must deny admission to the program for applicants, and terminate assistance for program participants if the AHA determines that any household member is currently engaging in the use, distribution, sale, or manufacture of any illegal substance. See section B of this chapter for the AHA's established standards.
- The AHA may deny admission to the program for applicants, and terminate assistance for program participants if the AHA determines that it has reasonable cause to believe that a household member's illegal drug use or a pattern of illegal drug use or alcohol abuse may threaten the health, safety, or right to peaceful enjoyment of the premises by other residents. See Section B of this chapter for the AHA's established standards.
- The AHA must deny admission to an applicant if the AHA determines that any member of the household is subject to a lifetime registration requirement under a State sex offender registration program. See section B of this chapter for the AHA's established standards regarding criminal background investigation and determining whether a member of the household is subject to a lifetime registration requirement under a State sex offender registration program.

- The AHA must terminate program assistance for a family evicted from housing assisted under the program for serious violation of the lease.
- The AHA must deny admission to the program for an applicant or terminate program assistance for a participant if any member of the family fails to sign and submit consent forms for obtaining information. The AHA must deny admission or terminate assistance when required under the regulations to establish citizenship or eligible immigration status.

### **Grounds for Denial or Termination of Assistance**

The AHA will deny program assistance for an applicant, or terminate program assistance for a participant, for any of the following reasons:

- If any family member violates any family obligation under the program as listed in 24 CFR 982.551.
- If any family member has violated the family obligation under 24 CFR 982.551 not to engage in any drug-related criminal activity.
- If any family member has violated the family obligation under 24 CFR 982.551 not to engage in any violent criminal activity.
- Any member of the family has been evicted from federally assisted housing in the last five years.
- If any AHA has ever terminated assistance under the program for any member of the family.
- If any member of the family commits fraud, bribery or any other corrupt or criminal act in connection with any federal housing program.
- The family currently owes rent or other amounts to the AHA or to another AHA in connection with Section 8 or public housing assistance under the 1937 Act.
- The family has not reimbursed any AHA for amounts paid to an owner under a HAP contract for rent, damages to the unit, or other amounts owed by the family under the lease.
- The family breaches an agreement with an AHA to pay amounts owed to an AHA, or amounts paid to an owner by an AHA. The AHA at its discretion may offer the family the opportunity to enter into a repayment agreement. The AHA will prescribe the terms of the agreement. (See "Repayment Agreements" chapter.)
- The family has engaged in or threatened abusive or violent behavior toward AHA personnel. Abusive or violent behavior towards AHA personnel includes verbal as well as physical abuse or violence. Use of expletives that are generally considered insulting, racial epithets, or other language, written or oral, that is customarily used to insult or intimidate, may be cause for termination or denial. "Threatening" refers to oral or written threats or physical gestures that communicate intent to abuse or commit violence. Actual physical abuse or violence will always be cause for termination.
- If any member of the family engages in, or has engaged in drug or alcohol abuse that interferes with the health, safety or peaceful enjoyment of other residents. If any member of the family commits drug-related criminal activity, or violent criminal activity.

# 18. Informal Reviews and Hearings

# Informal Reviews and Hearings

## **INFORMAL REVIEW PROCEDURES FOR APPLICANTS**

Reviews are provided for applicants who are denied assistance before the effective date of the HAP contract. The exception is that when an applicant is denied assistance for citizenship or eligible immigrant status, the applicant is entitled to an informal hearing.

### **Procedure for Requesting an Informal Review**

A request for an informal review must be received in writing by the close of the business day, no later than 7 days from the date of the AHA's notification of denial of assistance. The informal review will be conducted within 14 days from the date the request is received.

## **INFORMAL HEARING PROCEDURES FOR APPLICANTS**

When the AHA makes a decision regarding the eligibility and/or the amount of assistance, applicants and participants must be notified in writing. The AHA will give the family prompt notice of such determinations which will include:

1. The proposed action or decision of the AHA.
2. The date the proposed action or decision will take place.
3. An explanation of the basis for the AHA's decision.
4. The procedures for requesting a hearing, if the family disputes the action or decision.
5. The time limit for requesting the hearing.
6. To whom the hearing request should be addressed.

The AHA must always provide the opportunity for an informal hearing before termination of assistance.

### **Procedure for Requesting an Informal Hearing**

A request for an informal hearing must be received in writing by the close of the business day, no later than 14 days from the date of the AHA's notification of termination of assistance. The informal hearing will be scheduled within 14 days from the date the written request is received.

**Informal hearings are not required for established policies and procedures and AHA determinations such as:**

1. Discretionary administrative determinations by the AHA
2. General policy issues or class grievances
3. Establishment of the AHA schedule of utility allowances for families in the program
4. AHA determination not to approve an extension or suspension of a voucher term
5. AHA determination not to approve a unit or lease
6. AHA determination that an assisted unit is not in compliance with HQS (AHA must provide hearing for family breach of HQS because that is a family obligation determination)
7. AHA determination that the unit is not in accordance with HQS because of the family size
8. AHA determination to exercise or not exercise any right or remedy against the owner under a HAP contract.

# **19. Reasonable Accommodations for Program Participants with Disabilities**

# Notice to all Housing Choice Voucher Program Applicants / Participants

## Reasonable Accommodations for Housing Choice Voucher Program Applicants or Participants with Disabilities

The Arlington Housing Authority (AHA) is a public housing agency that provides rental housing assistance to eligible persons including the elderly, persons with disabilities, and families including families with children. The AHA is not permitted to discriminate against applicants on the basis of their race, religion, sex, color, national origin, age, disability or familiar status. In addition, the AHA is required to consider requests for a 'reasonable accommodation' by an applicant or participant if they, or any of their household members, has a disability. A reasonable accommodation is a change or modification of program rules, policy, procedure, or service that will assist an applicant or program participant to make effective use of the housing assistance program.

### Some examples of a reasonable accommodation include:

- Providing a larger number of bedrooms assigned to the Housing Voucher for required placement or storage of medical equipment and medical supplies
- Providing large font documents, Braille documents or other assistance to vision impaired applicants / participants
- Providing a sign interpreter for hearing impaired applicants / participants

If you, or a member of your household, have a disability and you require a reasonable accommodation you may submit a request at any time. The AHA prefers to receive requests in writing on its Reasonable Accommodation Request form. Persons may obtain a request form from the AHA or by contacting their caseworker. Additional documentation or verification may be required by the AHA to evaluate requests received.

I hereby acknowledge that I have received and understand information regarding the AHA's reasonable accommodation policy and how to apply for a reasonable accommodation, if needed.

---

Head of Household Name Printed

---

Head of Household Signature

---

Date

## **20. Your Rights under the Violence Against Women Act (VAWA)**



**ARLINGTON HOUSING AUTHORITY  
NOTICE TO SECTION 8 PARTICIPANTS OF RIGHTS UNDER  
THE VIOLENCE AGAINST WOMEN ACT (VAWA)**

The Violence Against Women Act (VAWA) provides protection for certain victims of domestic violence, dating violence, or stalking, as well as members of the victims' immediate families. The protections apply to Section 8 participants, and housing authorities must notify participants of their rights under VAWA.

*Please note: these protections apply to men and children as well as women.*

**VAWA Protections Against Eviction or Termination of Assistance**

Under VAWA, victims of domestic violence, dating violence, or stalking are protected as follows:

- You cannot be denied housing or housing assistance only because you are a victim: If you are otherwise eligible for the housing or housing assistance, the housing authority or landlord cannot deny you only because you are or have been a victim of domestic violence, dating violence, or stalking
- You cannot be evicted or terminated for "good cause" or "lease violations" if you are the victim: You cannot be evicted based on an incident of actual or threatened domestic violence, dating violence, or stalking if you are the victim of the incident. Please see "actual and imminent threat", below, for an exception to this rule.
- You cannot be evicted or terminated for criminal activity if the criminal activity was directly related to the domestic violence, dating violence, or stalking: If the criminal activity was committed by a member of your household or any guest or other person under your control, and you (or an immediate family member) are the victim and the criminal activity was directly related to domestic violence, dating violence, or stalking, you cannot be evicted or terminated.
- Your lease or voucher can be changed to evict only the perpetrator(s): This action is known as "bifurcation" and allows the victimized tenants to remain in the unit while removing only the tenant who committed the act of domestic violence, dating violence, or stalking
- You can move to protect family members: AHA cannot terminate assistance if you move to protect the health/safety of a family member who is the victim of domestic violence, dating violence, or stalking and reasonably believed he/she was imminently threatened by further violence if he/she stayed in the unit.
- 

**Limits of VAWA Protection**

The protections of VAWA do not protect you from denial or termination of assistance or from being evicted in all circumstances. Under VAWA, you may be terminated for the following reasons:

- Good Cause Unrelated to Domestic Violence, Dating Violence, or Stalking: Tenants and/or applicants may be denied, terminated or evicted for other good cause unrelated to the incident or incidents of domestic violence, provided that the victim is not subject to a more demanding standard than non-victims
- Actual and Imminent Threat: The tenant may be terminated or evicted if the tenant is an actual and imminent threat to other tenants or those employed at or providing service to the property if the tenant is not evicted.

### **Documentation of Victim Status**

If you claim protection under VAWA, AHA or the landlord may require you to provide documentation that you are a victim and that the incident or incidents are bona fide incidents of such actual or threatened abuse. If documentation is requested, the request must be made in writing. The housing authority or landlord must give you at least fourteen (14) calendar days to provide any combination of the following forms of documentation:

- Self-certification of the victim: Upon request, the housing authority or landlord will provide a form for you to complete; **or**
- Documentation from a professional: The documentation can be from an employee, agent, or volunteer of a victim service provider, and attorney, or a medical professional you consulted about the domestic violence, dating violence, or stalking; **or**
- Other records: You can also submit federal, state, tribal, territorial, or local police or court records (protective orders)

**IMPORTANT:** You must provide the documentation on or before the deadline specified on the request. If you fail to provide the documentation by the deadline, you may be denied, terminated or evicted.

### **Confidentiality of VAWA-Related Information**

All information provided to a housing authority or landlord relative to a claim for VAWA protection must be kept confidential. The housing authority or landlord must not share your information with unauthorized individuals, unless you give written consent to do so or the information is required for use in an eviction proceeding or otherwise required by law.

#### **For additional information**

Please visit the U.S. Department of Justice website, <http://www.ovw.usdoj.gov/regulations.htm>.

# 21. Property Owner Certification

# PROPERTY OWNER CERTIFICATION



The Housing Choice Voucher program is a federal rental housing assistance program that is highly regulated and frequently audited. The regulations governing the Housing Choice Voucher program are found in the Code of Federal Regulations and Notices published by the US Department of Housing and Urban Development (HUD). Other requirements are found in the Housing Assistance Payments contract and the Arlington Housing Authority's Administrative Plan. Although not an exhaustive list, the following are responsibilities of participating property owners. The owner responsibilities are listed herein as a courtesy to the property owner, and as a reminder of their responsibilities as a participant in the Housing Choice Voucher program. The owner and their agent(s) including any property manager or property management firms are responsible to comply with all applicable federal regulations and Arlington Housing Authority policies and procedures.

## **PROHIBITION ON LEASING TO RELATIVES / PERSONS WITH OWNERSHIP INTEREST**

I understand that it is unlawful for an owner to rent to an assisted tenant who is a member of the owner's family (parent, child, grandparent, grandchild, sister or brother of the owner, any principal, or the legally designated agent).

I understand that it is unlawful for an owner to rent to a tenant that has an ownership interest in the assisted dwelling unit.

## **TENANT RENT REQUIREMENT**

I understand that it is the Housing Authority's responsibility to approve the contract rent and to determine what portion of the approved contract rent will be paid by the tenant and the Housing Authority.

I understand that it is my responsibility to collect the tenant's portion of the rent from the tenant on a monthly ongoing basis in accordance with the Housing Assistance Payments (HAP) Contract.

I understand that the Arlington Housing Authority is not a party to the lease agreement and is not responsible to pay the tenant's portion of rent. The AHA will make rental housing assistance payments (HAP) identified in the HAP contract.

I understand that requests for a rent increase must be submitted to the AHA at least 60 days prior to the date they are scheduled to go into effect. I understand that rent may not be increased without the approval of the AHA.

## **PROHIBITION ON SIDE PAYMENTS**

I understand that any agreements between the owner and tenant must be disclosed to the Arlington Housing Authority including the lease agreement. Any agreements between the owner and tenant must be approved by Arlington Housing Authority (AHA) in advance. It is unlawful to charge the tenant and or collect any additional amounts for rent or any other item not specified in the lease and not specifically approved by AHA.

## **VAWA REQUIREMENTS**

I understand that in accordance with the Violence Against Women Act (VAWA), the AHA may terminate the HAP Contract and allow a family to transfer / relocate to other suitable housing as a safeguard and protection to the resident.



# PROPERTY OWNER CERTIFICATION

## HQS COMPLIANCE

I understand that it is my obligation under the HAP Contract to perform necessary maintenance and to provide those utilities as specified and contracted in my lease with the tenant so that the unit continues to comply with the HUD Housing Quality Standards (HQS). I understand that HAP payments can be abated for failure to maintain the unit in compliance with HQS, and that abated payments may not be collected from the tenant.

## FORECLOSURE

I certify that there are no foreclosure proceedings underway with this property. I understand that it is my responsibility to promptly notify the AHA at least 15 days in advance of pending foreclosure.

## DIRECT DEPOSIT

I understand that all owners will be required to utilize direct deposit as a means of receiving HAP payments.

## VACANCIES AND RELOCATION

I understand that I am responsible to notify the AHA immediately if the assisted unit becomes unoccupied.

I understand that relocating an assisted tenant to another rental unit requires the AHA's prior approval.

I understand that the death of an assisted tenant terminates the HAP Contract.

## UNAUTHORIZED OCCUPANTS

I understand that it is my responsibility to promptly notify the AHA whenever persons not identified on the lease agreement are residing in the assisted dwelling unit and when persons identified in the lease agreement are no longer residing in the assisted dwelling unit.

## RECEIPT OF HAP PAYMENTS

I understand that the receipt of housing assistance payments by the owner or owner's agent or owner's representative constitutes a certification by the owner that the assisted dwelling unit is in safe, decent and sanitary condition i.e.; that the dwelling unit meets the HUD Housing Quality Standards and that the assisted unit is occupied by persons identified in the lease agreement as residents of the assisted dwelling.

I understand that when a tenant's income increases and the amount of HAP payment is reduced to zero by the AHA the contract remains in effect for a maximum 180 days. Following the 180-day period the HAP contract terminates. LEASE REQUIREMENTS

I understand that it is the responsibility of the owner to enforce the terms and conditions of their lease agreement with the tenant.

I understand that I am entitled to HAP payments in the amount specified by the HAP contract and that I will promptly notify the AHA and promptly return to the AHA any erroneous HAP payments that may be received.

**Signature:**

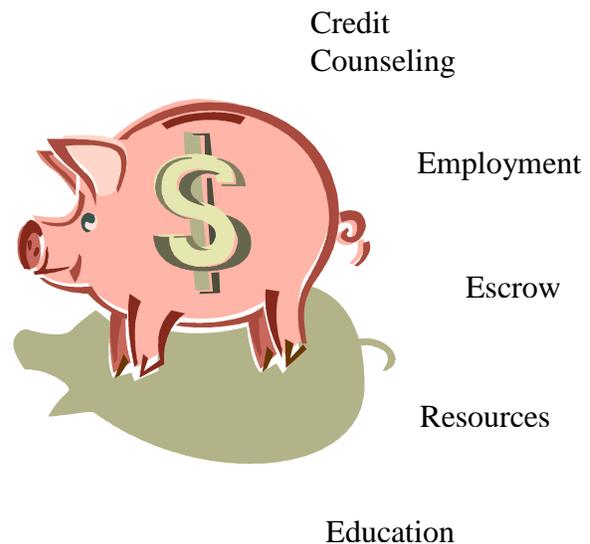
**Date:**

## **22. Family Self-Sufficiency Program (FSS)**

# FAMILY SELF-SUFFICIENCY PROGRAM

Arlington Housing Authority

The Family Self-Sufficiency Program (FSS) is an optional HUD program that encourages the development of local strategies to help housing voucher assisted families to obtain employment that will lead to economic independence and self-sufficiency. The Arlington Housing Authority (AHA) works with welfare agencies, schools, businesses, and other local support service agencies to develop a comprehensive program that gives participating FSS family members the skills and experience to enable them to obtain employment and financial stability.



Success within the FSS Program is a joint effort. This is accomplished by assisting participants in establishing goals, and providing the support and means necessary to ensure they are met. However, the participant's motivation will determine the degree of success. The goals for the FSS Program are associated with the following areas:

- Education
- Employment
- Credit Repair
- Homeownership

For more information contact:

Nickolas Gaffney  
Human Services Specialist  
[nickolas.gaffney@arlingtonhousing.us](mailto:nickolas.gaffney@arlingtonhousing.us)  
(817) 276-6717

Pedro Martinez  
Human Services Specialist  
[pedro.martinez@arlingtonhousing.us](mailto:pedro.martinez@arlingtonhousing.us)  
(817) 276-6721

Julie Hall  
Human Services Coordinator  
[julie.hall@arlingtonhousing.us](mailto:julie.hall@arlingtonhousing.us)  
(817) 276-6711

04/2013

## **23. Arlington Housing Authority Referral List**



# ARLINGTON HOUSING AUTHORITY

## REFERRAL LIST

501 W. Sanford St. Suite 20, Arlington, TX 76011  
(817) 275-3351

[www.arlingtonhousing.us](http://www.arlingtonhousing.us)

HELP STARTS WITH 2-1-1



SERVICES	AGENCY/ADDRESS	PHONE	DESCRIPTION/SERVICES
<b>FINANCIAL</b>	<b>CATHOLIC CHARITIES - ARLINGTON</b> 917 W. Sanford St., Arlington, TX 76012	(817) 274-2560	Financial Assistance
	<b>MISSION ARLINGTON</b> 210 W South St, Arlington, TX.	(817) 277-6620	Rent/Utilities/Prescriptions/Gasoline After school services Basic Needs Seasonal Programs, Transportation
	<b>TANF &amp; FOOD STAMPS</b> 1540 New York Ave, Arlington, TX.	(817) 461-8273	Food Services
	<b>TARRANT COUNTY DEPARTMENT OF HUMAN SERVICES</b> 1200 Circle Dr Ste 200, Fort Worth, TX 76119	(817) 531-5620	Basic Needs RESIDENT INDEPENDENCE STABILIZATION PROGRAM
<b>FOOD / CLOTHING</b>	<b>ARLINGTON CHARITIES</b> 811 Secretary Dr, Arlington, TX.	(817) 275-1511	Emergency food and clothing 9:00AM to 12:00PM
	<b>HARVESTING INTERNATIONAL MINISTRY CENTER</b> 560 Easy Drive, Mansfield, TX 76063	(817) 453-3663	Provides emergency food assistance to persons in need as well supplemental assistance to those in situations requiring continued help.
<b>SHELTER</b>	<b>THE ARLINGTON LIFE SHELTER</b> 325 W. Division St, Arlington, TX.	(817) 548-9885	9:00AM to 5:00PM - after hours ext 2007 5:00PM - 7:00 AM
	<b>ARLINGTON WOMEN'S SHELTER</b>	(817) 460-5566	Hotline
	<b>SAFEHAVEN OF TARRANT COUNTY</b> 401 W. Sanford St #1400, Arlington, TX.	(817) 548-0583	Hotline - <b>1(877) 701-SAFE (7233)</b>
<b>EMPLOYMENT</b>	<b>TX WORKFORCE COMMISSION</b> <b>ARLINGTON WORKFORCE CENTER</b> 140 W. Mitchell ST, Arlington, TX. 8-5 PM	(817) 804-4200 1(800) 939-6631	Customer Service by Phone Mon-Fri 7:00 AM - 6:00 PM Central Time web address <a href="http://www.workforcesolutions.net">www.workforcesolutions.net</a>
	<b>GOODWILL INDUSTRIES</b> 600 Matlock Center Circle, Arlington, TX 76015	(817) 548-9738	Call for employment positions
	<b>ARLINGTON PUBLIC LIBRARY</b> 101 East North Street, Arlington, TX 76011	(817) 459-6985	Adult Literacy Programs
<b>EDUCATION</b>	<b>EDUCATIONAL OPPORTUNITY CENTER</b> 2300 Circle Dr #2308, Ft. Worth TX 76119	(817) 272-2506	Help Find Money for College/GED
	<b>TARRANT COUNTY COLLEGE OPPORTUNITY CENTER</b> 5901 Fitzhugh Avenue, Fort Worth, TX 76119	(817) 515-2883	College/GED/Continuing Education/ESL
	<b>AIDS OUTREACH CENTER</b> 400 N Beach St Fort Worth, TX 76111	(817) 335-1994	Advocacy for AIDS/HIV
<b>HEALTH</b>	<b>JOHN PETER SMITH HEALTH</b> 601 W Sanford #1200, Arlington, TX.	(817) 920-6300	Health Care
	<b>PLANNED PARENTHOOD</b> 3701 South Cooper Street #245, Arlington, TX 76015	(817) 472-8196	Family Planning
	<b>UTA CENTER FOR CLINICAL SOCIAL WORK</b> 211 South Cooper, Box 19129, Arlington, TX 76019	(817) 272-2165	Play Therapy : Marital Counseling : Family Therapy : Individual Counseling : Stress Management and Trauma Recovery : Relaxation Therapy : Group Therapy : Counseling for Military/Veterans and their families and more...
	<b>HANDITRAN</b> 1101 W Main Street, Arlington, TX 76013	(817) 459-5390	Transportation for Senior and Disable Citizens
<b>TRANSPORTATION</b>	<b>MISSION ARLINGTON</b> 210 West South Street, Arlington, TX 76010	(817) 277-6620	Basic Needs/After School/Health Care/Transportation
	<b>RIDE TO WORK</b> 210 W. South St, Arlington, TX 76010	(817) 277-6620	Transportation for Employment-Related Activities. Call Mission Arlington for information or to apply.
	<b>ABRAM HEAD START</b> 1901 E Abram St, Arlington, TX 76010	(817) 459-0608	Ages 8wks - 5 yrs.
<b>CHILDCARE</b>	<b>ARLINGTON CHILD CARE ASSOCIATES</b> 1825 Grace St, Arlington, TX 76010	(817) 838-8422	Ages 3yrs - 5yrs
	<b>ARLINGTON II CDC</b> 525 Browning, Arlington, TX 76010	(817) 460-1112	Ages 2mos - 3yrs
	<b>BOYS AND GIRLS CLUB OF ARLINGTON</b> 608 N Elm St, Arlington, TX 76011	(817) 701-1100	After School Programs
	<b>CHILD CARE MANAGEMENT SERVICES - CCMS</b>	(817) 838-8422	Service for parents who work or attend school
	<b>CLAYTON CHILD CARE</b> 1215 Country Club Lane, Fort Worth, TX 76112	(817) 923-9888	Summer & After School Programs

**CHILDCARE**

<b>GIRLS INC</b> 2820 Matlock Rd. Arlington, TX 760115	(817) 468-0306	Summer & After School Programs
<b>TX WORKFORCE COMMISSION</b> <b>ARLINGTON WORKFORCE CENTER</b> 140 W. Mitchell ST, Arlington, TX. 8-5 PM(local office)	(817) 804-4200	Service for parents who work or attend school, under the age of 13
<b>YMCA</b> 2200 S Davis Dr. Arlington, TX 76013	(817) 274-9622	Summer & After School Programs
<b>YWCA</b> 512 W 4th St. Fort Worth, TX 76102	(817) 332-6191	Transitional Housing for ONLY Single Women

**HOUSING AUTHORITIES**

<b>ARLINGTON HOUSING AUTHORITY</b>	(817) 275-3351	501 W Sanford Ste 20, Arlington, TX 76011
<b>BALCH SPRINGS HOUSING AUTHORITY</b>	(972) 557-6069	3117 Hickory Tree Rd. Balch Springs, TX 75180
<b>DALLAS COUNTY HOUSING</b>	(214) 819-1871	2377 N. Stemmons Freeway, Dallas, TX 75207
<b>DALLAS HOUSING AUTHORITY</b>	(214) 951-8300	3939 N. Hampton Rd. Dallas, TX 75212
<b>DENTON HOUSING AUTHORITY</b>	(940) 383-3039	308 S. Ruddell St. Denton, TX 76205
<b>FORT WORTH HOUSING AUTHORITY</b>	(817) 333-3400	1201 East 13th St. Fort Worth, TX 76102
<b>GARLAND HOUSING AGENCY</b>	(972) 205-3393	210 Carver Drive Suite 201B, Garland, TX 75040
<b>GRANBURY HOUSING AUTHORITY</b>	(817) 573-1107	503 N Crockett St Granbury, TX 76048
<b>GRAND PRAIRIE HOUSING ASSISTANCE DIVISION</b>	(972) 237-8176	205 W. Church St. Grand Prairie, TX 75053
<b>GRAPEVINE HOUSING AUTHORITY</b>	(817) 488-8132	131 Starr Place, Grapevine, TX 76051
<b>HALTOM CITY HOUSING AUTHORITY</b>	(817) 834-0691	2800 Moneda, Haltom City, TX 76117
<b>MCKINNEY HOUSING AUTHORITY</b>	(972) 542-5641	603 N Tennessee St McKinney, TX 75069
<b>MESQUITE HOUSING DIVISION</b>	(972) 216-6424	1616 N. Galloway Ave. Mesquite, TX 75149
<b>PLANO HOUSING AUTHORITY</b>	(972) 423-4928	1740 G Ave Plano, TX 75074
<b>ROCKWALL HOUSING AUTHORITY</b>	(972) 771-0211	100 Llakemeadow Dr., Rockwall TX 75087
<b>TARRANT COUNTY HOUSING ASSISTANCE OFFICE</b>	(817) 531-7640	2100 Circle Dr, Suite 200, Fort Worth, TX 76119
<b>WAXAHACHIE HOUSING AUTHORITY</b>	(972) 937-5730	208 N Patrick St Waxahachie, TX 75165

**HELPFUL NUMBERS**

<b>APARTMENT ASSOCIATION OF TARRANT</b> 6350 Baker Blvd. Richland Hills, TX 76118	(817) 284-1123	Answers legal questions for tenants
<b>CITY OF ARLINGTON CODE ENFORCEMENT</b> 101 S Mesquite St. Arlington, TX 76010	(817) 459-6777	Compliance with city ordinances pertaining to maintenance, sanitation, rehabilitation, conservation and safety of existing residential and commercial properties, such as: graffiti, high weeds and grass, junked vehicles, cars parked in yards, etc...
<b>DEPARTMENT OF AGING AND DISABILITY SERVICES (DADS)</b> 1540 New York Avenue, Arlington, TX 76010	1 (888) 337-6377	Adult Day Programs, Adult Foster Homes, Attendant Services for People with Physical Disabilities and Senior Citizens
<b>HABITAT FOR HUMANITY</b> 3345 S Jones St. Trinity HFH, Fort Worth, TX 76110	(817) 926-9219	Affordable Housing
<b>LEGAL SERVICES OF NORTHWEST TEXAS</b> 600 E. Weatherford St. Fort Worth, TX 76102	(817) 649-4740	Provides free civil legal services to eligible low-income residents in 114 Texas Counties.
<b>MANHATTAN PARK TOWN HOMES</b> 2225 New York Ave., Arlington, TX 76010	(817) 461-7145	Subsidized Housing Choice Vouchers Apartments
<b>MHMR</b> 501 W. Sanford Suite 11, Arlington, TX 76011	(817) 569-4900	Central Intake/Assessment for Psychiatric Services
<b>NUESTRO HOGAR</b> 709 Magnolia, Arlington, TX 76012	(817) 261-0608	Low Income/Subsidized Rental Housing for Functional Disabilities, Low Income/Subsidized Rental Housing for Older Adults
<b>RESOURCE CONNECTION</b> 1100 Circle Dr Fort Worth, TX 76119	(817) 531-7600	The Resource Connection is a one-stop center that through partner agencies, connects persons with education, employment, health and/or human service needs with available resources in a campus environment.
<b>SOCIAL SECURITY</b> 2010 N. Texas Highway 360, Grand Prairie, TX 75050	1 (800) 772-1213	Medicare, Pension Benefits Assistance, Social Security Disability Insurance, Social Security Numbers, Social Security Retirement Benefits, Social Security Survivors Insurance, SSI
<b>TARRANT COUNTY HOUSING PARTNERSHIP INC</b> 3204 Collinworth St. Fort Worth, TX 76107	(817) 924-5091	Homeownership Counseling FIRST TIME HOMEBUYERS
<b>TEXAS ADULT PROTECTIVE SERVICES (APS)</b>	1 (800) 252-5400	Investigates reports of abuse, neglect, and exploitation of adults who are elderly or have disabilities.
<b>TEXAS CHILD PROTECTIVE SERVICES (CPS)</b>	1 (800) 252-5400	Investigates reports of abuse and neglect of children.
<b>TEXAS TENANTS' UNION</b> 4228 Main St Dallas, TX 75226	(214) 823-2733	Empower tenants through education and organizing to protect their rights, preserve their homes, improve their living conditions and enhance the quality of life in their communities.