



2160 41st Avenue, Capitola, CA 95010-2040

REQUEST FOR SECTION 8 TENANT TO RENT FROM RELATIVE

Tenant Name: _____ Tenant SS#: _____

Owner Name: _____ Owner SS#/Tax ID#: _____

Owner's Home Address: _____ Owner Phone: _____

According to HUD regulations, a Section 8 tenant may not be related by blood or marriage to the owner of the unit they rent under the Section 8 program. Exceptions may only be granted in rare cases as a reasonable accommodation for a person with disabilities who requires a specially-modified unit and such a unit is only available from a relative.

In no case is a Section 8 tenant permitted to rent a unit from a relative if the relative also lives in the unit. Therefore, the owner must provide verification that they do not live in the unit to be assisted through the Section 8 program.

To request permission to rent from a relative, please provide the following 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. 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. 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. You are encouraged to continue to look for units to rent while your request is being processed.

I, (OWNER) certify that I am the owner of the unit at: **(address of rental unit for which tenant is requesting authorization to rent)**

_____ and that I am the

(relationship-father, cousin, daughter, etc.) _____ of the tenant.

You will be informed of the Housing Authority's granting, denial, or status of this request within thirty (30) days of the receipt of this request.

I certify, under penalty of perjury, that I do not live at the unit that I propose to rent to the tenant, nor do I intend to live in the unit during the period of Section 8 assistance. I certify that the property is not covered by any local ordinance that requires the owner to live in the unit, and that by renting to this specific Section 8 tenant, I am in full compliance with the requirements of any state and local laws.

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.