

SUMMARY

1. GET PREPARED

- Let your Landlord know you plan to move. You must give 30 days' written notice (or more if your lease requires it)
- You will be required to pay your first month's Rent and Security Deposit to the landlord when you sign your lease and final paperwork. Section 8 does not provide these funds.
- Do not Sign a lease, Pay the Security Deposit or have Utilities put in your name until the unit passes inspection and the lease has been approved

2. FIND A DWELLING UNIT THAT IS FOR RENT

- This can be an Apartment, Duplex, House, etc.
- Make sure that the (**rent**) + (**utilities**) is an amount **below** the payment standards

3. HAVE NEW LANDLORD COMPLETE REQUEST FOR TENANCY APPROVAL FORM

- If the landlord or manager is willing to work with the program, have them complete RFTA. This form is not a commitment to rent by either party.
- Eligibility for assistance in the unit cannot be determined until this form is submitted.

4. RETURN THE SIGNED RFTA PACKET TO THE HOUSING AUTHORITY

- *It must include a copy of the notice of intent to vacate you gave your Landlord*
- *Tenant in Good Standing Form completed by your Landlord*
- *Unsigned copy of Lease from New Landlord*
- *Current income if your last annual recertification was more than 3 months ago*
- *You will receive a response once the analysis is complete*

5. NUTMEG INSPECTIONS WILL CONTACT NEW LANDLORD IF YOU ARE APPROVED

- This is to schedule an inspection of the unit to determine if it is a Good Place to Live.
- The Utilities **must** be on.

6. YOU WILL RECEIVE A LETTER FROM NUTMEG

- indicating the inspection results within 3 days after the inspection.
- Do not call the Housing Authority for results unless you do not receive a letter within 3 days.

7. GREENWICH COMMUNITIES WILL PROCESS FINAL PAPERWORK & LEASE

- **After** receiving notice stating the unit passed inspection, we will work with voucher holder and landlord to process/sign the final paperwork and lease.

8. ANY QUESTIONS?

- Contact the Housing Authority. Do not jeopardize your assistance by asking an unauthorized individual.

Portability: Families who reside in Greenwich at the time of application, may take their voucher anywhere in the United States to receive housing assistance. A written request to send a portability packet to a receiving housing authority must be submitted to begin the process. Your family income must be within the very low income limit for the area of the receiving Housing Authority.



FAIR MARKET RENTS & PAYMENT STANDARDS AS OF OCTOBER 1, 2023

UNIT SIZE	A FAIR MARKET RENT	B PAYMENT STANDARD
Studio	\$1,781	\$1,959
1 Bedroom	\$2,173	\$2,390
2 Bedroom	\$2,628	\$2,890
3 Bedroom	\$3,202	\$3,522
4 Bedroom	\$3,500	\$3,850

In accordance with HUD regulations, The Housing Choice Voucher pays the difference between 30% of the tenants' income and whatever is lower: a) Gross Rent (Contract rent plus utility allowance) or b) the Payment Standard

IMPORTANT: If the proposed Contract Rent is higher than the Payment Standard listed above you can:

- 1) Pay the difference between the contracted rent and the payment standard in addition to 30% of your income, plus utilities (only for renewals, not initial terms of lease term – including port ins)
- 2) Negotiate a lower rent with the landlord (contact your landlord)
- 3) Locate another apartment at a lower rent. (30 days WRITTEN notice to the current landlord is required)

The Total Tenant Obligation (TTO), which is the tenant portion of the rent plus the utility obligation, cannot be more than 40% of the total adjusted family income at initial lease up (if you move to another apartment) for the unit if the gross rent is higher than the payment standard for the unit size.

The rent the landlord charges for an apartment + the cost of utilities should not be more than the payment standard

249 Milbank Avenue, Greenwich, CT 06830
Tel: 203-869-1138
EQUAL OPPORTUNITY AGENCY

DECLARATION OF TENANT IN GOOD STANDING

(to be completed by Landlord)

Landlord Name	
Address	
City State Zip	
Phone	
E-Mail	

HOUSEHOLD COMPOSITION *(List all people currently living in household)*

Name of Family Member	Relation to Head
	<i>HEAD</i>

Check One:

This is to declare that my tenant listed above, who lives at _____

☐

Is a tenant in GOOD STANDING; owes no monies for rent or damages at this time and is in compliance with ALL the terms of our lease.

☐

IS NOT a tenant in good standing for the following reason(s):

Certification

*I/We certify that the information given to the **Housing Authority of the Town of Greenwich** concerning household is accurate and complete to the best of my/our knowledge and belief. I/we understand that false statements or information are grounds for termination of housing assistance and program participation.*

WARNING: Title 18, Section 1001 of the U.S. Code provides among other things that a person is guilty of a felony for knowingly and willingly making or using a document or writing containing false, fictitious or fraudulent statements or entries in any matter within the jurisdiction of a department or agency of the United States and shall be fined not more than \$10,000 or imprisoned for not more than five years or both.

Landlord/agent

date

Print name of signatory

REQUESTS FOR TENANCY APPROVAL (RFTA)

Steps to follow if you wish to move to another apartment in Greenwich. Please read carefully.

SUBMISSION

- Forms **MUST** be submitted no later than the 15th of the month to begin a lease on the first day of the upcoming month. Submissions after that timeframe will be addressed for lease-up the following month.
- Only one RFTA can be submitted at a time. Submission of a second form invalidates the first one. Only forms signed by both the tenant and the landlord can be processed.

TENANT

- Complete information to the right of landlord information on back of form and sign.
- Provide the **RFTA form** completed and signed by the new landlord. This information will be used to determine income eligibility for assistance in the new unit. It must be fully completed and signed by the landlord and you.
- Submit a copy of the written **Notice to Vacate** you gave your current landlord.
- Submit the **Tenant in Good Standing** letter completed by your current landlord.
- If you have not provided income verifications in the last 90 days, current verifications must be submitted.
- If you are income eligible for that unit, then an inspection with the landlord will be scheduled by our vendor, Nutmeg.

LANDLORD

- Complete sections 2 through 15.
- Provide the name, address, email and telephone number of the Owner/Agent.
- Include a copy of the unsigned **Lease** and **Lead Disclosure** along with the **RFTA**
- It is the landlord's option to use his own lease or one provided by Housing.
- The HUD Lease Addendum will become part of the pre-approved lease
- Any utilities designated as a tenant responsibility must be separately metered and only for the tenant's unit.
- **Provide the signed RFTA to the Prospective Tenant.**
- If the unit is affordable for the program and tenant, it will be approved.
- If approved, it will be scheduled for Inspection.
- Once the unit passes inspection, Tenant and Landlord can sign the lease.
- The Housing Assistance Contract (HAP) between the landlord and the Housing Authority must be signed prior to the release of any funds along with the W9, Direct Deposit Agreement form and copy of the Deed.

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. 04/30/2026

When the participant selects a unit, the owner of the unit completes this form to provide the PHA with information about the unit. The information is used to determine if the unit is eligible for rental assistance.

1. Name of Public Housing Agency (PHA)			2. Address of Unit (street address, unit #, city, state, zip code)		
3. Requested Lease Start Date	4. Number of Bedrooms	5. Year Constructed	6. Proposed Rent	7. Security Deposit Amt	8. Date Unit Available for Inspection
9. Structure Type			10. If this unit is subsidized, indicate type of subsidy:		
<input type="checkbox"/> Single Family Detached (one family under one roof)			<input type="checkbox"/> Section 202 <input type="checkbox"/> Section 221(d)(3)(BMIR)		
<input type="checkbox"/> Semi-Detached (duplex, attached on one side)			<input type="checkbox"/> Tax Credit <input type="checkbox"/> HOME		
<input type="checkbox"/> Rowhouse/Townhouse (attached on two sides)			<input type="checkbox"/> Section 236 (insured or uninsured)		
<input type="checkbox"/> Low-rise apartment building (4 stories or fewer)			<input type="checkbox"/> Section 515 Rural Development		
<input type="checkbox"/> High-rise apartment building (5+ stories)			<input type="checkbox"/> Other (Describe Other Subsidy, including any state or local subsidy) _____		
<input type="checkbox"/> Manufactured Home (mobile home)					

11. Utilities and Appliances

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

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

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. <input type="text"/>	<input type="text"/>	<input type="text"/>
2. <input type="text"/>	<input type="text"/>	<input type="text"/>
3. <input type="text"/>	<input type="text"/>	<input type="text"/>

- 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 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 if the unit is not approved.

OMB Burden Statement: The public reporting burden for this information collection is estimated to be 0.5 hours, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Collection of information about the unit features, owner name, and tenant name is voluntary. The information sets provides the PHA with information required to approve tenancy. Assurances of confidentiality are not provided under this collection. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions to reduce this burden, to the Office of Public and Indian Housing, US. Department of Housing and Urban Development, Washington, DC 20410. HUD may not conduct and sponsor, and a person is not required to respond to, a collection of information unless the collection displays a valid control number.

Privacy Notice: The Department of Housing and Urban Development (HUD) is authorized to collect the information required on this form by 24 CFR 982.302. The form provides the PHA with information required to approve tenancy. The Personally Identifiable Information (PII) data collected on this form are not stored or retrieved within a system of record.

I/We, the undersigned, certify under penalty of perjury that the information provided above is true and correct. **WARNING:** Anyone who knowingly submits a false claim or makes a false statement is subject to criminal and/or civil penalties, including confinement for up to 5 years, fines, and civil and administrative penalties. (18 U.S.C. §§ 287, 1001, 1010, 1012; 31 U.S.C. §3729, 3802).

Print or Type Name of Owner/Owner Representative		Print or Type Name of Household Head	
Owner/Owner Representative Signature		Head of Household Signature	
Business Address		Present Address	
Telephone Number	Date (mm/dd/yyyy)	Telephone Number	Date (mm/dd/yyyy)