

2160 41st Avenue, Capitola, CA 95010-2040

REQUEST FOR SECTION 8 TENANT TO RENT FROM RELATIVE

Tenant Name:		Tenant SS#:	Tenant SS#:	
Owner Name:		Owner SS#/Tax ID#:	Owner SS#/Tax ID#:	
Owner's Home Address:		Owner Phone:	Owner Phone:	
Section	ling to HUD regulations, a Section 8 tenant may not be related a 8 program. Exceptions may only be granted in rare cases as a specially-modified unit and such a unit is only available for	a reasonable accommodatio		
	ase is a Section 8 tenant permitted to rent a unit from a relative verification that they do not live in the unit to be assisted thr			
To requ	uest permission to rent from a relative, please provide the followers	owing documents:		
1.	 Completed Request for Reasonable Accommodation form, with explanation as to the special features that your unit must have to accommodate your disability. We will verify this with your health care provider or social worker after you return the form. 			
2.	2. A List of Properties Contacted (enclosed) verifying that you have searched for a unit with the necessary modifications and been unable to locate one.			
3.	3. Verification that the owner does not live in the unit you propose to rent. This verification can include utility bills, rental agreements, and/or mortgage documents showing the owner's residence.			
4.	The owner and tenant must sign this request and return it to	us.		
5.	If your request is approved, you will be notified in writing. your request is being processed.	You are encouraged to conf	tinue to look for units to rent while	
I, (OW	NER) certify that I am the owner of the unit at: (address of r	ental unit for which tenant	is requesting authorization to rent	
			and that I am the	
(relatio	onship-father, cousin, daughter, etc.)	of the tenant.		
You wi	ill be informed of the Housing Authority's granting, denial, or	status of this request within	thirty (30) days of the receipt of this	
during	y, under penalty of perjury, that I do not live at the unit that I the period of Section 8 assistance. I certify that the property the unit, and that by renting to this specific Section 8 tenant, I aws.	is not covered by any local of	ordinance that requires the owner to	
Owner	Signature Date	Tenant Signature	Date	

 $If you have any questions contact the Housing \ Authority \ at (831) \ 454-9455 \ extension \ 317, Mon-Thu \ 8:00 \ AM-4:30 \ PM.$