

Welcome to the Orientation for the Housing Choice Voucher
Program
presented by
The Housing
Authority of Yamhill County



What to expect.....

- This orientation will last approximately **one and a half** hours, depending on your reading pace.
 - We will be going over all documents. Please follow along with hard copy mailed to you.
- There will be a required orientation questionnaire that will need to be returned before a voucher will be issued.



General Info

- HAYC hours: Monday-Thursday 8:00am to 5:00pm
Closed to the public on FRIDAYS.
- Drop boxes (red one in outer lobby and by main door).
- Appointments with Housing Specialist needed:
 - * No walk ins/No same day appointments
 - * It can usually be handled with a call/email.
 - * Submit your documents via Rent Café
 - * How to set up an appointment...
- Oscar/Victor will be your workers until you have found a place
(more details later.)



KEEP THIS
FOR YOUR
RECORDS



KEEP THIS
FOR YOUR
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Family Obligations

The Family Obligations state the rules and responsibilities that each household member must follow while receiving Section 8 Housing Choice Voucher (Section 8) assistance. All household members must comply with these rules. A violation of any of the Family Obligations may result in termination of Section 8 assistance.

A. THE FAMILY MUST:

1. Supply any information that the HAYC or HUD determines to be necessary including evidence of citizenship or eligible immigration status, and information for use in a regularly scheduled reexamination or interim reexamination of family income and composition within the time limit set by the HAYC.
2. Disclose and verify social security numbers and sign and submit consent forms for obtaining information within the time limit set by the HAYC.
3. Supply any information requested by the HAYC to verify that the family is living in the unit or information related to family absence from the unit within the time limit set by the HAYC.
4. Promptly notify the HAYC in writing when the family is going to be away from the unit for more than 14 days.
5. Allow the HAYC to inspect the unit at reasonable times and after reasonable notice.
6. Notify the HAYC 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. Notify the HAYC in writing of the birth, adoption, or court-awarded custody of a child within 10 business days.
9. Request written approval from the HAYC prior to adding any other family member as an occupant of the unit.
10. Notify the HAYC in writing if any family member no longer lives in the unit within 10 business days of the change occurring.
11. Give the HAYC a copy of any owner eviction notice.
12. Maintain all utilities and appliances that the family is responsible for under the lease agreement.
13. If the family receives a utility allowance, all of that money must be used towards utilities outlined on the lease.
14. Report in writing any change in family size or income within 10 business days of the change occurring.

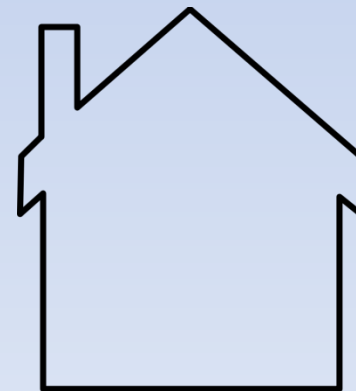
B. ANY INFORMATION THE FAMILY SUPPLIES MUST BE TRUE AND COMPLETE.

C. THE FAMILY (INCLUDING EACH FAMILY MEMBER) MUST:

1. **NOT** Own or have any interest in the unit (other than in a cooperative, or the owner of a manufactured home leasing a manufactured home space).
2. **NOT** Commit any serious or repeated violation of the lease.
3. **NOT** Commit fraud, bribery or any other corrupt or criminal act in connection with the program.
4. **NOT** Engage in drug-related criminal activity, or violent criminal activity, or other criminal activity that threatens the health, safety or right to peaceful enjoyment of other residents and persons residing in the immediate vicinity of the premises.
5. **NOT** Sublease or let the unit or assign the lease or transfer the unit.

The Family Obligations

- All adults (18 years +) are required to sign this form.
- The “do’s” and “don’ts” of the program.
- Will be re-signed at every annual.



The Family Obligations continued

- I did not know is not an excuse!
- Read the Family Obligations.
- If in doubt, ask your Housing Specialist and/or report the change in writing.



6. **NOT** Receive Housing Choice Voucher program housing assistance while receiving another housing subsidy, for the same unit or a different unit under any other Federal, State or local housing assistance program.
7. **NOT** Damage the unit or premises (other than damage from ordinary wear and tear) or permit any guest to damage the unit or premises.
8. **NOT** Receive Housing Choice Voucher program housing assistance while residing in a unit owned by a parent, child, grandparent, grandchild, sister or brother of any member of the family, unless the HAYC has determined (and has notified the owner and the family of such determination) that approving rental of the unit, notwithstanding such relationship, would provide a reasonable accommodation for a family member who is a person with disabilities.
9. **NOT** Engage in abuse of alcohol in a way that threatens the health, safety or right to peaceful enjoyment of the other residents and persons residing in the immediate vicinity of the premises.
10. **NOT** Allow non-household members to use the unit address for any purpose, including a mailing address.
11. **NOT** Allow non-household members to be in the unit more than 14 consecutive days or a total of 30 days in a twelve-month period.
12. **NOT** Engage in any threatening, abusive or violent behavior toward any HAYC personnel.
13. **NOT** Be a fugitive felon.

MANDATORY TERMINATION

D. HUD REQUIRES THE HAYC TO START THE TERMINATION PROCESS FOR THE FOLLOWING CIRCUMSTANCES.

1. The family is court evicted from an assisted unit
2. The family fails to sign and submit any consent forms they are required to sign for reexamination.
3. The family fails to submit any documentation required concerning any family member's citizenship or immigration status
4. The family fails to provide required Social Security documentation
5. If students fail to meet on-going eligibility requirements.
The items listed below require mandatory terminations and lifetime denial of assistance.
6. If any member of the family has been convicted of manufacturing or producing methamphetamine.
7. If any member of the family is required to register as a lifetime sex offender.

Warning!! TITLE 18, SECTION 1001, OF THE UNITED STATES CODE, STATES THAT A PERSON IS GUILTY OF A FELONY FOR KNOWINGLY AND WILLINGLY MAKING FALSE OR FRAUDULENT STATEMENTS TO A DEPARTMENT OR AGENCY OF THE UNITED STATES.

I do hereby swear and attest that all of the information contained in this packet about my household and myself is true and complete, and I will abide by the Family Obligations as stated above.

MANDATORY TERMINATION

HUD REQUIRES THE HAYC TO START THE TERMINATION PROCESS FOR THE FOLLOWING CIRCUMSTANCES:

- The family is court evicted from an assisted unit. (**HAYC considers an eviction to be a “sheriff lockout.”**) Note: *This definition of eviction could be different with another housing authority.*
- The family fails to sign and submit any consent forms they are required to sign for reexamination.
- The family fails to submit any documentation required concerning any family member’s citizenship or immigration status.
- The family fails to provide required Social Security documentation.
- If students fail to meet on-going eligibility requirements.

The items listed below require mandatory terminations and lifetime denial of assistance

- **If any member of the family has been convicted of manufacturing or producing methamphetamine.**
- **If any member of the family is required to register as a lifetime sex offender.**



How do I report changes?

TENANT UPDATE

WARNING! A PERSON IS GUILTY OF A FELONY FOR KNOWINGLY AND WILLINGLY MAKING FALSE OR FRAUDULENT STATEMENTS TO ANY DEPARTMENT OR AGENCY OF THE UNITED STATES.

HEAD OF HOUSEHOLD NAME: _____ SS#: _____
Name of person filling out this form if not Head of Household: _____
Signature: _____ Date: _____ Phone: _____
 Section 8 Voucher Family Self Sufficiency GRTHA Voucher Deskins Project Based

CHANGE IN ADDRESS (NOTE: A new residence must be cleared with your caseworker first)

NEW MAILING ADDRESS: _____ STREET/PO BOX _____ CITY _____ STATE _____ ZIP _____
NEW PHYSICAL ADDRESS: _____ STREET _____ CITY _____ STATE _____ ZIP _____
NEW PHONE NUMBER: _____ INTERNET EMAIL: _____

CHANGE IN EMPLOYMENT:

1) Family Member: _____
Type of Change: New Job Lost Job Increase in Pay Increase in Hours Decrease in Hours Other: _____
EMPLOYER NAME: _____ EMPLOYER PHONE: _____
EMPLOYER'S **COMPLETE** ADDRESS: _____ MAILING ADDRESS _____ CITY _____ STATE _____ ZIP _____
RATE OF PAY: \$ _____ HOURLY WEEKLY MONTHLY ONE TIME
AVG. # OF HOURS PER WEEK: _____ DATE OF CHANGE: _____

2) Family Member: _____
Type of Change: New Job Lost Job Increase in Pay Increase in Hours Decrease in Hours Other: _____
EMPLOYER NAME: _____ EMPLOYER PHONE: _____
EMPLOYER'S **COMPLETE** ADDRESS: _____ MAILING ADDRESS _____ CITY _____ STATE _____ ZIP _____
RATE OF PAY: \$ _____ HOURLY WEEKLY MONTHLY ONE TIME
AVG. # OF HOURS PER WEEK: _____ DATE OF CHANGE: _____

CHANGE IN OTHER INCOME:

Family Member: _____ Date of Change: _____
Source of Income: TANF (Welfare) Unemployment Child Support Soc. Sec. Other: _____
Amount Received: \$ _____ Weekly Monthly One Time
Type of Change: New Income Income Ended Income Increase Income Decrease Other: _____

CHANGE IN CHILD CARE:

Type of Change: New Care Provider Termination of Child Care
Name & Address of Care Provider: _____
Phone: _____ Date of Change: _____

CHANGE IN FAMILY COMPOSITION:

<input type="checkbox"/> ADD	<input type="checkbox"/> REMOVE	<input type="checkbox"/> ADD	<input type="checkbox"/> REMOVE
NAME: _____	NAME: _____	NAME: _____	NAME: _____
SOC. SEC. # _____	SOC. SEC. # _____	SOC. SEC. # _____	SOC. SEC. # _____
DATE MOVED IN/OUT _____	DATE MOVED IN/OUT _____	DATE MOVED IN/OUT _____	DATE MOVED IN/OUT _____
MALE / FEMALE _____	CITIZEN: YES / NO _____	MALE / FEMALE _____	CITIZEN: YES / NO _____
BIRTHDATE _____	BIRTHDATE _____	BIRTHDATE _____	BIRTHDATE _____
RELATIONSHIP _____	RELATIONSHIP _____	RELATIONSHIP _____	RELATIONSHIP _____

OTHER CHANGE:



The tenant update sheet (TUS). This is also known as the “blue sheet.”

Used to report ALL changes.

Attach all proof of your change, if you have it. i.e. separation letter, TANF award letter, etc.

Even if you do not have proof of your change submit a tenant update sheet!

TUS can be found:

- In the lobby at the main office
- Online on our website in our “forms” tab
- One is included in your packet

Lets talk about two of the most common changes:



Income Decreases

Income Increases



Income Decreases

Report if your income has decreased (has already happened).

The soonest the change can happen will be the first of the following month that the change was reported in.

For example: Jim loses his job and reports this to his worker on May 4th. The change will become effective on June 1st.

If HAYC does not have verification, this will DELAY your change!

BUT.....

Even if you do not have the verification, report your income decrease!

NOTE: Until you have received official word from HAYC that your income decrease has been processed and your portion of the rent has changed, continue to pay your current portion of the rent!

Income Increases

The soonest the change can happen will be the first of the following month when at **least 30 days notice** has been given to the tenant.

Examples....

Kim was at zero income, but now has started a full time job. She Reports this NEW source of income to her worker on March 15th. The soonest the change will become effective is May 1st (HAYC has to give at least 30 days notice when increasing tenant portion).

Jose and Maria have a voucher. Jose is working and this income is on file with HAYC. Maria was not working. Maria then gets a job and starts working. This family needs to report Maria's income as it is a NEW income. If the income is reported on February 20th The soonest this income increase can be effective will be April 1st.

Final thoughts on reporting changes

- Report in writing any change in family size or income **within 10 business days** of the change occurring.
- Use the Tenant Update Sheet to report ALL changes.
- If in doubt report the change.
- **Until otherwise told by HAYC, continue to pay your current portion of the rent!**
- When submitting documents make sure the head of household's name is on it.





HOUSING AUTHORITY OF YAMHILL COUNTY

INFORMAL HEARING PROCEDURES AND POLICIES

This is a 2-paged document. Please read both pages.

Discovery

When a hearing is scheduled you will also receive a Hearing Packet, which includes information and documents that will be used at the hearing. If HAYC later discovers additional information they intend to use at your hearing, these items will be provided to you promptly. *Note: If HAYC has electronic media such as video tapes, digital pictures and DVD's, along with records obtained through Oregon eCourtCase Information Network these records are not included but can be reviewed prior to the hearing. If HAYC intends to use any of these items you will find a notice in your hearing packet indicating so.*

HAYC has the right of discovery. You must provide copies of ALL documents (including review of any electronic media) you intend to use at your hearing to HAYC by no later than two business days prior to the scheduled hearing date. If you fail to do so, you will not be able to use these documents or information at the hearing.

The Hearing

You have the right to a hearing conducted by an impartial hearings officer, chosen by the Housing Authority of Yamhill County (HAYC) according to applicable HAYC policy.

You have the right to be represented by an attorney at your own expense, or any other person of your choice.

You have the right at the time of the hearing to bring and question witnesses on your behalf, to present any evidence (see "Discovery" above) or testimony, and to offer explanations or arguments.

You have the right to challenge any evidence presented by HAYC at the hearing, or the testimony of its witnesses, including the right to question them. *Note: In general, all evidence is admissible at an informal hearing. Evidence may be considered without regard to admissibility under the rules of evidence applicable to judicial proceedings.*

You have the right to provide your own interpreter or be provided with one by the Housing Authority of Yamhill County upon request before the hearing. *Note: If you require HAYC provide an interpreter please advise us no less than two business days prior to your hearing.*

HAYC has the right to have witnesses attend the hearing. These witnesses may be called to provide testimony for HAYC relevant to the issue at hand. Witnesses will only be pertinent to the situation and may include, but are not limited to, the client's current or most recent landlord.

Informal Hearings Procedure and Policies form

This two sided form is a part of an intent to terminate your assistance packet.

- Explains the process of the informal hearing or review
- As mentioned, part of a packet. Follow all instructions in packet if you are wanting to appeal decision to terminate your assistance.

Hint: Follow the family obligations and you will never see this form.

- Be honest when answering questions on packet. Answer ALL questions. Don't leave any questions blank.
- Report all changes.
- If it is determined that HAYC has overpaid do to not reporting or by omission, you will have to pay this overpayment back.
- HAYC can refer cases to the Office of the Inspector general for prosecution.

It is not worth it!



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.

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



Notice of Occupancy Rights under The Violence Against Women Act (VAWA)

These forms can also be found at:

(HUD form 5380)

<https://www.hud.gov/sites/documents/5380.docx>

(HUD form 5382):

<https://www.hud.gov/sites/documents/5382.docx>

Please note that men can also request protection under VAWA.



HAYC

HOUSING AUTHORITY OF YAMHILL COUNTY

Section 8 Subsidy Standards

This document serves as a guide to Voucher issuance or revisions. Please note: The voucher size does not dictate the size of unit the family must actually lease, nor does it determine who within a household will share a bedroom/sleeping room.

The subsidy standards must provide the smallest number of bedrooms needed to house a family without overcrowding.

Family Size <i>Regardless of sex and age</i>	Subsidy Standard for Voucher Size
1-2 people	1 bedroom
3-4 people	2 bedroom
5-6 people	3 bedroom
7-8 people	4 bedroom
9-10 people	5 bedroom

If a situation not covered by this policy occurs, it will be reviewed by a caseworker or supervisor depending on the specific circumstances and the verification provided.

HAYC may grant exceptions to this policy if the family requests, and HAYC determines, that the exception is justified by the health or disability of family members or other individual circumstance. The family must provide written documentation justifying the exception before it will be considered.

In addition, the following will apply when determining voucher size:

- A child who is temporarily (less than six months) away from home because of placement in foster care is considered a member of the family in determining family unit size.
- Foster children will be included in determining unit size only if they will be in the unit for more than 6 months.
- Space will not be provided for a family member who will be absent most of the time, such as a member who is away in the military,
- A family that consists of a pregnant women (with no other persons in the household) must be treated as a two person family.

Subsidy Standards

Please note: The voucher size does not dictate the size of unit the family must actually lease, nor does it determine who within a household will share a bedroom/sleeping room.

- You decide who sleeps in the same room.
- HAYC does not look at age/sex of persons to determine voucher size.
- HAYC follows HUD's calculation of two people to each room.

Current HAYC policy states that you can request to add people to your voucher, However.....



Subsidy Standards continued

- Adding adults to your voucher gives them legal interest in the voucher. So if something happens and there is a break up they now have as much right to the voucher as you do.
- HAYC prefers you decide who keeps the voucher in the case of a break up, but will determine who to give the voucher to if needed.



Maximum Occupancy

The Housing Quality Standards (HQS) for Section 8 require that units not be overcrowded. The maximum occupancy for assisted units is no more than two people for each bedroom/sleeping room. The actual number of bedrooms/sleeping rooms in a unit will be determined by an HQS Inspector.

Bedroom/Sleeping Rooms in Unit	Maximum # of Persons in Household
1	2
2	4
3	6
4	8
5	10
6	12

Accessible Units

If your family includes a disabled person, you may request a current listing of accessible units known to HAYC that may be available.

Release of Tenant Information/Landlord Screening

The landlord is responsible for screening and selection of the family to occupy the rental unit. HUD requires HAYC to provide prospective landlords with the family's current and prior address (as shown in HAYC records) and the name and address (if known) of the owner at the family's current and prior addresses.

It is the policy of HAYC to provide owners/landlords documented information in tenant files as it relates to tenancy history of family members. This information may include the number and dollar amount of claims paid, termination notices, or drug trafficking.

HAYC will give the same types of information to all families, and to all owners.

Maximum Occupancy

- States the max number of people who can live in a place with “x” number of bedrooms.



Although HAYC can release this information to prospective landlords, we usually don't have this information.

Payment Standards

- Voucher size is determined by number of people in household.
- Payment standards change and can go up or down.
- The payments standard is the “max” HAYC can pay on a unit.

You can choose a unit bigger or smaller Than the voucher size issued but:

- You must abide by max occupancy rules.
- Per HUD, HAYC has to use the payment standard of the **lower** of the actual unit size or the voucher size.
- If trying to get assistance on a unit more expensive than your voucher size, you will pay dollar per dollar above what the assistance does not cover but **cannot exceed 40%** of your adjusted income. If it exceeds this 40%, the unit is not affordable and HAYC will deny the unit.

SECTION 8 PAYMENT STANDARDS

0 Bedroom	1 Bedroom	2 Bedroom	3 Bedroom	4 Bedroom
\$1425	\$1530	\$1747	\$2445	\$2845

RENT CALCULATION

Under Section 8, a family's portion of rent is based on the household's income and will vary depending on the number of bedrooms in the unit, total contract rent for the unit, and the cost of the tenant paid utilities for the unit (utility allowance). The Housing Authority of Yamhill County (HAYC) calculates rent assistance amounts based on the following formulas:

PAYMENT STANDARD (based on family or unit size)

Minus 30% of household's monthly adjusted income

Equals Housing Authority rent assistance amount

- OR -

GROSS RENT (rent charged by owner plus the utility allowance)

Minus 30% of household's monthly adjusted income

Equals Housing Authority rent assistance amount

In either case, the family is required to pay at least 30% of the household's monthly adjusted income towards their portion of the rent and tenant paid utilities (or 10% of the household's monthly unadjusted income if that amount is greater).

The Housing Authority will use the formula that results in the lesser amount for the Housing Authority's portion. The family will be responsible to pay the landlord the difference between the Housing Authority rent assistance amount and the contract rent charged by the owner. *For example, if the rent amount is \$650 and the Housing Authority's portion is \$500. The family would pay the landlord \$150 for their portion.*

The Housing Authority **cannot** allow the family to enter into a new Section 8 assistance contract, if the families portion for rent and utilities is more than 40% of the household's monthly adjusted income if the gross rent is higher than the payment standard.

The rent for the unit you locate must be RENT REASONABLE. This means that the rent charged for the unit you find cannot be more than rents currently charged by the same owner for a similar unit. The rent also needs to be reasonable when compared to rents charged by other owners for similar units.



Utility Allowance

Utility Schedule	Portland General Electric (PGE)										McMinnville Water & Light (MWL)									
	APARTMENTS					HOUSES					APARTMENTS					HOUSES				
	0	1	2	3	4	1	2	3	4	5	0	1	2	3	4	1	2	3	4	5
Housing Authority of Yamhill County Effective January 2, 2022																				
1 ELECTRIC All	79	102	127	152	175	110	138	165	190	214	44	54	65	80	91	57	69	86	97	109
2 ELEC. Owner pays hot water	41	64	81	98	112						34	40	47	58	65					
3 GAS Heat	19	23	26	31	35	29	35	40	45	51	18	21	25	29	32	27	34	38	43	48
ELEC. Other	49	62	77	94	108	62	77	94	108	122	33	39	46	55	62	39	46	55	62	69
TOTAL	68	85	103	125	143	91	112	134	153	173	51	60	71	84	94	66	80	93	105	117
4 GAS Heat, Hot Water	26	33	39	47	53	39	48	56	64	72	25	32	38	44	50	38	46	54	61	69
ELEC. Other	27	32	49	56	62	32	49	56	62	68	23	25	28	33	36	25	28	33	36	35
TOTAL	53	65	88	103	115	71	97	112	126	140	48	57	66	77	86	63	74	87	97	104
5 GAS Heat, Hot Water, Cook	31	38	46	54	63	45	55	64	73	82	30	37	44	52	60	43	53	61	71	80
ELEC. Other	21	24	29	33	35	24	29	33	35	38	19	21	23	26	27	21	23	26	27	28
TOTAL	52	62	75	87	98	69	84	97	108	120	49	58	67	78	87	64	76	87	98	108
6 WOOD Heat						37	48	56	65	74						37	48	56	65	74
ELEC. Other						62	77	94	108	122						39	46	55	62	69
TOTAL						99	125	150	173	196						76	94	111	127	143
7 OIL Heat						44	58	68	78	89						46	59	70	81	92
ELEC. Other						62	77	94	108	122						39	46	55	62	69
TOTAL						106	135	162	186	211						85	105	125	143	161
8 PROPANE Heat						53	68	80	93	105						54	70	82	95	108
ELEC. Other						62	77	94	108	122						39	46	55	62	69
TOTAL						115	145	174	201	227						93	116	137	157	177
9 ELEC light, refrig, sm appliance	21	24	29	33	35	24	29	33	35	38	19	21	23	26	27	21	23	26	27	28
10 ELEC light, refrig, cook, sm appl	27	32	49	56	62	32	49	56	62	68	23	25	28	33	36	25	28	33	36	38
11 ELEC light, refrig, cook, hot water, sm appl	49	62	77	94	108	62	77	94	108	122	33	39	46	55	62	39	46	55	62	69

Stove - \$4 - Refrigerator - \$4

- Also known as the “UA.”
 - The UA changes. Numbers are not set and are updated.
 - It is an ESTIMATE of how much it costs to heat, cook, run fan, etc. in a unit. Some people may spend way over the estimate while others may spend a lot less.
 - If unit address is within the city limits of McMinnville, then the McMinnville Water & Light UA is used.
 - If the unit address is outside of McMinnville city limits, then Portland General Electric UA is used.
- Like with payment standard, HAYC has to use the UA of the **lower** of the actual unit size **or** the voucher size.

Utility Allowance Continued



The back of the UA form

WATER/SEWER/GARBAGE RATES

Effective January 2, 2022

LOCATION	BDR	Water	Sewer	Garbage	Total	LOCATION	BDR	Water	Sewer	Garbage	Total	LOCATION	BDR	Water	Sewer	Garbage	Total
Amity	1	66	69	17	152	Carlton	1	55	58	17	130	Dayton	1	59	45	17	121
	2	79	81	17	177		2	70	58	17	145		2	65	45	17	127
	3	95	94	17	206		3	96	58	17	174		3	80	45	17	142
	4	110	107	29	246		4	122	58	29	209		4	95	45	28	168
	5	127	122	29	278		5	150	58	29	237		5	112	45	28	185
Dundee	1	39	71	24	134	Grand Ronde	1	30	40	15	85	Lafayette	1	51	51	18	120
	2	53	71	24	148		2	36	40	15	91		2	60	51	18	129
	3	69	71	24	164		3	44	40	15	99		3	76	51	18	145
	4	85	71	28	184		4	52	40	23	115		4	92	51	29	172
	5	103	71	28	202		5	61	40	23	124		5	110	51	29	190
McMinnville	1	30	44	25	99	Newberg	1	34	81	24	139	Perrydale	1	N/A	N/A	15	15
	2	38	71	25	134		2	53	122	24	199		2	N/A	N/A	15	15
	3	46	101	25	172		3	74	167	24	265		3	N/A	N/A	15	15
	4	54	132	41	209		4	95	213	28	336		4	N/A	N/A	23	23
	5	63	165	41	269		5	118	264	28	410		5	N/A	N/A	23	23
Sheridan	1	25	46	16	87	Williamina	1	36	64	14	114	Yamhill	1	52	76	17	145
	2	61	46	16	123		2	39	64	14	117		2	52	76	17	145
	3	98	46	16	160		3	60	64	14	138		3	52	76	17	145
	4	136	46	27	209		4	82	64	24	170		4	52	76	29	157
	5	178	46	27	251		5	108	64	24	196		5	52	76	29	157

Flat Rate Water, & Sewer 1bed=\$25 2 bed=\$30 3 bed=\$35
Flat Rate for Garbage only 1&2 bed=\$27 3&4 bed=\$39

Flat Rate Water, Sewer, & Garbage 0 bed=\$35 1 bed=\$41 2 bed=\$54 3 bed=\$60 4 bed=\$69

- These numbers can also change.
- Water/sewer/garbage rates broken down by town.
- This makes up the TOTAL UA.
- These are average rates given by the companies.

NOTE: For flat fees, HAYC uses these numbers, NOT what the landlord charges for flat fee.



Flat rate for water and Sewer



Flat rate water, sewer, AND garbage



PORTABILITY

YOUR RIGHTS TO TRANSFER YOUR VOUCHER

As you enter the Voucher Program, we want you to be aware of your rights to transfer your voucher prior to getting your rental assistance. The ability to transfer a voucher is no longer guaranteed. As housing authorities experience funding cuts, the options for transferring your voucher to another location will depend upon the funding available at the time you request the transfer as well as the area to which you are requesting your voucher to be transferred.

TRANSFERRING YOUR VOUCHER

If you lived in Yamhill County at the time you applied for rental assistance, you may request that your Voucher be transferred to any Housing Agency in the United States that administers a Voucher program.

If you did not reside in Yamhill County at the time you applied for rental assistance you may request the same transfer options after you have lived in Yamhill County for ONE year. (If you have a disability, you may ask for an exception to this policy by requesting a reasonable accommodation.)

OTHER IMPORTANT INFORMATION REGARDING PORTABILITY

- For admission to the Voucher program you must be income eligible in the area where you initially lease a unit.
- Portability is a way to avoid living in a high poverty area. Moving to less urban areas can provide an environment of less crime, better schools, and public services.
- It is our responsibility to identify the Housing Agency that has jurisdiction over an area to which you wish to move.
- Other Housing Agencies may have different voucher payment standards, subsidy standards, income limits and screening criteria . They will provide this information to you.

List of Neighboring Housing Agencies

HA of Salem	Marion Co. HA	West Valley HA	Washington Co. HA
360 Church St. SE	2645 Portland Rd. NE Ste. 200	204 SW Walnut Ave	111 NE Lincoln St. Ste. 200-L
Salem OR	Salem OR	Dallas OR	Hillsboro OR
503.588.6368	503.798.4170	503.623.8387	503.846.4794

135 NE Dunn Place • McMinnville, OR 97128 • www.hayc.org
 Ph: 503.883.4300 • Toll Free: 888.434.6571 • Fax: 503.472.4376 • TDD: 800.735.2900

"Equal Housing Opportunity"

©:UserManual/Outbox/PPP/Portability.doc 10/18/13

Portability

Porting your voucher is the process of transferring (porting out) Your voucher from HAYC jurisdiction to another jurisdiction.

At intake, one can request to port out to any place in the United States that has a Housing Choice Voucher program, however.....

HUD allows housing authorities to set up their local restrictions to port out at intake. These restrictions at HAYC are the following...



Portability Continued

- If you **lived** (your address was in Yamhill County) at the time you applied for rental assistance, you may request to port your voucher any Housing Agency in the United States that administers a Housing Choice Voucher program.

- If you **did not** live (your address was **NOT** in Yamhill County) at the time you applied for rental assistance you may request to port out **after** you have lived in Yamhill County for **ONE year**. (If you have a disability, you may ask for an exception to this policy by requesting a reasonable accommodation).



Portability Continued

- If you are wanting to port out, submit your request **(in writing)** to HAYC as soon as possible. Include where you are wanting to port out to. Remember some places may have several housing authorities in that area (for example Marion County Housing Authority and Salem Housing Authority). If you don't put down a housing authority, HAYC will send your file to the housing authority your Housing Specialist thinks you want to port out to.
- Other Housing Agencies may have different voucher payment standards, subsidy standards, income limits and screening criteria . They will provide this information to you.

WE'RE MOVING!





TERM OF VOUCHER

INITIAL TERM

The initial term of a voucher must be at least 120 calendar days. The initial term is stated on the voucher.

EXTENSIONS OF TERM

The Housing Authority of Yamhill County (HAYC) *may* grant one or more extensions of the initial term. The initial term plus any extensions may not exceed a total period of 180 calendar days from the beginning of the initial term.

To request an extension, the voucher holder must submit a written request for an extension *prior* to the expiration date of the voucher.

Extensions are permissible at the discretion of the HAYC primarily for the following reasons:

1. A medical hardship, such as hospitalization, or a family emergency for an extended period of time which has affected the family's ability to find a unit within the initial 120 day period. Verification is required.
2. Unsuccessful attempt to find a unit, as evidenced by a rental search report from the voucher holder. The HAYC shall review the efforts the family has made to find a suitable unit, the problems the family has encountered, and determine what advice or assistance might be helpful.
3. Unlawful acts of discrimination against the voucher holder.

Extensions may be granted in one or more increments. If an extension is granted, the voucher holder will be notified in writing.

If a member of the family is a disabled person, and the family needs and requests an extension as a reasonable accommodation to make the program accessible to and usable by a family member with a disability, HAYC must extend the voucher up to 180 days from the beginning of the initial term.

Term of the voucher

- The initial term of the voucher is **120 days**.
- Once all required documents have been returned to HAYC, you will be mailed your signed voucher.
- Should you need an extension, submit (**IN WRITING**), a request for an extension **BEFORE** your voucher expires. **DO NOT CALL ASKING FOR AN EXTENSION.**
- It is recommended that a voucher extension request be submitted (in writing) at least 14 days before the voucher expires to allowing for processing.

What you should consider in locating a place to live

(This document is found on back side of Term of Voucher document)

WHAT YOU SHOULD CONSIDER IN LOCATING A PLACE TO LIVE

1. The condition of the unit. Would you be willing to live there for the next three or five years? How old is the unit? How does it look from both the outside and inside?
2. Whether the rent is reasonable. Does the rent for this unit compare to the rents charged for similar units in the neighborhood?
3. The cost of any tenant paid utilities and whether the unit is energy efficient. Are there storm windows installed? What utilities are you responsible for paying? What appliances are provided for you?
4. Where is the unit located? What schools will your children be attending? Is it near shopping? How far to medical facilities? Is the unit close to public transportation? Is it close to work?
5. How safe is the home for your family? Does there appear to be crime related activities in the area? Will you and your family feel safe here? Is the general appearance of the neighborhood good or run down?
6. What about the size of the unit - size of kitchen, bathrooms, and bedrooms - are they adequate to meet the needs of your family?
7. We encourage you to consider looking for a unit outside of areas with a high concentration of poverty with increased opportunities.

WHERE YOU CAN LIVE

You may live in Yamhill County. Yamhill County includes the following cities/zip codes.

AMITY	97101	**GRAND RONDE	97347	SHERIDAN	97378
CARLTON	97111	LAFAYETTE	97127	**WILLANIINA	97396
DAYTON	97114	MCMINNVILLE	97128	YAMHILL	97148
DUNDEE	97115	NEWBERG	97132	**GASTON	97119
**HILLSBORO	97124				

You may also qualify to use your assistance in another location. Please read the PORTABILITY page of your packet if you are interested in transferring your rental assistance.

**Gaston, Grand Ronde, Hillsboro & Willamina – Only some of the addresses in these areas are considered within Yamhill County boundaries. Please contact your Section 8 Caseworker for further clarification.

HAYC suggests that you:

- Find a place you see yourself staying long term.
- Drive by a unit several times (during the day then during the night/on a weekday then on a weekend. This way you see the culture of the neighborhood).
- If possible, lease up in place (where you currently live). This way you don't have to worry about deposits or moving!

Question: Where can you use the voucher?

Answer: Anywhere in Yamhill County!!

A Good Place to Live

You have a hard copy of this form, but can also be found here:

https://www.hud.gov/sites/documents/DOC_11735.PDF

Use this form as a template to see what the inspector looks for if you are trying to lease up in place.



Protect Your Family From Lead in Your Home

You have a hard copy of this form, but can also be found here:

<https://www.epa.gov/sites/production/files/2020-02/documents/lead-in-your-home-brochure-book-bw-2020-508.pdf>



Are You a Victim of Housing Discrimination?

You have a hard copy of this form, but can also be found here:

https://www.hud.gov/sites/documents/DOC_12150.PDF

HAYC can not help with legal questions!

Other resources that may be able to help you:

Fair Housing Council of Oregon:

<http://fhco.org/>

Oregon Law Center:

McMinnville office- 503-472-9561

Hillsboro (main office)- 503-640-4115



Housing Assistance Payments Contract

You have a hard copy (tenant section) of this form, but the complete contract can be found here:
<https://www.hud.gov/sites/documents/52641.PDF>

Once you find a place and all contracts have been signed. You will get complete/signed copies.



HAYC & Subsidized Apartments

You do NOT need to rent from anyone on this list. It is for your reference only.

The dark or “grayed out” places are HAYC owned properties. Reach out the property landlord to apply for any of these units.

This is NOT a complete list of agents/landlords/apartments in our area.



HAYC & SUBSIDIZED APARTMENTS

Code Key

SUB - Subsidized	H - Handicap Accessible	S - Senior	D - Disabled	F - Farm Worker	RD - Rural Development
*Safety Available for Current Tenants Only		*Developmental Disability Only			

Code	Bdms	Complex Name	Address	Contact	Unit
F	2-4	Abbey Heights (HAYC)	219 1 st St., Lafayette	503-844-6006	30
H	2	Canyon Ridge Apts	401 S Evers Rd., Newberg	503-537-3365	63
H	2	Chardonnay Apts	600 SW Mill St., Sheridan	503-843-2383	64
H	1-2	Chehalam Creek Apts	611 S Blaine St., Newberg	871-470-9770	32
SUB/HRD	1-3	Deborah Court Apts	1412 Deborah Rd., Newberg	503-538-8629	40
H	1-3	Deukas Commons (HAYC)	1103 N Meidan St., Newberg	503-867-2822	50
SUB/H	1-3	Dunhill Apts	150 SW 11 th St., Dundee	503-537-3315	28
SUB/FRD	2-4	Fresca Park (HAYC)	695 Ferry, Dayton	503-844-4292	22
H	1-2	Haworth Terrace (HAYC)	2700 Haworth Ave., Newberg	503-538-2922	38
S	1-2	Heritage Place (HAYC)	2915 NE Herdree, McMinnville	503-434-1203	63
SUB/HRD	1-3	Jansina Park Apts	1750 SW Sesame St., McMinnville	503-472-1044	36
SUB/DND	1-2	Newbern Village	1200 N Springbrook Rd., Newbern	503-538-8626	30
SUB/HSUB/DRD	1-2	Oxbards Place	1310 NE 27 th , McMinnville	503-472-1862	60
SUB/HSUB/DRD	1-2	Palmer Creek (HAYC)	200 Mill Street, Dayton	503-844-4292	10
H	2	Park Place Apts	292 SE Evans St., McMinnville	503-436-2110	38
H	1-3	Parkview Terrace	204 Elmwood Ave., McMinnville	503-472-4448	46
H	2-3	Redwood Commons	2181 NE Lafayette Bldg 901, McMinnville	503-472-6500	64
H	2	Rhoda Anne Apts	2302 NE Evans, McMinnville	503-434-8555	26
SUB/HSUB/DRD	1-2	Riverside Terrace (HAYC)	200 SE Riverside Dr., Sheridan	503-843-3807	27
HSUB	0-2	Rose Park Apts	179 SW 7 th , Dundee	503-537-4028	45
SUB/HRD**	1	Sprinkbrook Place	1109 Middlebrook Dr., Newbern	503-487-6222	15
H	2-3	Sunflower (HAYC)	267 NE May Lane, McMinnville	503-883-2685	33
H	2-3	Vice Park (HAYC)	2965 NE Evans, McMinnville	503-472-6668	38
H	2	Lower Center Apts	1500 NE 27 th , McMinnville	503-434-1375	52
SUB/FRD	2-4	Trillium Square Apts	601 Pecan Ct., Newberg	503-538-6699	52
SUB/FRD	2-4	Villa Del Sol	135 NE May Lane, McMinnville	503-472-4391	25
SUB/H	1-3	Villa West Apts	201 SW Apea, McMinnville	503-472-1158	48
HS	1-2	Village Quarter (HAYC)	383 NE Pine, McMinnville	871-287-8282	40
SUB/HSUB/DRD	1-2	Viviana Square (HAYC)	3300 Viviana Way, Newberg	503-538-3886	43
SUB/HSUB/DRD	1-2	Wilamette Place Apts	1925 NE McDonald Ln., McMinnville	503-472-0397	48
SUB/HS	1-3	Wilamette Villa	130 NE 1 st St., Williams	503-478-2557	74
SUB/HS	2	Woodside Park (HAYC)	802 E 6 th , Newberg	503-538-8326	54
H	1-2	Woodview Village	1210 S College, Newberg	503-538-1616	82

LEASING AGENTS

Chehalam Property Management	2303 D Portland Rd., Newberg	503-554-0016
Duckett Realty Inc.	810 NE Hwy 99 W Suite C, McMinnville	503-472-2172
RB & BA Fowler Trust	1500 NW Wagoner Dr., Dundee	503-538-4118
Trimble Rentals for McMinnville	P.O. Box 10, Sandy OR 97055	503-288-7456
Wilamette Rentals	P.O. Box 216, McMinnville	503-472-2726

LANDLORDS

Aaron Properties	503-843-2368	Don Leard	503-560-1622
Crown Hill Farm	503-472-2466	Darryl Reibold	503-435-8940
Gene Bell	503-462-3106	Trimble Rentals	503-288-7456
David Bunn	503-714-4263	Mike Ramesso	503-660-2330
Brian Burgham	503-472-8626	Vivian Merrit	503-538-8626
Georgia Properties	503-435-3661	Susan Moe	503-561-6886

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Calculation Worksheet

HCV CALCULATION WORKSHEET

TENANT: _____ DATE: _____
 FAMILY TYPE: E D F PREPARED BY: _____
 HR Eligible for ___ Size Issued ___ Limit size ___ RA? Y N Special Program: _____
 Action Type: NEW REEXAM INTERIM LLRENTING HH-ADD/RMVL PORT IN MOVE EFF DATE: _____

Name of head of household and any special Program. Also family type (elderly/disabled/family)

INCOME/ASSETS Add or Remove:

ASSET	V-Date	AMOUNT	CALC (%)	ANNUAL AMT
TOTAL ASSETS		ACTUAL INCOME		
(If > \$5000 x 0.025)		IMPUTED INCOME		
		ASSET INCOME (1)		

Any assets you have and any income counted from those assets

INCOME

SOURCE	VERIFY DATE	CALCULATION	ANNUAL AMT
TOTAL INCOME			(2)
TOTAL GROSS INCOME (1 - 2)		3% OF GROSS INCOME	

All household income counted. Income was calculated based on what YOU provided.

ALLOWANCES

TYPE (MED/CHILD CARE)	SOURCE	VERIFY DATE	CALCULATION	ANNUAL AMOUNT
#DEPENDENTS ____	ED/II ALLOWANCE		TOTAL ELDO/PT	DEDUCT.
TOTAL MED EXP ____		TOTAL DEDUCTIONS		
Gross Income ____		- DEDUCTIONS		- ADJ. INC.
AMI: ____		TTP		←

Any deductions go here.

Adjusted Income / 12 = AMI

Gross income – Deductions = Adjusted Monthly Income (AMI)

AMI * 30% = Total Tenant Payment (TTP)

TENANT PAID UTILITIES: ELEC, ELEC, GAS, OIL, WOOD, WATER, SEWER, GARB, OTHER _____
 AMOUNTS: ELEC \$ _____ GAS \$ _____ OIL \$ _____ WOOD \$ _____ WATER \$ _____ SEWER \$ _____ GARBAGE \$ _____
 STOVE \$ _____ REFER \$ _____ OTHER \$ _____ Flat rate w / s / g _____
 TR \$ _____ UTILS USED _____ VPS / GR _____ CONTRACT RENT \$ _____
 HAP \$ _____ Unit location & type: _____ #BR _____ TOTAL UTILITIES \$ _____
 L.A.P \$ _____ GROSS RENT \$ _____
 RA: Y ___ N ___ Explanation: _____ T's VPS \$ _____

This will be completed once a unit is found

Download the Free Assistance Estimator from www.happysoftware.com and let your computer do the calculations for you.

Enter Data

Family Name _____
 Monthly Adjusted Income _____
 Payment Standard _____
 TTP _____
 Utility Allowance _____
 Rent to Owner _____

Calculations

Gross Rent (Rent to Owner + Utility Allowance) _____
 Actual Payment Standard (Lower of Payment Standard and Gross Rent) _____
 Maximum Subsidy (Actual Payment Standard - T.T.P.) _____
 Gross Rent Less Maximum Subsidy (Gross Rent - Maximum Subsidy) _____
 Gross Rent Less Contribution (Gross Rent - Gross Rent Less Maximum Subsidy) _____
 Total Voucher Subsidy (Lower of Maximum Subsidy and Gross Rent Less Contribution) _____

Totals

HAP to Owner (Lower of Rent to Owner and Total Voucher Subsidy) _____
 Family Rent to Owner (Rent to Owner - HAP to Owner) _____
 TR to Tenant (Total Voucher Subsidy - HAP to Owner) _____
 Total Family Contribution (Gross Rent Less Maximum Subsidy) _____
 Percentage of Adjusted Income (Total Family Contribution ÷ Monthly Adjusted Income) _____

Maximum Amounts

Maximum Family Contribution (Monthly Adjusted Income x .10) _____
 Maximum Rent to Owner _____

HAPPY Estimator

-This form is an ESTIMATE of the max rent you should be looking for.

-This form is only an estimation. It is not exact.

-Monthly Adjusted Income = AMI (They are the same thing).

-Payment standard= Based off the voucher size issued to you.

-TTP= your Total Tenant Payment per the calculation worksheet from previous slide.

-Utility Allowance= Is a best estimate based on your address at intake (In McMinnville or outside of city limits) and number of bedrooms of the voucher. **This number is an estimate**

Try to find a place at or below the Max Rent to Owner. Remember that this is an ESTIMATE ONLY

If you need an Estimate

Your worker needs the following information:

- Unit size (number of bedrooms)
- Unit location (and addressed if known)
- Requested rent amount
- Type of unit (Apartment/Duplex/House)
- What utilities (and energy source they are) you are responsible for.
- Any flat fees charged for utilities and what it covers.

It is preferred you email this information to your Housing Specialist

Voucher

(only page one is shown)

Voucher Housing Choice Voucher Program

U.S. Department of Housing
and Urban Development
Office of Public and Indian Housing

OMB No. 2577-0169
(exp. 07/31/2022)

Public Reporting Burden for this collection of information is estimated to average 0.05 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. This agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless that collection displays a valid OMB control number. Assurances of confidentiality are not provided under this collection. This collection of information is authorized under Section 8 of the U.S. Housing Act of 1937 (42 U.S.C. 1437f). The information is used to authorize a family to look for an eligible unit and specifies the size of the unit. The information also sets forth the family's obligations under the Housing Choice Voucher Program.

Privacy Act Statement. The Department of Housing and Urban Development (HUD) is authorized to collect the information required on this form by Section 8 of the U.S. Housing Act of 1937 (42 U.S.C. 1437f). Collection of family members' names is mandatory. The information is used to authorize a family to look for an eligible unit and specifies the size of the unit. The information also sets forth the family's obligations under the Housing Choice Voucher Program. HUD may disclose this information to Federal, State and local agencies when relevant to civil, criminal, or regulatory investigations and prosecutions. It will not be otherwise disclosed or released outside of HUD, except as permitted or required by law. Failure to provide any of the information may result in delay or rejection of family voucher issuance.

Please read entire document before completing form
Fill in all blanks below. Type or print clearly.

Please read entire document before completing form Fill in all blanks below. Type or print clearly.		Voucher Number
1. Insert unit size in number of bedrooms. (This is the number of bedrooms for which the Family qualifies, and is used in determining the amount of assistance to be paid on behalf of the Family to the owner.)		1. Unit Size
2. Date Voucher Issued (mm/dd/yyyy) Insert actual date the Voucher is issued to the Family.		2. Issue Date (mm/dd/yyyy)
3. Date Voucher Expires (mm/dd/yyyy) must be at least sixty days after date issued. Voucher is issued. (See Section 6 of this form.)		3. Expiration Date (mm/dd/yyyy)
4. Date Extension Expires (if applicable)(mm/dd/yyyy) (See Section 6. of this form)		4. Date Extension Expires (mm/dd/yyyy)
5. Name of Family Representative	6. Signature of Family Representative	Date Signed (mm/dd/yyyy)
7. Name of Public Housing Agency (PHA)		
8. Name and Title of PHA Official	9. Signature of PHA Official	Date Signed (mm/dd/yyyy)

1. Housing Choice Voucher Program

- A. The public housing agency (PHA) has determined that the above named family (item 5) is eligible to participate in the housing choice voucher program. Under this program, the family chooses a decent, safe and sanitary unit to live in. If the owner agrees to lease the unit to the family under the housing choice voucher program, and if the PHA approves the unit, the PHA will enter into a housing assistance payments (HAP) contract with the owner to make monthly payments to the owner to help the family pay the rent.
- B. The PHA determines the amount of the monthly housing assistance payment to be paid to the owner. Generally, the monthly housing assistance payment by the PHA is the difference between the applicable payment standard and 30 percent of monthly adjusted family income. In determining the maximum initial housing assistance payment for the family, the PHA will use the payment standard in effect on the date the tenancy is approved by the PHA. The family may choose to rent a unit for more than the payment standard, but this choice does not change the amount of the PHA's assistance payment. The actual amount of the PHA's assistance payment will be determined using the gross rent for the unit selected by the family.

2. Voucher

- A. When issuing this voucher the PHA expects that if the family finds an approvable unit, the PHA will have the money available to enter into a HAP contract with the owner. However, the PHA is under no obligation to the family, to any owner, or to any other person, to approve a tenancy. The PHA does not have any liability to any party by the issuance of this voucher.
- B. The voucher does not give the family any right to participate in the PHA's housing choice voucher program. The family becomes a participant in the PHA's housing choice voucher program when the HAP contract between the PHA and the owner takes effect.
- C. During the initial or any extended term of this voucher, the PHA may require the family to report progress in leasing a unit at such intervals and times as determined by the PHA.

1= Your unit size (number of bedrooms) issued.

2= Date voucher issued (this date will be filled in once HAYC signs and mails your voucher back to you).

3= Date your voucher expires (This date will be 120 calendar days from issue date).

4= Extension date. This will be completed if a voucher extension is approved.

5= Name of the head of household.

6= Signature/date line.

7= Public Housing Agency (PHA). It is HAYC.

8= Name of PHA official.

9= Signature/date line of PHA official.

Sign/date and return your voucher to HAYC

How Do I Calculate My Portion of the Rent?

Example 1:

Mark has a two-bedroom voucher. He finds a one bedroom he would like to rent. The unit is in Newberg. The requested rent is \$1475. Let's assume the unit is an apartment and the utility allowance is \$102. Mark's TTP is calculated at \$300. Let's calculate portions now:

Payment standard= **\$1530**

$$\begin{array}{r} 1475 \text{ (Requested rent)} \\ + \quad 102 \text{ (UA)} \\ \hline \mathbf{\$1577} \text{ (Gross rent)} \end{array}$$

(Remember that although Mark has a two bedroom voucher, HAYC has to use the lower of the actual unit size and the voucher bedroom size.)

So which number do we use? **\$1530** or **\$1577**?.....

Per program policy the lower of the GROSS RENT and the PAYMENT STANDARD has to be used to calculate portions.

In this case we will use the **PAYMENT STANDARD of \$1530**

How Do I Calculate My Portion of the Rent continued...

Mark has a two-bedroom voucher. He finds a one bedroom he would like to rent. The unit is in Newberg. The requested rent is \$1475. Let's assume the unit is an apartment and the utility allowance is \$102. Mark's TTP is calculated at \$300. Let's calculate portions now:

$$\begin{array}{r} \$1530 \text{ (Payment standard)} \\ - \quad 300 \text{ (TTP)} \\ \hline \underline{\$1230} \text{ (Housing Assistance Payment ((HAP))} \end{array}$$

Now let's calculate Mark's portion...

$$\begin{array}{r} \$1475 \text{ (Request rent)} \\ - \quad \$1230 \text{ (HAP)} \\ \hline \underline{\$245} \text{ (Mark's Portion)} \end{array}$$

$$\begin{array}{r} \$1230 = \text{HAP} \\ + \\ \$245 = \text{Mark's portion} \\ \hline \underline{\$1475 = \text{Requested rent}} \end{array}$$

How Do I Calculate My Portion of the Rent continued...

Mark has a two-bedroom voucher. He finds a one bedroom he would like to rent. The unit is in Newberg. The requested rent is \$1475. Let's assume the unit is an apartment and the utility allowance is \$102. Mark's monthly adjusted income is \$1000 Mark's TTP is calculated at \$300.

Question: What are we missing still?

Answer: We need to account for the utility allowance.

We do this by adding the utility allowance with tenants' portion of the rent:

Mark's Portion:	\$245
Utility Allowance:	\$102
Total family contribution:	\$347

Lastly, we need to see if this unit is affordable

How Do I Calculate My Portion of the Rent continued...

Mark has a two-bedroom voucher. He finds a one bedroom he would like to rent. The unit is in Newberg. The requested rent is \$1475. Let's assume the unit is an apartment and the utility allowance is \$102. Mark's monthly adjusted income is \$1000 Mark's TTP is calculated at \$300.

For HAYC: A family's total family contribution (their portion of the rent plus the utility allowance) cannot exceed **40%** of the monthly adjusted income.

40% of \$1000: \$400

Total family contribution: \$347

Since the total family contribution of \$347 is less than \$400, this unit is affordable to tenant

How Do I Calculate My Portion of the Rent?

Example 2:

Riley has a three-bedroom voucher. She finds a three bedroom HOUSE she would like to rent. The unit is in Newberg. The requested rent is \$1875. Let's assume the utility allowance is \$430. Riley's TTP is calculated at \$600. Let's calculate portions now:

Payment standard= **\$2445**

$$\begin{array}{r} 1875 \text{ (Requested rent)} \\ + \quad 430 \text{ (UA)} \\ \hline \mathbf{\$2305} \text{ (Gross rent)} \end{array}$$

So which number do we use? **\$2445** or **\$2305**?.....

Per program policy the lower of the GROSS RENT and the PAYMENT STANDARD has to be used to calculate portions.

In this case we will use the **GROSS RENT of \$2305**

How Do I Calculate My Portion of the Rent continued...

Riley has a three-bedroom voucher. She finds a **three** bedroom HOUSE she would like to rent. The unit is in Newberg. The requested rent is \$1875. Let's assume the utility allowance is \$430. Riley's TTP is calculated at \$600. Let's calculate portions now:

$$\begin{array}{r} \$2305 \text{ (Gross rent)} \\ - \quad 600 \text{ (TTP)} \\ \hline \underline{\$1705} \text{ (Housing Assistance Payment ((HAP))} \end{array}$$

Now let's calculate Riley's portion...

$$\begin{array}{r} \$1875 \text{ (Request rent)} \\ - \quad \$1705 \text{ (HAP)} \\ \hline \underline{\$170} \text{ (Riley's Portion)} \end{array}$$

$$\begin{array}{r} \$1705 = \text{HAP} \\ + \\ \$170 = \text{Riley's portion} \\ \hline \underline{\$1875 = \text{Request rent}} \end{array}$$

How Do I Calculate My Portion of the Rent continued...

*Riley has a three-bedroom voucher. She finds a **three** bedroom HOUSE she would like to rent. The unit is in Newberg. The requested rent is \$1875. Let's assume the utility allowance is \$430. Riley's monthly adjusted income is \$2000. Riley's TTP is calculated at \$600. Let's calculate portions now:*

Question: What are we missing still?

Answer: We need to account for the utility allowance.

We do this by adding the utility allowance with tenants' portion of the rent:

Riley's Portion:	\$170
Utility Allowance:	\$430
Total family contribution:	\$600

Lastly, we need to see if this unit is affordable

How Do I Calculate My Portion of the Rent continued...

*Riley has a three-bedroom voucher. She finds a **three** bedroom HOUSE she would like to rent. The unit is in Newberg. The requested rent is \$1875. Let's assume the utility allowance is \$430. Riley's monthly adjusted income is \$2000. Riley's TTP is calculated at \$600. Let's calculate portions now:*

For HAYC: A family's total family contribution (their portion of the rent plus the utility allowance) cannot exceed **40%** of the monthly adjusted income.

40% of \$2000: \$800

Total family contribution: \$600

Since the total family contribution of \$600 is less than \$800, this unit **is affordable** to tenant

**Request for Tenancy Approval
Housing Choice Voucher Program (Section 8)**

Head of Household Name _____
 Voucher Issuance Date _____ Voucher Expiration Date _____
 Housing Specialist _____
 Unit Code _____ Pass Date _____

To Be Completed By Owner or Owner's Authorized Agent

Please complete all blanks and sign at the bottom. Failure to do so will result in a delay in processing time.

Unit Information	
Address of rental unit:	Complex/Community Name:
Number of Bedrooms:	Approx Square Footage: Year Built: Rent Requested: Deposit Amount:
Date Available for Inspection:	Tenant Currently Living in Unit: <input type="checkbox"/> Yes <input type="checkbox"/> No If No, Anticipated Move In Date:
Type of Unit: <input type="checkbox"/> House <input type="checkbox"/> Duplex <input type="checkbox"/> Manufactured Home <input type="checkbox"/> Apartment <input type="checkbox"/> Studio <input type="checkbox"/> Other:	
Are you related to any member of the household? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, who and how:	
Utilities and Appliances	Check Appropriate Box
Item Fuel Type	Paid/Provided by: Flat Rate Fee Charged to Tenant?
Heating <input type="checkbox"/> Electric <input type="checkbox"/> Gas <input type="checkbox"/> Oil <input type="checkbox"/> Other:	<input type="checkbox"/> Tenant <input type="checkbox"/> Landlord <input type="checkbox"/> Yes <input type="checkbox"/> No
Water Heating <input type="checkbox"/> Electric <input type="checkbox"/> Gas <input type="checkbox"/> Oil <input type="checkbox"/> Other:	<input type="checkbox"/> Tenant <input type="checkbox"/> Landlord <input type="checkbox"/> Yes <input type="checkbox"/> No
Cooking <input type="checkbox"/> Electric <input type="checkbox"/> Gas <input type="checkbox"/> Oil <input type="checkbox"/> Other:	<input type="checkbox"/> Tenant <input type="checkbox"/> Landlord <input type="checkbox"/> Yes <input type="checkbox"/> No
Other Electric	<input type="checkbox"/> Tenant <input type="checkbox"/> Landlord <input type="checkbox"/> Yes <input type="checkbox"/> No
Water	<input type="checkbox"/> Tenant <input type="checkbox"/> Landlord <input type="checkbox"/> Yes <input type="checkbox"/> No
Sewer	<input type="checkbox"/> Tenant <input type="checkbox"/> Landlord <input type="checkbox"/> Yes <input type="checkbox"/> No
Garbage	<input type="checkbox"/> Tenant <input type="checkbox"/> Landlord <input type="checkbox"/> Yes <input type="checkbox"/> No
Refrigerator	<input type="checkbox"/> Tenant <input type="checkbox"/> Landlord <input type="checkbox"/> Yes <input type="checkbox"/> No
Range	<input type="checkbox"/> Tenant <input type="checkbox"/> Landlord <input type="checkbox"/> Yes <input type="checkbox"/> No
Optional Provisions: (please provide any additional provisions to be included on the lease, or attach your lease)	
1. _____	4. _____
2. _____	5. _____
3. _____	6. _____

Owner's Certifications

A: By executing this request, the owner certifies that: The most recent rent charged for the above unit was \$ _____ per month. This rent amount included the following utilities:

_____ The reason for any differences between the prior rent and the proposed rent is: _____

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.

D: The PHA has not screened the family's behavior of suitability for tenancy. Such screening is the responsibility of the owner.

E: The PHA will arrange for inspection and notify the owner and family as to whether or not the unit has passed inspection. HAYC cannot pay on the unit until it has passed inspection, the rent is approved the family has gotten taken possession, and the voucher issuance day has passed.

Contact Information	
Are you a new owner/manager with the Section 8 program? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Owner Name:	Manager/Agent Name (if applicable):
Owner Address:	Manager/Agent Address:
Owner Phone Number:	Manager/Agent Phone Number:
Owner Email:	Manager/Agent Email:
Make Checks Payable To:	
Send Correspondence To:	
Signature of Owner or Manager/Agent:	

Housing Authority Client- Please Complete Other Side

Request for Lease Approval form

Also known as the "green sheet"

Once you have been **APPROVED** for a unit, both you and your landlord will complete this form.

The potential landlord will complete the front part of the green sheet. NOTE: Make sure that the landlord completes the front of the form in its entirety and that they sign/date it!

Do **not** complete or have a landlord complete this form until you have been **APPROVED** for the unit.

IMPORTANT: You will receive a green sheet once all required documents have been returned to HAYC. This will come with your signed (by HAYC) voucher.

Request for Lease Approval form

- You will complete this side (the back side).

- **Make sure you complete and sign!!!**

Once **BOTH** sides of the green sheet have been completed, return the green sheet to HAYC.

Note: Until further notice, you can return the green sheet via email/fax/mailed/dropped off at the drop box.

What to expect once you have submitted the green sheet....

To Be Completed By Housing Authority Client

Please complete all blanks and sign at the bottom. Failure to do so will result in a delay in processing time.

Unit to be Occupied by: (list full names and ages of everyone who will be living in the unit)			
Name:	Age:	Name:	Age:
Name:	Age:	Name:	Age:
Name:	Age:	Name:	Age:
Name:	Age:	Name:	Age:
Name:	Age:	Name:	Age:

Current Address: _____

Phone: _____ Email: _____

Head of Household Signature: _____ Date: _____

Request for Tenancy Approval Housing Choice Voucher Program

ABOUT THIS FORM

This form must be completed for all potentially assisted units. Unit owners and prospective tenants must each complete their portion. **Please ensure you have completed all applicable areas of the form, including signing it. We cannot process the form until it has been completed and signed.** Once completed this form must be returned to the Housing Authority of Yamhill County. If you have any questions regarding this form please contact our office at 503-883-4300.

UNIT INSPECTION/RENT REASONABLE

HAYC must inspect each rental unit to ensure it meets Housing Quality Standards and determine the rent requested is reasonable. If the unit fails inspection, the owner must call when repairs are done, so a check back inspection can be scheduled.

LEASE AND CONTRACT

The Lease and Housing Assistance Payment (HAP) Contract cannot go into effect until the unit passes inspection, the rent is approved, the client has taken possession of the new unit and their voucher issuance date has passed. The Lease is signed by the Tenant and the Landlord. The Contract is signed by the Landlord and HAYC. Payment can only be processed after these documents are signed, and the landlord has completed needed forms to get set up with our Accounting Department. Direct deposits are generally sent on the first of the month but mid-month payments can be made if all items are complete by the accounting deadline. More detailed information regarding the Lease and Contract can be obtained by requesting the **Landlord Information Packet** from HAYC.

TAX ID NUMBERS

Section 6109 of the Internal Revenue Code requires the Housing Authority of Yamhill County to report Housing Assistance Payments paid to **owners** to the IRS. Before we can approve a lease, the owner must complete a W-9 and provide HAYC with either a Tax ID Number or a Social Security Number for the **payee (the person who will be receiving the check)** whether or not the owner is required to file a return.

RELEASE OF INFORMATION

The Housing Authority of Yamhill County (HAYC) can provide owners with the family's current address (as shown in our records); and the name and address (if known) of the landlord at the family's current and prior address. It is the policy of the HAYC to provide the owner/landlord documented information in the tenant file as it relates to tenancy history of family members. This information may include the number and dollar amount of claims paid, termination notices, or drug trafficking.

Thank you for joining us in our efforts to provide decent, affordable housing for families in Yamhill County.

Sincerely,

Housing Authority of Yamhill County Staff

*Public reporting burden for this collection of information is estimated to average .08 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. This agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless that collection displays a valid OMB control number. Eligible families submit this information to the Public Housing Authority (PHA) when applying for housing assistance under Section 8 of the U.S. Housing Act of 1937 (42 U.S.C. 1437f). The PHA uses the information to determine if the family is eligible, if the unit is eligible, and if the lease complies with program and statutory requirements. Responses are required to obtain a benefit from the Federal Government. The information requested does not lend itself to confidentiality.

Request for Lease Approval form continued

Once the completed green sheet has been **RECEIVED** by HAYC it takes 2-5 business days to process it.

It can take up to 14 calendar days to get the unit inspected.

NOTE: When the unit is available for inspection and landlord follow up with HAYC's request for an inspection factor into when the unit will be inspected.

While the green sheet is being processed by HAYC, your voucher expiration date is in suspension or "frozen." If HAYC has to deny your green sheet, you will get this time back (more on this in a couple of slides).

Request for Lease Approval form continued

HAYC needs to make sure that green sheet passes three “tests.” These “tests” are: The unit is affordable, the unit is rent reasonable, and the unit passes inspection.

In order to move forward, the unit must “pass” all of the above “tests.”

Lets take a look at these
tests...

Request for Lease Approval form continued

- Affordability : If the tenant portion is more than 40% of monthly adjusted income, then the unit is **NOT** affordable and HAYC can not assist on the unit.
- Rent Reasonableness : This ensures that rents charged by owners to program participants are reasonable. HAYC will compare the requested rent for the unit to rents for similar unassisted units in the marketplace.
- Inspection: Used to ensure that a property meets HUD's Housing Quality Standards (HQS).

What happens if one of the above does not pass? Then what?

Per program policy, HAYC has to deny this green sheet and re-issue you another one as for you to search for another unit.

Request for Lease Approval form continued

So my unit is affordable, rent reasonable, and it passed inspection! Now what?

Assistance can begin the LATER of:

- When the unit passes inspection
 - When you take possession of the unit
- or
- Assistance from another agency has ended

Remember assistance can begin the LATER of the above three.

Request for Lease Approval form continued

If HAYC has to deny the green sheet and re-issue you another one, program policy states that HAYC has to give you the time back. This time is called tolling.

Along with another green sheet, you will get a letter letting you know of this action and a revised voucher with tolling added back to your expiration date.

Some final words on green sheets and the process....

Request for Lease Approval form continued

- Once the final test (inspection) has passed. All calculations will be confirmed and your file will be forwarded to your long term Housing Specialist.
- Reach out to HAYC once you have taken possession of the unit.
- HAYC does not assist with any kinds of move in costs or deposits. Any monies asked to take possession of the unit are considered move in costs.
- It is strongly recommended that you do **NOT** pay any deposits or move in fees until HAYC has approved the unit. If you move in to a unit prior to it passing all three of the tests, you are responsible for all monies owed until assistance can start.
- Should you lose your green sheet or it is destroyed, let HAYC know you need another green sheet. Remember that reporting this needs to be done in writing (email/fax also works).

Request for Lease Approval form continued

REMEMBER...

COMPLETE the back side of the form!!!

IF HAYC receives this form and you have **NOT** completed the back of the form, this process may be delayed until you complete this side.

Lead Based Paint Disclosure form

- This form is stapled to the green sheet.
- Required to be completed and returned if the unit you are trying to be assisted in was built **prior** to 1978.
- General rule of thumb: If the landlord completes and signs the form (even if the unit was built after 1978), you also sign/date and return the form.

Disclosure of Information on Lead-Based Paint and/or Lead-Based Paint Hazards

Lead Warning Statement
Housing built before 1978 may contain lead-based paint. Lead from paint, paint chips, and dust can pose health hazards if not managed properly. Lead exposure is especially harmful to young children and pregnant women. Before renting pre-1978 housing, lessors must disclose the presence of known lead-based paint and/or lead-based paint hazards in the dwelling. Lessees must also receive a federally approved pamphlet on lead poisoning prevention.

Lessor's Disclosure

(a) Presence of lead-based paint and/or lead-based paint hazards (check (i) or (ii) below):

(i) Known lead-based paint and/or lead-based paint hazards are present in the housing (explain).

(ii) Lessor has no knowledge of lead-based paint and/or lead-based paint hazards in the housing.

(b) Records and reports available to the lessor (check (i) or (ii) below):

(i) Lessor has provided the lessee with all available records and reports pertaining to lead-based paint and/or lead-based paint hazards in the housing (list documents below).

(ii) Lessor has no reports or records pertaining to lead-based paint and/or lead-based paint hazards in the housing.

Lessee's Acknowledgment (initial)

(c) Lessee has received copies of all information listed above.

(d) Lessee has received the pamphlet *Protect Your Family from Lead in Your Home*.

Agent's Acknowledgment (initial)

(e) Agent has informed the lessor of the lessor's obligations under 42 U.S.C. 4852d and is aware of his/her responsibility to ensure compliance.

Certification of Accuracy
The following parties have reviewed the information above and certify, to the best of their knowledge, that the information they have provided is true and accurate.

_____ Lessor	_____ Date	_____ Lessor	_____ Date
_____ Lessee	_____ Date	_____ Lessee	_____ Date
_____ Agent	_____ Date	_____ Agent	_____ Date

Family Self Sufficiency Program

FSS is a voluntary program and available to qualifying households who currently participate in Section 8
Contact HAYC for more information at 503-883-4300

SET GOALS

- 1.
- 2.
- 3.
- 4.



When enrolled a FSS Coordinator can help you find and access the services you need to become self-sufficient. These may include:

- ⇒ Goal setting
- ⇒ Education or training
- ⇒ Job placement
- ⇒ Counseling
- ⇒ Budgeting
- ⇒ Homeownership preparation
- ⇒ Additional services and referrals

Savings Incentive

When an FSS participant's rent portion increases due to earned income, a percentage of the increase may be placed in an escrow (savings) account. The money in the account, plus interest, is provided to participants once the FSS contract has been successfully completed. Once they receive the money, FSS graduates choose how to use it.

Without FSS:



With FSS:



Contact an FSS Coordinator

Angela Flores (503) 883-4319
aflores@hayc.org

Nora Huddleston (503) 883-4320
nhuddles@hayc.org

Mark Irving (503) 883-4316
mirving@hayc.org

Chris McLaughlin (503) 883-4166
cmclaugh@hayc.org



HOUSING AUTHORITY OF YAMHILL COUNTY

Family Self-Sufficiency Program



- This optional program that is available to all voucher holders helps individuals and families' support themselves so they no longer need public assistance.

- The program provides support and assistance to participants for up to five years as they work toward mutually set goals.

- When enrolled participant's rent portion increases due to higher earnings, a percentage of the increase may be placed in a saving or escrow account. This money can be used to reach goals such as debt reduction, reliable transportation, or home ownership!

Watch the FSS program video here:

<https://vimeo.com/338260366>

This program is completely voluntary! When ready to sign up return the complete interest form to HAYC.

Next Steps

- Complete the enclosed Orientation Knowledge Check.
- Initial/Sign/Date the enclosed Orientation Certification Checklist.
- Sign/date your voucher.
- Return **ALL** of the above to HAYC in the postage paid envelope.
- Your documents will be reviewed and a signed voucher and Request for Lease Approval (RLA) will be mailed to you.
- Once you find a place to rent, return the RLA to our office. This can be done by mail, using our drop box, email or fax.
- We will contact you or the landlord to complete the inspection.
- **Remember**- You are responsible for all rent charges until the unit has passed inspection.