

LANDLORD VERIFICATION

То:	From:	Staunton Redevelopment and Housing Authority 900 Elizabeth Miller Gardens Staunton, VA 24401		
SUBJECT: Verification of Information Supplied by an Applicant for Housing Assistance				
NAME:				
LAST 4 OF SSN:				
ADDRESS:				
This person has applied for housing assistance under Development. We ask your cooperation in providin Authority at the address indicated above. Your proprocessing of the application for assistance. The appart as shown below.	g the follov mpt return	ving information and returning it to the Housing of this information will help to ensure timely		
	OF INFORM			
I hereby authorize my current or former landlord to payment history, damages and repairs, and addition obtained under this consent will be used to evaluate one year from the date signed, at which time a new necessary.	nal informa e my applic	tion as necessary. I understand that information ation for assistance. This release will be valid for		
Signature: Date:				
INFORMATION	ON BEING I	REQUESTED		
Date of Applicant's Tenancy				
RENT PAYMENT				
What is or was the applicant's most recent rent amo	ount owed?	\$		
Is or was the applicant current on rent?		□ Yes □ No		
Has the applicant ever been late paying their rent?		□ Yes □ No		
If yes, how often?		any days late?		
Have you ever begun eviction proceedings for nonposes the applicant have an outstanding balance due		□ Yes □ No □ Yes □ No		
If yes, how much?	_	□ 162 □ INO		



CARING FOR THE UNIT				
Does or did the applicant keep the unit clean?		□ Yes	□ No	
Has the applicant damaged the unit?		□ Yes	□ No	
If yes, describe:	_ Approximate cost of damages?			
Has the applicant paid for the damages?		□ Yes	□ No	
Will you or did you keep any security deposit? If yes, describe:		□ Yes	□ No	
Does or did the applicant have a pet?		□ Yes	□ No	
GENERAL				
Does or did the applicant permit persons other than those on the lease to live in the unit?		□ Yes	□ No	
Has or had the applicant or their family members damaged or vandalized any common areas?		□ Yes	□ No	
Does or did the applicant create any physical h residents?	azards to the project or	□ Yes	□ No	
Does or did the applicant interfere with the rig other residents?	hts and quiet enjoyment of	□ Yes	□ No	
Has or had the applicant given you any false information?		□ Yes	□ No	
Would you re-admit this applicant to your property?		□ Yes	□ No	
If no, please explain:				
ADDITIONAL INFORMATION				
If you have any additional information that you	wish to provide, use the following	g lines to d	o so. You may also attacl	
any relevant documents or additional sheets if		Ü	,	
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DEDCON CURRING INFORMATION.				
PERSON SUPPLYING INFORMATION:				
NAME:			· · · · · · · · · · · · · · · · · · ·	
TITLE:				
	ATURE:		DATE:	
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YOU DO NOT HAVE TO SIGN THIS FORM IF EITHER THE REQUESTING ORGANIZATION OR THE ORGANIZATION SUPPLYING THE INFORMATION IS LEFT BLANK.

PENALTIES FOR MISUSING THIS CONSENT:

Title 18, Section 1001 of the US. Code states that a person is guilty of a felony for knowingly and willingly making false or fraudulent statements to any department of the United States Government. HUD, the PHA and any owner (or any employee of HUD, the PHA or the owner) may be subject to penalties for unauthorized disclosures or improper uses of information collected based on the consent form. Use of the information collected based on this verification form is restricted to the purposes cited above. Any person who knowingly or willfully requests, obtains, or discloses any information under false pretenses concerning an applicant or participant may be subject to a misdemeanor and fined not more than \$5,000. Any applicant or participant affected by negligent disclosure of information may bring civil action for damages, and seek other relief, as may be appropriate, against the officer or employee of HUD, the PHA or the owner responsible for unauthorized disclosure or improper use.

Penalty provisions for misusing the social security number are contained in the Social Security Act at 208 (a) (6), (7) and (8). Violation of these provisions are cited as violations of 42 U.S.C. 408 (a) (6), (7) and (8)

We do not discriminate on the basis of disability status in the admission or access to, or treatment or employment in, our federally assisted programs and activities. If you are disabled and would like to request an accommodation or if you have difficulty understanding English, please request our assistance and we will ensure that you are provided with meaningful access based on your individual needs. Federal civil rights laws addressing fair housing prohibit discrimination against applicants or tenants based on one or more of the following classifications: race, color, national origin, sexual orientation, gender identification, disability, religion, and familial status.

