



# Project-Based Voucher Program Participant Obligations

*This form is designed to help you understand your obligations under Section 8 Project-Based Voucher (PBV) Program. These obligations apply to all in your household. If you do not meet these obligations you may lose your Housing Subsidy.*

## REQUIRED DOCUMENTATION

### You must:

- Ensure that all information provided to OHA is true and complete.
- Provide any information OHA requests regarding household income and assets.
- Sign and submit consent forms allowing OHA to obtain income, asset and social security information.
- Disclose and verify the Social Security numbers of all household members upon request.
- Provide evidence of citizenship or immigration status.
- Provide any additional information necessary to administer your program assistance.

## HOUSEHOLD INCOME

### You must:

- Report in writing full and complete financial information for every household member at all annual and interim re-examinations.
- Report all income including, but not limited to, income from jobs, welfare, social security, child support, and all assets such as bank accounts, vehicles, property, etc.
- *If you do not report all household income and assets, you could lose your Housing Subsidy and you may have to repay your subsidy to OHA.*

## HOUSEHOLD MEMBERS

### You must:

- Request approval from OHA and the landlord before allowing anyone (including family members, foster children and live-in aides) to live with you.
- Report birth, adoption or court-awarded custody of a child to OHA in writing within two weeks of the event.
- Inform OHA in writing if any household member has moved out or will be absent from the unit within 2 weeks of when they leave.

## HOUSING QUALITY STANDARDS (HQS)

### You must:

- Allow OHA or its partnering agency to inspect your unit at reasonable times and after reasonable notice.
- Maintain the unit in good condition. This includes paying for any utilities that are your responsibility and supplying and maintaining any appliances you agreed to provide.
- Repair any damage caused by you, any household members or your guests in a timely manner.

## RENTAL AGREEMENT

### You must:

- Use your unit primarily as a residence.
- Get approval from OHA and the property owner before operating a business out of your unit.

### You must not:

- Commit any serious or repeated violations of your lease agreement, such as not paying your portion of rent on time every month.
- Pay the landlord more than your portion of the rent.
- Sublet/rent part of your unit or your entire unit to someone else.
- Have more than one residence.

## MOVING & NOTICE

**Before being eligible to move with continued program assistance you must reside in your unit at least two years. The family may terminate the lease at any time after the first two years of occupancy.**

### You must:

- **Give advance written notice to the owner in accordance with the lease and provide a copy of such notice to OHA. If the family wishes to move with tenant-based assistance and assistance is not available upon lease termination, OHA may, depending on funding availability, place the family on a waitlist to receive the next available opportunity for tenant-based rental assistance.**
- If you terminate your PBV assisted lease before the end of two years, the family relinquishes the opportunity for continued tenant-based assistance.

## EVICCTIONS

- Give OHA a copy of any eviction notice you receive within 5 days.

## FRAUD & CRIMINAL ACTIVITY

### You or any member of your household must not:

- Commit a single act or pattern of actions that constitute a false statement, omission, or concealment of a substantial fact which will be considered program abuse and/or fraud.
- Engage in violent or drug-related criminal activity, or other criminal activity that threatens the health, safety, or right to peaceful enjoyment of the premises by persons living near you.
- Engage in, or threaten, abusive or violent behavior toward OHA staff or any representatives acting on behalf of OHA.
- Receive more than one form of housing assistance for the same unit or different units at the same time.

Head of Household signature	date	Other Adult signature	date
Other Adult signature	date	Other Adult signature	date

**This form is a summary of OHA 's Administrative Plan and the Applicable CFRs.**

*If you have questions or if you don't understand something on this form, please ask your Representative for help.*