



Housing Authority of Bexar County (HABC)
 1954 E. Houston Street, Suite 104
 San Antonio, TX 78202
www.habctx.org



Owner Certification and Responsibilities

Assisted Housing Unit: _____
 (Street address, City, State and Zip Code)

Ownership of Assisted Housing Unit

I certify that I am the legal owner or the legally-designated agent for the above referenced housing unit, and that the prospective tenant has no ownership interest in the above housing unit.

The Owner of the assisted housing unit is not the parent, child, grandparent, grandchild, sister or brother of any member of the family, unless HABC grants written approval, as a reasonable accommodation for a family member who is a person with disabilities.

Proof of Ownership is required

1. Copy of the Bexar Appraisal District Property Information card or a copy of the deed.
2. Management Agent/Property Manager(s): Submit a copy of a current management agreement.

Approved Residents of Assisted Housing Unit

The family members listed on the dwelling lease agreement, as approved by the Housing Authority, are the only individuals permitted to reside in the assisted unit. I also understand that I am not permitted to live in the unit while I am receiving housing assistance payments on behalf of the assisted family.

Housing Quality Standards (HQS)

My obligation to be in compliance is to maintain the contract unit and premises in accordance with Housing Quality Standards (HQS) at all times during the term of the Contract.

Tenant Rent Payments

I understand that HABC determines the tenant's portion of the contract rent, and that it is a program violation to charge any amounts not specified in the lease and approved by the Housing Authority.

Reporting Vacancies, Abandoned Units and Evictions to HABC

I understand that should the assisted unit become vacant, I am responsible for notifying the Housing Authority immediately in writing. I understand that if I am awarded an eviction judgment against a Tenant, I must provide a copy of the court judgment to HABC within 10 business days.

Duration and Enforcement of the Lease

I understand that the initial contract is for 12 months. Should the above housing unit be sold, the terms will transfer to the new owner. I further understand that I must enforce my lease for serious and/or repeated violations.

Administrative and Criminal Actions for Intentional Violations

I understand that failure to comply with the terms and responsibilities of the Housing Assistance Payment Contract is grounds for termination of participation in the Housing Choice Voucher/Section 8 Program. I understand that knowingly supplying false, incomplete or inaccurate information is punishable under Federal or State Criminal Law.

With my signature, I certify that I have read and understand the Owner responsibilities listed and the provisions of the HAP Contract, form HUD-52641.

 Signature of Owner/Agent

 Printed Name

 Date

Title 18, US Code Section 1001, states that a person who knowingly and willingly makes false or fraudulent statements to any Department or Agency of the United States is guilty of a felony. State law may also provide penalties for false or fraudulent statements.