

SOUTH SHORE HOUSING



South Shore Housing Development Corporation
169 Summer Street
Kingston, Massachusetts 02364-1220
(781) 422-4200; 1-800-242-0957
FAX (781) 585-7483

FAMILY OBLIGATIONS UNDER THE SECTION 8 HCV PROGRAM

THE FAMILY MUST:

1. SUPPLY ANY INFORMATION THAT THE HA OR HUD DETERMINES TO BE NECESSARY INCLUDING EVIDENCE OF CITIZENSHIP OR ELIGIBLE IMMIGRATION STATUS, AND INFORMATION FOR USE IN A REGULARY 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 HA TO VERIFY THAT THE FAMILY IS LIVING IN THE UNIT OR INFORMATION RELATED TO FAMILY ABSENCE FROM THE UNIT.
4. PROMPTLY NOTIFY THE HA IN WRITING WHEN THE FAMILY IS AWAY FROM THE UNIT FOR AN EXTENDED PERIOD OF TIME IN ACCORDANCE WITH HA POLICIES.
5. ALLOW THE HA TO INSPECT THE UNIT AT REASONABLE TIMES AND AFTER REASONABLE NOTICE.
6. NOTIFY THE HA 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 HA IN WRITING OF THE BIRTH, ADOPTION, OR COURT-AWARDED CUSTODY OF A CHILD.
9. REQUEST HA WRITTEN APPROVAL TO ADD ANY OTHER FAMILY MEMBER AS AN OCCUPANT OF THE UNIT.
10. PROMPTLY NOTIFY THE HA IN WRITING IF ANY FAMILY MEMBER NO LONGER LIVES IN THE UNIT.
11. GIVE THE HA 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

THE FAMILY MUST NOT:

1. OWN OR HAVE ANY INTEREST IN THE UNIT (OTHER THAN A COOPERATIVE, OR THE OWNER OF A MANUFACTURED HOME LEASING 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. PARTICIPATE IN ILLEGAL DRUG OR VIOLENT CRIMINAL ACTIVITY.
5. SUBLEASE OR LET THE UNIT OR ASSIGN THE LEASE OR TRANSFER THE UNIT.
6. RECEIVE SECTION 8 TENANT BASED HOUSING ASSISTANCE WHILE RECEIVING ANOTHER HOUSING SUBSIDY FOR THE SAME OR DIFFERENT UNIT.
7. DAMAGE THE UNIT OR PERMIT A GUEST TO DAMAGE THE UNIT BEYOND REASONABLE WEAR AND TEAR.

I CERTIFY THAT I UNDERSTAND THE FAMILY OBLIGATIONS OF THE FEDERAL SECTION 8 HOUSING ASSISTANCE PROGRAM AND THAT A VIOLATION OF THESE OBLIGATIONS MAY RESULT IN TERMINATION FROM THIS PROGRAM.

HEAD OF HOUSEHOLD SIGNATURE: _____ DATE: _____