APPLYING FOR HUD HOUSING ASSISTANCE?

THINK ABOUT THIS... IS FRAUD WORTH IT?

Do You Realize...

If you commit fraud to obtain assisted housing from HUD, you could be:

- **Evicted** from your apartment or house.
- **Required to repay** all overpaid rental assistance you received.
- **Fined** up to $10,000.
- **Imprisoned** for up to five years.
- **Prohibited** from receiving future assistance.
- **Subject** to State and local government penalties.

Do You Know...

You are committing fraud if you sign a form knowing that you provided false or misleading information.

The information you provide on housing assistance application and recertification forms will be checked. The local housing agency, HUD, or the Office of Inspector General will check the income and asset information you provide with other Federal, State, or 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 from HUD 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, AFDC 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.

(**Important Notice for Hurricane Katrina and Hurricane Rita Evacuees:** HUD's reporting requirements may be temporarily waived or suspended because of your circumstances. Contact the local housing agency before you complete the housing assistance application.)

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.
- Don't pay for anything that is not covered by your lease.
- Get a receipt for any money you pay.
- 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 HUD Office of Inspector General Hotline. You can call the Hotline toll-free Monday through Friday, from 10:00 a.m. to 4:30 p.m., Eastern Time, at 1-800-347-3735. You can fax information to (202) 708-4829 or e-mail it to Hotline@hudoig.gov. You can write the Hotline at:

HUD OIG Hotline, GFI
451 7th Street, SW
Washington, DC 20410

*Please sign the back & return with application

U.S. Department of Housing and Urban Development

Office of Public and Indian Housing (PIH)

RHIIP

RENTAL HOUSING INTEGRITY IMPROVEMENT PROJECT

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. 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/ph/rhiip/uiv.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**

APPLICATION FOR ADMISSION
PUBLIC HOUSING

RETURN APPLICATION TO:
Chilton Housing Authority
312 Bonk Street
Chilton, WI 53014

(920)849-7042 Phone
(920)849-2226 Fax

Applicant Name: _____
Address: _____
City: _____ **State:**_____ **County:** _____ **Zip:**_____
Phone: _____ **Alternate Phone:** _____
Email: _____

Personal Data/Family Composition: ***Please list your information first.***

Name First, M, Last	Social Security Number	Relationship to Head of Family	Sex	Birthplace City/State	Date of Birth	Age	Minority Code (see below) *

Minority code:
1 - White;
2 - Black;
3 - American Indian or Alaskan Native;
4 - Asian or Pacific Islander;
5 – Hispanic

- Do you anticipate any change in the number of people in the family? ____Yes ____ No

The following information is voluntary and must be asked of all applicants:

- Does any member of your family require a handicap accessible unit or any other handicap accommodations? ____ Yes ____ No
  If yes, explain: _____

_____

Resident Status:

Please check any of the following that apply to you:
___Elderly (55yr/or older)
___U.S. Veteran
___Handicap/disabled
___Working
___Victim of Domestic Violence
___Calumet County resident
___Non-county resident; resident of _____county

Present Housing Conditions and Need:	**YES**	**NO**
▪ **Involuntarily displaced (if yes, check reason)**	___	___
o Disaster, such as fire/flood, etc.	___	___
o Activity by government agency	___	___
o Activity by housing owner beyond applicant's control (Not an increase in rent)	___	___
o Abusive/threatening household member	___	___
▪ **Substandard conditions (if yes, check conditions)**		
o Home is dilapidated	___	___
o Does not have operable indoor plumbing	___	___
o Does not have electricity/inadequate electric service	___	___
o Has been declared unfit for habitation by agency of gov.	___	___

Present Housing Information: (check one)
- Living in own home ____
- Living in apartment____
- Living with friends/relatives _____
- Single family unit ____; number of persons living in unit____; number of bedrooms_____

Additional remarks: _____
_____

- Current monthly rent: $_____ **or** annual taxes $ _____
- Utilities/month: gas: _____ electric: _____ water/sewer: _____ other: _____
- Any outstanding utility charges: ___Yes ___No
  If yes, explain: _____

Current Landlord: _____
Name
_____
Address Phone

Previous Landlord: _____
Name
_____
Address Phone

Household Income: Do you receive or expect to receive any of the following:

Yes	No	Type of Income	Monthly
		Social Security	$
		SSI-Federal	$
		SSI-State	$
		Disability Benefits	$
		Unemployment	$
		Worker's Comp	$
		Pensions	$
		Retirement Benefits	$
		Annuities	$
		Life Insurance Dividends	$
		Death Benefits	$
		Alimony	$
		Child Support (if court ordered, include even if not receiving)	$
		Regular pay of member in armed forces	$
		Net Income from Rental Property	$
		Regular cash or gifts from individuals not living with you	$
		Any Work Done for Cash	$
		Other (list):	$

Current Employer: _____

Name

_____

Address Phone

Assets: Assets are items of value, other than necessary personal items, and are considered along with verified income to determine the eligibility of a household. ***Includes Trusts, 401K, etc.**

Yes	No	Type of Asset	Balance	List Financial Institute and Address
		Checking Accounts	$	
		Savings Accounts	$	
		Certificate of Deposit	$	
		Stocks	$	
		Bonds	$	
		Capital Investments	$	
		Trusts*	$	
		Securities	$	
		Insurance Settlements	$	
		401K	$	
		IRA/KEOGH Accts	$	
		Money Market Funds	$	
		Treasury Bills	$	
		Safety Deposit Box	$	
		Other	$	

Assets Continued:

- Do you own Real Estate? ___ Yes ___ No
  If yes, approximate fair market value $_____

- Do you have a mortgage on this real estate: ___ Yes ___ No
  If yes, approximate amount owed? $_____

- Has any member of your family sold/given away any real estate in the past two years? __Yes __No
  If yes, what is the current market value? $_____
  Address of property: _____

- Do you or any family member have any coin collections, antique cars, gems/jewelry, stamps or any other items **held as an investment**? ___ Yes ___ No
  If yes, approximate value $_____

Child/Adult Care Expenses:

- Do you have expenses for child care of a child aged 12 or younger? ____Yes ____No
  If yes, Name of child care provider: _____
  Address: _____ Phone: _____
  What is the weekly cost to you of the child care provider? $ _____

- Do you employ a care attendant or pay for any equipment relating to a disabled member of your household which is necessary to permit that person or someone else in the family to work?
  ____Yes ____No
  If yes, describe expense_____
  Monthly cost of expense: $_____

Other Expenses:

- Do you or any member of your household have Medicare? ____ Yes ____No
  If yes, what is the Medicare premium per month? $_____

- Do you or any member of your household have any other kind of medical insurance? __Yes __No
  If yes, monthly amt. $_____ Name of
  Insurance_____

- Do you or any member of your household receive medical assistance (MA)? ___Yes ___No

- Do you or any member of your household have any outstanding medical bills on which you are paying? ___Yes ___No
  If yes, please list: Family Member Name: _____
  Doctor/Hospital: _____
  Address_____ City _____St _____
  Monthly Payment $_____

- Does any member of your household expect to have medical expenses during the next 12 months? ___Yes __No If yes, explain: _____
  Monthly amount $_____

Drug/Criminal Activity

Federal Regulations require Housing Agencies to question applicants and participants concerning drug related or violent criminal activities.

- Have you or any member of your household been arrested or convicted of any drug or alcohol related or violent criminal activity within one year prior to date of this application? ___Yes ___No
  If yes, explain: _____

- Is the household member seeking rehabilitation services for the above named activity? _Yes _ No
  If yes, give name and address of rehabilitation center: _____

- Is any member of your household registered as a lifetime sex offender? ___Yes ___No

- Has anyone in the household been evicted from Pubic Housing or Section 8 housing for any reason including drug or other criminal activity? ___Yes ___No
  If yes, date of eviction: _____

  Name of Agency: _____
  City: _____ St: _____ Zip: _____
  Phone: _____

Screening Questions

- Are you or a current family member living in a federally subsidized or public housing? __Yes __No
  If yes, name of housing agency _____
  Address: _____ City: _____ St: _____ Phone: _____
  Date of occupancy: from_____ to _____

- Do you currently own any back rent or damages to any Public Housing or Section 8 Agency?
  ____Yes ____No **If yes,** amount owed $_____

- Have you ever participated in the certificate or voucher program? ___Yes ___No
  If yes, dates of occupancy: from_____ to_____
  Lessee/Landlord: _____

Applicant Certification

I/We certify that the information given in this application is accurate and complete to the best of my knowledge and belief. I/We understand any attempt to obtain Public Housing, any rent subsidy or rent reduction by false information, impersonation, failure to disclose or other fraud (and any act of assistance to such attempt) is a crime under Federal law. I/We also understand that all changes in the income of any family member of the household as well as any changes in the household members must be reported to the housing agency in writing within 10 days from the date of the change.

I/We also understand that the Chilton Housing Authority will conduct screening such as, but not limited to; landlord references, criminal background checks, sex offender registry checks, citizenship verification and credit checks prior to my acceptance of eligibility.

_____ _____

Head of House **Date**

_____ _____

Spouse/Co-head **Date**

Emergency Contact Name: _____

Address: _____ **City:** _____ **St:** ___ **Zip:** _____

Phone: _____