Rental Application

Susitna Place, Raven Tree Court,
Eagle's Nest, Knik Manor, Alder View
Senior Housing
1301 Century Circle, Wasilla, Alaska 99654
PHONE: 907-376-3104 FAX: 907-373-5170

**** Please return your completed application to the address above. ****

To All Prospective Tenants,

Thank you for your inquiry into our Senior Housing for seniors 62 years of age and older.

- We have a total of 128 units, in our two- and three-level senior housing buildings.
- All of our units are compliant with the Americans with Disabilities Act.
- There is no smoking permitted in any unit, building or within 25 feet of any opening.
- Most of our apartments have a washer/dryer in the unit.
- All utilities included with the exception of cable, internet, phone.

If you have any questions or need assistance in completing this application, contact the Housing Department at 907-376-3104 or email: karenam@alaskaseniors.com.

Applicant Name: _____ Date of Birth: _____

Other Names Used (Maiden or AKA): _____

Co-Applicant Name: _____ Date of Birth: _____

Other Names Used (Maiden or AKA): _____

Mailing Address: _____

Main Phone: _____ Cell Phone: _____

Email Address: _____

WAIT LIST PREFERENCE

Please check one box only

Active Wait List ☐ Check this box if you **ARE** ready to move within 30 days of an invitation.

Inactive Wait List ☐ Check this box if you **ARE NOT** ready to move at this time. This will establish your application date. You may change to the active list when ready to move in.

Unit Type: I am interested in a ☐efficiency ☐one ☐two bedroom apartment.

☐ I am willing to take a one bedroom kitchenette (microwave and refrigerator provided)

☐ I require a full kitchen

☐ I require a bathtub **OR** ☐ I require a walk-in shower **OR** ☐ I will take either a tub or shower

The Fair Housing Act prohibits discrimination against persons based on race, color, religion, sex, national origin, familial status, or disability. A current selection policy is available in the housing office.

Contact the Housing Department if any changes occur in the information you have provided on this application.

This institution is an equal opportunity provider.

08/09/2018

Rental Application For:
Susitna Place, Raven Tree Court, Eagle's Nest, Knik Manor, Alder View Senior Housing

I currently: ☐ rent ☐ own a home
How long at current address: _____
If renting: Name of owner or property management company: _____
Address: _____
Phone number: _____

If rented for less than three years, please list last three years' landlords.
Owner or Property Management Name: _____
Address: _____
Phone Number: _____

Owner or Property Management Name: _____
Address: _____
Phone Number: _____

Owner or Property Management Name: _____
Address: _____
Phone Number: _____

Considering ALL income of ALL household members, what is your Annual Household Gross Income? $_____

To qualify for low income assistance, the annual household gross income must be at or below certain levels set by AHFC or HUD.

Are you employed? ☐ Yes ☐ No Co-Applicant: ☐ Yes ☐ No
Employer: _____ Gross Monthly Earnings: _____

Address: _____ Phone Number: _____

Self-Employment? ☐ Yes ☐ No Co-Applicant: ☐ Yes ☐ No Gross Monthly Earnings: _____

Have you been convicted of a crime in the last 10 years? ☐ Yes ☐ No Co-Applicant: ☐ Yes ☐ No

If yes, please explain: _____

Do you own a pet? ☐ Yes ☐ No

Do you smoke? ☐ Yes ☐ No

Do you have a Section 8 voucher? ☐ Yes ☐ No

Have you ever been evicted? ☐ Yes ☐ No Co-Applicant: ☐ Yes ☐ No

When? _____ Why? _____

Rental Application For:
Susitna Place, Raven Tree Court, Eagle's Nest, Knik Manor, Alder View Senior Housing

Please fill out completely:

Income	Applicant			Co-Applicant		
Source	Y	N	Amount	Y	N	Amount
Social Security						
Supplemental Security Income (SSI)						
Alaska Permanent Fund Dividend						
Senior Care/Benefits						
Public Assistance						
Retirement or Pension						
Native Dividends						
Other Payments: Alimony, child support, veterans' benefits, annuities, severance packages, settlements, lottery winnings, inheritances, native claims, or rental properties						

Assets	Applicant			Co-Applicant		
Source	Y	N	Value	Y	N	Value
Checking Account						
Savings Account						
Money Market Account						
Certificates of Deposit or Treasury Bills						
Stocks, Bonds, or Securities						
Pensions, IRAs Keogh, or other Retirement Accounts						
Do you own real estate or rental property?						
Do you have a Whole Life Insurance Policy?						
Do you have cash on hand of $500.00 or more (NOT in an account?						
Have you disposed of or given away assets for LESS than fair market value within the past two (2) years? Example: Sold or given to family, friends, or others assets (home, car, cash) for less than their actual value.						

Rental Application For:
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Wasilla Area Seniors, Inc. collects demographic information to comply with federal requirements. Your responses do not affect your placement on the waitlist.

Circle One: Hispanic / Non-Hispanic

Circle All That Apply: Alaskan Native/American Indian / Native Hawaiian, Pacific Islander / Asian / African American / Caucasian / Biracial / Multiracial / Other—Please Specify: _____

☐ Choose not to report

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* Note: This is a preliminary application and gives no lease or rental rights.
* Additional information will be required to complete your application when a unit is available to you.
* WASI manages this wait list in compliance with HUD/AHFC regulations.

I certify that all the information I have given is correct and complete to the best of my ability and authorize Wasilla Area Seniors, Inc. to make any inquiries necessary to evaluate my eligibility and qualification for tenancy and credit standing. This includes and/or all of the following:

1) **Prior tenant history**
2) **Verification of Information including all income sources**
3) **Credit History**

Applicant Signature: _____ **Date:** _____

Co-Applicant Signature: _____ **Date:** _____

FOR OFFICE USE ONLY:

	Initials	Date
Application Received		
Accepted Denied		
Initial Wait List Letter Sent		
Denial Letter Sent		
Removed From Wait List		

Notes:

This institution is an equal opportunity provider.

08/09/2018

Waitlist Application Information

Susitna Place, Raven Tree Court,
Eagle's Nest, Knik Manor, Alder View
Senior Housing
1301 Century Circle, Wasilla, Alaska 99654
PHONE: 907-376-3104 FAX: 907-373-5170

How is waitlist placement determined?

Ranking on the waitlist is determined by the date and time a completed application is received at the Housing Office at Wasilla Area Seniors, Inc. Incomplete applications are considered pending and will be returned to applicants for completion.

Once the date and time of receipt of a completed application is established, it is permanently retained with the application.

What is the difference between the "active" and "inactive" waitlists?

When applying, applicants choose between the "active" and "inactive" waitlists. These two lists sort applicants into two groups: The active list is for those who are ready and willing to move within thirty (30) days of receiving notification of an available unit. Those who are not ready to move in the next 30 days are on the inactive waitlist.

Available units will be offered to those on the active waitlist. Applicants on the inactive waitlist, when they are ready to move within 30 days of receiving notification of an available unit, must submit a written statement to the Housing Office at Wasilla Area Seniors, Inc. The original date of application, which is used to determine the rank order on the list, remains the same when an individual is on either the active or inactive waitlist.

How do applicants transfer between the active and inactive waitlists?

Applicants must provide a written notice to transfer between waitlists. Any time a name is transferred between lists, a letter is sent to the applicant to confirm the action. Applicants may transfer from the active to inactive lists at any time. However, when an applicant transfers from the active to the inactive waitlist after declining an offer of housing, they remain on the inactive list for at least 180 days before they may transfer back to the active list. The original application date remains the same no matter how many times the applicant transfers between lists.

How are applicants selected for residency?

Applicants are selected for residency on a "first-come, first-served" basis established by the date and time a completed application is received. When a unit becomes available, it will be offered to the first qualified applicant on the active waitlist.

What happens if an applicant on the active waitlist declines an offer of housing?

When an applicant declines an offer of suitable housing, the applicant's name is transferred to the inactive waitlist. The applicant will remain on the inactive waitlist at least 180 days before they may request a transfer back to the active waitlist.

Does an applicant need to reapply every year? How long can an applicant remain on the waitlist?

Unless an applicant chooses to withdraw his/her application, the applicant's name remains on the waitlist until he/she attains housing. When a co-applicant withdraws, the remaining applicant may submit a new application and keep the original application date.

This institution is an equal opportunity provider.

WASI
WASILLA AREA SENIORS INC.

I understand that Wasilla Area Seniors Inc. Housing Department keeps my personal information confidential. I also understand that I can choose to allow Wasilla Area Seniors Inc. Housing Department to release information about my application or my position on the wait list.

I, _____, authorize Wasilla Area Seniors Inc. Housing
(Please Print)
Department to share information with the following:

Name:_____	Name:_____
Relationship to you:_____	Relationship to you:_____
Phone Number:_____	Phone Number:_____

The information may be shared: ☐ in person ☐ by phone ☐ by fax ☐ by mail ☐ by e-mail

☐ *I understand that electronic mail (e-mail) is not confidential and can be intercepted and read by other people.*

This release expires on _____
Date

I understand that I may withdraw my consent to this release at any time in writing.

Signed: _____ Date: _____

This institution is an equal opportunity provider.

Susitna Place Senior Housing, LP
Raven Tree Court Senior Housing, LP
Eagle's Nest Senior Housing, LP
Knik Manor Senior Housing, LP
Alder View Senior Housing, LP
Blueberry Pointe Senior Housing, LP

EQUAL HOUSING OPPORTUNITY

Authorization to Release Information

TO WHOM IT MAY CONCERN

The person named below is either a Tenant or an Applicant for a dwelling unit in the Susitna Place, Raven Tree Court, Eagle's Nest, Knik Manor, Alder View, or Blueberry Pointe Senior Housing. One of the requirements of the Federal Law that provided funds for its construction is that income and assets must be within the guidelines set by the Federal Government. The information requested below is for the purpose of determining eligibility and will be kept in strict confidence.

CONSENT

I authorize and direct any Federal, State or Local agency, organization, business or individual to release to Wasilla Area Seniors, Inc. any information or materials needed to complete and verify my continued eligibility or my application for participation under the Federal Government's guidelines.

Printed Name _____ Social Security # _____

Street Address _____ City, State & Zip _____

Signature _____ Date _____

CONDITIONS

This authorization remains in effect for 13 months from the date of my signature. I am either a tenant or an applicant in this housing program. I understand that a photocopy of this authorization is as valid as an original.

INFORMATION COVERED

I understand that depending on program policies and requirements, previous or current information regarding me or my household may be needed. Verifications and inquiries that may be requested include, but are not limited to:

Credit Providers/Credit Bureaus	Banks/Other Financial Institutions	State Employment Agencies
Welfare Agencies	Public Records	Support/Alimony Providers
Current/Prior Landlords	Retirement Systems	Utility Companies
Housing Agencies	Veterans Administration	Military Pay
Courts and Post Offices	Past/Present Employers	Social Security Administration

Phone: 907-376-3104 **Fax: 907-373-5170** **www.wasillaseniors.com**

1301 S. Century Circle, Wasilla, AK 99654

Wasilla Area Seniors, Inc. (WASI)

Notice of Occupancy Rights under the Violence Against Women Act

To all Tenants and Applicants

The Violence Against Women Act (VAWA) provides protections for victims of domestic violence, dating violence, sexual assault, or stalking. VAWA protections are not only available to women, but are available equally to all individuals regardless of sex, gender identity, or sexual orientation.[1] The U.S. Department of Housing and Urban Development (HUD) is the Federal agency that oversees that a covered housing program complies with VAWA. This notice explains your rights under VAWA. A HUD-approved certification form is attached to this notice. You can fill out this form to show that you are or have been a victim of domestic violence, dating violence, sexual assault, or stalking, and that you wish to use your rights under VAWA."

The notice applies to applicants and residents who receive assistance or seek assistance under the Low Income Tax Credit program, and therefore it applies to all applicants and residents of WASI properties. The notice also applies to applicants and residents who receive assistance under the HOME investment Partnership program or the (Section 8) Housing Choice Voucher program administered by the Alaska Housing Finance Corporation (AHFC).

Protections for Applicants

If you otherwise qualify for assistance, you cannot be denied admission or denied assistance because you are or have been a victim of domestic violence, dating violence, sexual assault, or stalking.

Protections for Tenants

If you are receiving assistance, you may not be denied assistance, terminated from participation, or be evicted from your rental housing because you are or have been a victim of domestic violence, dating violence, sexual assault, or stalking.

Also, if you or an affiliated individual of yours is or has been the victim of domestic violence, dating violence, sexual assault, or stalking by a member of your household or any guest, you may not be denied rental assistance or occupancy rights solely on the basis of criminal activity directly relating to that domestic violence, dating violence, sexual assault, or stalking.

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[1] WASI may not discriminate on the basis of any protected characteristic, including race, color, national origin, religion, sex, familial status, disability, or age. Housing must be made available to all otherwise eligible individuals regardless of actual or perceived sexual orientation, gender identity, or marital status.

Affiliated individual means your spouse, parent, brother, sister, or child, or a person to whom you stand in the place of a parent or guardian (for example, the affiliated individual is in your care, custody, or control); or any individual, tenant, or lawful occupant living in your household.

Removing the Abuser or Perpetrator from the Household

WASI may divide (bifurcate) your lease in order to evict the individual or terminate the assistance of the individual who has engaged in criminal activity (the abuser or perpetrator) directly relating to domestic violence, dating violence, sexual assault, or stalking.

If WASI chooses to remove the abuser or perpetrator, WASI may not take away the rights of eligible tenants to the unit or otherwise punish the remaining tenants. If the evicted abuser or perpetrator was the sole tenant to have established eligibility for assistance under the program, WASI must allow the tenant who is or has been a victim and other household members to remain in the unit for a period of time, in order to establish eligibility under the program or under another HUD housing program covered by VAWA, or, find alternative housing.

In removing the abuser or perpetrator from the household, WASI must follow Federal, State, and local eviction procedures. In order to divide a lease, WASI may, but is not required to, ask you for documentation or certification of the incidences of domestic violence, dating violence, sexual assault, or stalking.

Moving to Another Unit

Upon your request, WASI may permit you to move to another unit, subject to the availability of other units, and still keep your assistance. In order to approve a request, WASI may ask you to provide documentation that you are requesting to move because of an incidence of domestic violence, dating violence, sexual assault, or stalking. If the request is a request for emergency transfer, the housing provider may ask you to submit a written request or fill out a form where you certify that you meet the criteria for an emergency transfer under VAWA. The criteria are:

(1) You are a victim of domestic violence, dating violence, sexual assault, or stalking. If your housing provider does not already have documentation that you are a victim of domestic violence, dating violence, sexual assault, or stalking, your housing provider may ask you for such documentation, as described in the documentation section below.

(2) You expressly request the emergency transfer. Your housing provider may choose to require that you submit a form, or may accept another written or oral request.

(3) You reasonably believe you are threatened with imminent harm from further violence if you remain in your current unit. This means you have a reason to fear that if you do not receive a transfer you would suffer violence in the very near future.

OR

You are a victim of sexual assault and the assault occurred on the premises during the 90-calendar-day period before you request a transfer. If you are a victim of sexual assault, then in addition to qualifying for an emergency transfer because you reasonably believe you are threatened with imminent harm from further violence if you remain in your unit, you may qualify for an emergency transfer if the sexual assault occurred on the premises of the property from which you are seeking your transfer, and that assault happened within the 90-calendar-day period before you expressly request the transfer.

WASI will keep confidential requests for emergency transfers by victims of domestic violence, dating violence, sexual assault, or stalking, and the location of any move by such victims and their families.

WASI's emergency transfer plan provides further information on emergency transfers, and WASI must make a copy of its emergency transfer plan available to you if you ask to see it.

Documenting You Are or Have Been a Victim of Domestic Violence, Dating Violence, Sexual Assault or Stalking

WASI can, but is not required to, ask you to provide documentation to "certify" that you are or have been a victim of domestic violence, dating violence, sexual assault, or stalking. Such request from WASI must be in writing, and WASI must give you at least 14 business days (Saturdays, Sundays, and Federal holidays do not count) from the day you receive the request to provide the documentation. WASI may, but does not have to, extend the deadline for the submission of documentation upon your request.

You can provide one of the following to WASI as documentation. It is your choice which of the following to submit if WASI asks you to provide documentation that you are or have been a victim of domestic violence, dating violence, sexual assault, or stalking.

1. A complete HUD-approved certification form given to you by WASI with this notice, that documents an incident of domestic violence, dating violence, sexual assault, or stalking. The form will ask for your name, the date, time, and location of the incident of domestic violence, dating violence, sexual assault, or stalking, and a description of the incident. The certification form provides for including the name of the abuser or perpetrator if the name of the abuser or perpetrator is known and is safe to provide.
2. A record of a Federal, State, tribal, territorial, or local law enforcement agency, court, or administrative agency that documents the incident of domestic violence, dating violence, sexual assault, or stalking. Examples of such records include police reports, protective orders, and restraining orders, among others.
3. A statement, which you must sign, along with the signature of an employee, agent, or volunteer of a victim service provider, an attorney, a medical professional or a mental health professional (collectively, "professional") from whom you sought assistance in addressing domestic violence, dating violence, sexual assault, or stalking, or the effects of abuse, and with the professional selected by you attesting under penalty of perjury that he or she believes that the incident or incidents of domestic violence, dating violence, sexual assault, or stalking are grounds for protection.
4. Any other statement or evidence that WASI has agreed to accept.

If you fail or refuse to provide one of these documents within the 14 business days, WASI does not have to provide you with the protections contained in this notice.

If WASI receives conflicting evidence that an incident of domestic violence, dating violence, sexual assault, or stalking has been committed (such as certification forms from two or more members of a household each claiming to be a victim and naming one or more of the other petitioning household members as the abuser or perpetrator), WASI has the right to request that you provide third-party documentation within thirty 30 calendar days in order to resolve the conflict. If you fail or refuse to provide third-party documentation where there is conflicting evidence, WASI does not have to provide you with the protections contained in this notice.

Confidentiality

WASI must keep confidential any information you provide related to the exercise of your rights under VAWA, including the fact that you are exercising your rights under VAWA.

WASI must not allow any individual administering assistance or other services on behalf of WASI (for example, employees and contractors) to have access to confidential information unless for reasons that specifically call for these individuals to have access to this information under applicable Federal, State, or local law.

WASI must not enter your information into any shared database or disclose your information to any other entity or individual. WASI, however, may disclose the information provided if:

1. You give written permission to WASI to release the information on a time limited basis.
2. WASI needs to use the information in an eviction or termination proceeding, such as to evict your abuser or perpetrator or terminate your abuser or perpetrator from assistance under this program.
3. A law requires WASI or your landlord to release the information.

VAWA does not limit WASI's duty to honor court orders about access to or control of the property. This includes orders issued to protect a victim and orders dividing property among household members in cases where a family breaks up.

Reasons a Tenant Eligible for Occupancy Rights under VAWA May Be Evicted or Assistance May Be Terminated

You can be evicted and your assistance can be terminated for serious or repeated lease violations that are not related to domestic violence, dating violence, sexual assault, or stalking committed against you. However, WASI cannot hold tenants who have been victims of domestic violence, dating violence, sexual assault, or stalking to a more demanding set of rules than it applies to tenants who have not been victims of domestic violence, dating violence, sexual assault, or stalking.

The protections described in this notice might not apply, and you could be evicted and your assistance terminated, if WASI can demonstrate that not evicting you or terminating your assistance would present a real physical danger that:

1. Would occur within an immediate time frame, and

2. Could result in death or serious bodily harm to other tenants or those who work on the property.

If WASI can demonstrate the above, WASI should only terminate your assistance or evict you if there are no other actions that could be taken to reduce or eliminate the threat.

Other Laws

VAWA does not replace any Federal, State, or local law that provides greater protection for victims of domestic violence, dating violence, sexual assault, or stalking. You may be entitled to additional housing protections for victims of domestic violence, dating violence, sexual assault, or stalking under other Federal laws, as well as under State and local laws.

Non-Compliance with The Requirements of This Notice

You may report a covered housing provider's violations of these rights and seek additional assistance, if needed, by contacting or filing a complaint with the Alaska Housing Finance Corporation or HUD Anchorage Field Office:

HUD Anchorage Field Office
Department of Housing and Urban Development
3000 C. Street, Suite 401
Anchorage, AK 99503
Phone: (907) 677-9800 or **Toll-Free (in Alaska only):** (877) 302-9800
Email: AK_Webmanager@hud.gov
Fax: (907) 677-9803
TTY: (907) 677-9825

For Additional Information

You may view a copy of HUD's final VAWA rule at

https://www.federalregister.gov/documents/2016/11/16/2016-25888/violence-against-women-reauthorization-act-of-2013-implementation-in-hud-housing-programs .

Additionally, WASI must make a copy of HUD's VAWA regulations available to you if you ask to see them.

For questions regarding VAWA, please contact the WASI Housing Office.

For help regarding an abusive relationship, you may call the National Domestic Violence Hotline at 1-800-799-7233 or, for persons with hearing impairments, 1-800-787-3224 (TTY).

For tenants who are or have been victims of stalking seeking help may visit the National Center for Victims of Crime's Stalking Resource Center at https://www.victimsofcrime.org/our-programs/stalking-resource-center.

Attachment: Certification form HUD-5382

CERTIFICATION OF DOMESTIC VIOLENCE, DATING VIOLENCE, SEXUAL ASSAULT, OR STALKING, AND ALTERNATE DOCUMENTATION

U.S. Department of Housing and Urban Development

OMB Approval No. 2577-0286

Purpose of Form: The Violence Against Women Act ("VAWA") protects applicants, tenants, and program participants in certain HUD programs from being evicted, denied housing assistance, or terminated from housing assistance based on acts of domestic violence, dating violence, sexual assault, or stalking against them. Despite the name of this law, VAWA protection is available to victims of domestic violence, dating violence, sexual assault, and stalking, regardless of sex, gender identity, or sexual orientation.

Use of This Optional Form: If you are seeking VAWA protections from your housing provider, your housing provider may give you a written request that asks you to submit documentation about the incident or incidents of domestic violence, dating violence, sexual assault, or stalking.

In response to this request, you or someone on your behalf may complete this optional form and submit it to your housing provider, or you may submit one of the following types of third-party documentation:

(1) A document signed by you and an employee, agent, or volunteer of a victim service provider, an attorney, or medical professional, or a mental health professional (collectively, "professional") from whom you have sought assistance relating to domestic violence, dating violence, sexual assault, or stalking, or the effects of abuse. The document must specify, under penalty of perjury, that the professional believes the incident or incidents of domestic violence, dating violence, sexual assault, or stalking occurred and meet the definition of "domestic violence," "dating violence," "sexual assault," or "stalking" in HUD's regulations at 24 CFR 5.2003.

(2) A record of a Federal, State, tribal, territorial or local law enforcement agency, court, or administrative agency; or

(3) At the discretion of the housing provider, a statement or other evidence provided by the applicant or tenant.

Submission of Documentation: The time period to submit documentation is 14 business days from the date that you receive a written request from your housing provider asking that you provide documentation of the occurrence of domestic violence, dating violence, sexual assault, or stalking. Your housing provider may, but is not required to, extend the time period to submit the documentation, if you request an extension of the time period. If the requested information is not received within 14 business days of when you received the request for the documentation, or any extension of the date provided by your housing provider, your housing provider does not need to grant you any of the VAWA protections. Distribution or issuance of this form does not serve as a written request for certification.

Confidentiality: All information provided to your housing provider concerning the incident(s) of domestic violence, dating violence, sexual assault, or stalking shall be kept confidential and such details shall not be entered into any shared database. Employees of your housing provider are not to have access to these details unless to grant or deny VAWA protections to you, and such employees may not disclose this information to any other entity or individual, except to the extent that disclosure is: (i) consented to by you in writing in a time-limited release; (ii) required for use in an eviction proceeding or hearing regarding termination of assistance; or (iii) otherwise required by applicable law.

TO BE COMPLETED BY OR ON BEHALF OF THE VICTIM OF DOMESTIC VIOLENCE, DATING VIOLENCE, SEXUAL ASSAULT, OR STALKING

1. **Date the written request is received by victim:** _____

2. **Name of victim:** _____

3. **Your name (if different from victim's):** _____

4. **Name(s) of other family member(s) listed on the lease:** _____

_____

5. **Residence of victim:** _____

6. **Name of the accused perpetrator (if known and can be safely disclosed):** _____

_____

7. **Relationship of the accused perpetrator to the victim:** _____

8. **Date(s) and times(s) of incident(s) (if known):** _____

_____

10. **Location of incident(s):** _____

In your own words, briefly describe the incident(s):

_____

_____

_____

_____

This is to certify that the information provided on this form is true and correct to the best of my knowledge and recollection, and that the individual named above in Item 2 is or has been a victim of domestic violence, dating violence, sexual assault, or stalking. I acknowledge that submission of false information could jeopardize program eligibility and could be the basis for denial of admission, termination of assistance, or eviction.

Signature _____ Signed on (Date) _____

Public Reporting Burden: The public reporting burden for this collection of information is estimated to average 1 hour per response. This includes the time for collecting, reviewing, and reporting the data. The information provided is to be used by the housing provider to request certification that the applicant or tenant is a victim of domestic violence, dating violence, sexual assault, or stalking. The information is subject to the confidentiality requirements of VAWA. This agency may not collect this information, and you are not required to complete this form, unless it displays a currently valid Office of Management and Budget control number.