

## Owner Certification Form

### Owner/Manager Information (Please Print)

Owner Name

Date

Managing Company

Manager Name

Payee

Assisted Unit Address

City

State

Zip

Email Address for Authorized Signer of HAP Contract

### Owner Obligations

<b>Owner's Initials</b>	<b>1. Ownership of Assisted Unit</b> <ol style="list-style-type: none"> <li>I certify that I am the legal or the legally-designated agent for the above referenced unit, and that the prospective Tenant ("Participant" has no ownership interest in this dwelling unit whatsoever.</li> <li>Unless Opportunity Home had previously approved a Reasonable Accommodation for a family member who is a person with disabilities, I certify I am not related to the Participant.</li> </ol>
<b>Owner's Initials</b>	<b>2. Proof of Ownership</b> <ol style="list-style-type: none"> <li>I understand that I must provide Opportunity Home with a copy of the Bexar Appraisal District Property Information or a copy of the recorded deed.</li> <li>I understand that if I am the managing agent/property manager, I must provide Opportunity Home with a management agreement form. Opportunity Home accepts forms from the Texas Association of Realtors (TAR/TEC) and the San Antonio Board of Realtors (SABOR). Otherwise, I must provide a notarized management agreement form signed by the Owner.</li> </ol>
<b>Owner's Initials</b>	<b>3. Approved Residents of the Assisted Unit</b> <ol style="list-style-type: none"> <li>I understand that the family members listed on the lease agreement as approved by Opportunity Home are the only individuals permitted to reside in the assisted unit.</li> <li>I understand that I am not permitted to live in the unit while I am receiving Housing Assistance Payments (HAP) on behalf of the assisted family.</li> </ol>
<b>Owner's Initials</b>	<b>4. Housing Quality Standards</b> <ol style="list-style-type: none"> <li>I understand that my obligations under the HAP Contract are aimed to ensure that the unit meets HUD's Housing Quality Standards (HQS) at all times during the term of the Contract.</li> <li>I understand that the rent charged for the unit that is submitted to Opportunity Home is not approved until Opportunity Home determines the reasonableness of the proposed rent amount.</li> </ol>
<b>Owner's Initials</b>	<b>5. Participant Rent Payments</b> <ol style="list-style-type: none"> <li>I understand that Opportunity Home determines the Participant's portion of the contract rent, and that it is illegal to charge any additional amounts for rent or any other item not specified in the lease that have not been specifically approved by Opportunity Home.</li> <li>I understand that if I allow the family to move into the unit before passing an HQS inspection, the family will be responsible for the full contract rent during that time.</li> </ol>

<b>Owner's Initials</b>	<b>6. Reporting Vacancies and Evictions to Opportunity Home</b> <ol style="list-style-type: none"> <li>I understand that if the unit is vacated, I am responsible for notifying Opportunity Home in writing immediately.</li> <li>I understand that if I am awarded an eviction judgment against a Participant, I must provide a copy of the certified court judgment to Opportunity Home within 10 business days.</li> </ol>
<b>Owner's Initials</b>	<b>7. Enforcement of the Lease</b> <ol style="list-style-type: none"> <li>I understand that I am responsible for enforcing the provisions in the lease.</li> <li>I understand that I may report serious or repeated lease violations to Opportunity Home at any time.</li> </ol>
<b>Owner's Initials</b>	<b>8. Administrative and Criminal Actions for Intentional Violations</b> <ol style="list-style-type: none"> <li>I understand that failure to comply with the terms and responsibilities of the HAP contract is grounds for termination of participation in the assisted housing program. I understand that knowingly supplying false, incomplete, or inaccurate information is punishable under Federal or State Criminal law.</li> </ol>
<b>Owner's Initials</b>	<b>9. Utilities</b> <ol style="list-style-type: none"> <li>I understand that for my unit to qualify as all-bills-paid, the utilities must be under my name and not under the tenant's name.</li> </ol>

**Warning** 18 U.S.C. 1001 provides, among other things, that whoever knowingly and willfully makes or uses a document in writing containing false, fictitious or fraudulent statements or entries in any matter within the jurisdiction of a department or an agency of the United States shall be fined not more than \$10,000 or imprisoned for not more than five years or both.

**By signing below, I certify that I have read and understand the provisions of the HAP Contract (HUD-52641) and the Owner obligations listed above.**

<hr/> <b>Owner/Owner Representative Signature</b>	<hr/> <b>Date</b>
<hr/> <b>Co-Owner Signature (If Applicable)</b>	<hr/> <b>Date</b>