



Ocala
Housing Authority

HUD Certified Housing Counseling Agency

CHIEF EXECUTIVE OFFICER

Gwendolyn B. Dawson, MBA
FL Licensed Real Estate &
Mortgage Broker
NMLS #383663

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352-369-2636

Landlord Packet for Security Deposit Only

Please provide our office with the following required documentation:

- 1) W-9 Request for Taxpayers ID Certification
- 2) Application and Determination of Owner Eligibility form
- 3) Notarized and *recorded* warranty deed for the unit.
- 4) Copy of Social Security Card for owner & co-owner
- 5) Current Property Tax Bill (even if not paid)
- 6) Driver's License or Photo ID (owner & co-owner)

Should you have any questions or need assistance in completing these forms, please do not hesitate to contact Kristan Batts, TBRA Coordinator, at (352) 620-3390, during the hours of 8:00 A.M. – 5:00 P.M., Tuesday through Friday.

Sincerely,

Kristan Batts
TBRA Coordinator
Ocala Housing Authority

**Request for Taxpayer
 Identification Number and Certification**

Give Form to the
 requester. Do not
 send to the IRS.

Print or type
 See Specific Instructions on page 2.

Name (as shown on your income tax return)	
Business name/disregarded entity name, if different from above	
Check appropriate box for federal tax classification (required): <input type="checkbox"/> Individual/sole proprietor <input type="checkbox"/> C Corporation <input type="checkbox"/> S Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Trust/estate <input type="checkbox"/> Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=partnership) ▶ _____ <input type="checkbox"/> Other (see instructions) ▶ _____	
<input type="checkbox"/> Exempt payee	
Address (number, street, and apt. or suite no.)	Requester's name and address (optional)
City, state, and ZIP code	
List account number(s) here (optional)	

Part II Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on the "Name" line to avoid backup withholding. For individuals, this is your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the Part I instructions on page 3. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN* on page 3.

Note. If the account is in more than one name, see the chart on page 4 for guidelines on whose number to enter.

Social security number																					
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Employer identification number																					
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Part III Certification

Under penalties of perjury, I certify that:

- The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me), and
- I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding, and
- I am a U.S. citizen or other U.S. person (defined below).

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions on page 4.

Sign Here	Signature of U.S. person ▶ _____	Date ▶ _____
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General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

Purpose of Form

A person who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) to report, for example, income paid to you, real estate transactions, mortgage interest you paid, acquisition or abandonment of secured property, cancellation of debt, or contributions you made to an IRA.

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN to the person requesting it (the requester) and, when applicable, to:

- Certify that the TIN you are giving is correct (or you are waiting for a number to be issued),
- Certify that you are not subject to backup withholding, or
- Claim exemption from backup withholding if you are a U.S. exempt payee. If applicable, you are also certifying that as a U.S. person, your allocable share of any partnership income from a U.S. trade or business is not subject to the withholding tax on foreign partners' share of effectively connected income.

Note. If a requester gives you a form other than Form W-9 to request your TIN, you must use the requester's form if it is substantially similar to this Form W-9.

Definition of a U.S. person. For federal tax purposes, you are considered a U.S. person if you are:

- An individual who is a U.S. citizen or U.S. resident alien,
- A partnership, corporation, company, or association created or organized in the United States or under the laws of the United States,
- An estate (other than a foreign estate), or
- A domestic trust (as defined in Regulations section 301.7701-7).

Special rules for partnerships. Partnerships that conduct a trade or business in the United States are generally required to pay a withholding tax on any foreign partners' share of income from such business. Further, in certain cases where a Form W-9 has not been received, a partnership is required to presume that a partner is a foreign person, and pay the withholding tax. Therefore, if you are a U.S. person that is a partner in a partnership conducting a trade or business in the United States, provide Form W-9 to the partnership to establish your U.S. status and avoid withholding on your share of partnership income.

The person who gives Form W-9 to the partnership for purposes of establishing its U.S. status and avoiding withholding on its allocable share of net income from the partnership conducting a trade or business in the United States is in the following cases:

- The U.S. owner of a disregarded entity and not the entity,
- The U.S. grantor or other owner of a grantor trust and not the trust, and
- The U.S. trust (other than a grantor trust) and not the beneficiaries of the trust.

Foreign person. If you are a foreign person, do not use Form W-9. Instead, use the appropriate Form W-8 (see Publication 515, *Withholding of Tax on Nonresident Aliens and Foreign Entities*).

Nonresident alien who becomes a resident alien. Generally, only a nonresident alien individual may use the terms of a tax treaty to reduce or eliminate U.S. tax on certain types of income. However, most tax treaties contain a provision known as a "saving clause." Exceptions specified in the saving clause may permit an exemption from tax to continue for certain types of income even after the payee has otherwise become a U.S. resident alien for tax purposes.

If you are a U.S. resident alien who is relying on an exception contained in the saving clause of a tax treaty to claim an exemption from U.S. tax on certain types of income, you must attach a statement to Form W-9 that specifies the following five items:

1. The treaty country. Generally, this must be the same treaty under which you claimed exemption from tax as a nonresident alien.
2. The treaty article addressing the income.
3. The article number (or location) in the tax treaty that contains the saving clause and its exceptions.
4. The type and amount of income that qualifies for the exemption from tax.
5. Sufficient facts to justify the exemption from tax under the terms of the treaty article.

Example. Article 20 of the U.S.-China income tax treaty allows an exemption from tax for scholarship income received by a Chinese student temporarily present in the United States. Under U.S. law, this student will become a resident alien for tax purposes if his or her stay in the United States exceeds 5 calendar years. However, paragraph 2 of the first Protocol to the U.S.-China treaty (dated April 30, 1984) allows the provisions of Article 20 to continue to apply even after the Chinese student becomes a resident alien of the United States. A Chinese student who qualifies for this exception (under paragraph 2 of the first protocol) and is relying on this exception to claim an exemption from tax on his or her scholarship or fellowship income would attach to Form W-9 a statement that includes the information described above to support that exemption.

If you are a nonresident alien or a foreign entity not subject to backup withholding, give the requester the appropriate completed Form W-8.

What is backup withholding? Persons making certain payments to you must under certain conditions withhold and pay to the IRS a percentage of such payments. This is called "backup withholding." Payments that may be subject to backup withholding include interest, tax-exempt interest, dividends, broker and barter exchange transactions, rents, royalties, nonemployee pay, and certain payments from fishing boat operators. Real estate transactions are not subject to backup withholding.

You will not be subject to backup withholding on payments you receive if you give the requester your correct TIN, make the proper certifications, and report all your taxable interest and dividends on your tax return.

Payments you receive will be subject to backup withholding if:

1. You do not furnish your TIN to the requester,
2. You do not certify your TIN when required (see the Part II instructions on page 3 for details),
3. The IRS tells the requester that you furnished an incorrect TIN,
4. The IRS tells you that you are subject to backup withholding because you did not report all your interest and dividends on your tax return (for reportable interest and dividends only), or
5. You do not certify to the requester that you are not subject to backup withholding under 4 above (for reportable interest and dividend accounts opened after 1983 only).

Certain payees and payments are exempt from backup withholding. See the instructions below and the separate instructions for the Requester of Form W-9.

Also see *Special rules for partnerships* on page 1.

Updating Your Information

You must provide updated information to any person to whom you claimed to be an exempt payee if you are no longer an exempt payee and anticipate receiving reportable payments in the future from this person. For example, you may need to provide updated information if you are a C corporation that elects to be an S corporation, or if you no longer are tax exempt. In addition, you must furnish a new Form W-9 if the name or TIN changes for the account, for example, if the grantor of a grantor trust dies.

Penalties

Failure to furnish TIN. If you fail to furnish your correct TIN to a requester, you are subject to a penalty of \$50 for each such failure unless your failure is due to reasonable cause and not to willful neglect.

Civil penalty for false information with respect to withholding. If you make a false statement with no reasonable basis that results in no backup withholding, you are subject to a \$500 penalty.

Criminal penalty for falsifying information. Willfully falsifying certifications or affirmations may subject you to criminal penalties including fines and/or imprisonment.

Misuse of TINs. If the requester discloses or uses TINs in violation of federal law, the requester may be subject to civil and criminal penalties.

Specific Instructions

Name

If you are an individual, you must generally enter the name shown on your income tax return. However, if you have changed your last name, for instance, due to marriage without informing the Social Security Administration of the name change, enter your first name, the last name shown on your social security card, and your new last name.

If the account is in joint names, list first, and then circle, the name of the person or entity whose number you entered in Part I of the form.

Sole proprietor. Enter your individual name as shown on your income tax return on the "Name" line. You may enter your business, trade, or "doing business as (DBA)" name on the "Business name/disregarded entity name" line.

Partnership, C Corporation, or S Corporation. Enter the entity's name on the "Name" line and any business, trade, or "doing business as (DBA) name" on the "Business name/disregarded entity name" line.

Disregarded entity. Enter the owner's name on the "Name" line. The name of the entity entered on the "Name" line should never be a disregarded entity. The name on the "Name" line must be the name shown on the income tax return on which the income will be reported. For example, if a foreign LLC that is treated as a disregarded entity for U.S. federal tax purposes has a domestic owner, the domestic owner's name is required to be provided on the "Name" line. If the direct owner of the entity is also a disregarded entity, enter the first owner that is not disregarded for federal tax purposes. Enter the disregarded entity's name on the "Business name/disregarded entity name" line. If the owner of the disregarded entity is a foreign person, you must complete an appropriate Form W-8.

Note. Check the appropriate box for the federal tax classification of the person whose name is entered on the "Name" line (Individual/sole proprietor, Partnership, C Corporation, S Corporation, Trust/estate).

Limited Liability Company (LLC). If the person identified on the "Name" line is an LLC, check the "Limited liability company" box only and enter the appropriate code for the tax classification in the space provided. If you are an LLC that is treated as a partnership for federal tax purposes, enter "P" for partnership. If you are an LLC that has filed a Form 8832 or a Form 2553 to be taxed as a corporation, enter "C" for C corporation or "S" for S corporation. If you are an LLC that is disregarded as an entity separate from its owner under Regulation section 301.7701-3 (except for employment and excise tax), do not check the LLC box unless the owner of the LLC (required to be identified on the "Name" line) is another LLC that is not disregarded for federal tax purposes. If the LLC is disregarded as an entity separate from its owner, enter the appropriate tax classification of the owner identified on the "Name" line.

Ocala Housing Authority

Tenant Based Rental Assistance (TBRA) Program

Landlord Security Deposit Reimbursement Agreement

I, _____, hereby certify that I have or will collect the below listed amount as a Security Deposit from the Ocala Housing Authority and this amount is not in excess of private market practice or more than the amount that I charge residents for unassisted units on the open market. **The Ocala Housing Authority does not conduct move-out inspections or process damage claims. You must follow the Florida Landlord/Tenant Laws. Refund must be returned within 30 thirty days from the date of move out.**

Amount Collected: \$ _____

I, _____ agree to the TBRA Lease Addendum Section E (2), *the Landlord shall refund the full amount of the security deposit to the Ocala Housing Authority. The landlord may, subject to state and local laws, use the security deposit, as reimbursement for rent or any other amounts payable by the Tenant under the Lease (documentation attached). The Landlord shall promptly return the unused balance of the security, if applicable, to the Ocala Housing Authority.*

Signature: _____

Date: _____



**Ocala Housing Authority
Tenant Based Rental Assistance Program (TBRA)**

Security Deposit Certification

I hereby certify that I have or will collect the below listed amount as a Security Deposit from Tenant Based Rental Assistance Program (TBRA), _____, and the amount is not in excess of private market practice or more than the amount that I charge residents for unassisted units on the open market. **The Ocala Housing Authority does not conduct move-out inspections or process damage claims. You must follow the Florida landlord/tenant laws.**

Amount Collected: \$ _____

Amount to be Collected: \$ _____

Signature: _____

Date: _____



Security Deposit Cert
Revised 8/04

Application and Determination of Owner Eligibility for Participation

Rental Property Information

Date: _____

(If certifying for an apartment complex or a community, you may complete this form for the entire complex)

Street Address City State Zip

Is unit currently occupied by a Section 8 Tenant? Yes No

If so, Tenant's Name: Household Size: Unit Size:

Lease Expiration Date: _____

Transfer of Housing Assistance Payments Contract and Lease Agreement

I hereby, agree to accept the existing Section 8 Tenant, effective _____, the Housing Assistance Payments Contract dated _____ by the Ocala Housing Authority and the previous Owner/Property Manger _____ is hereby transferred into the following name(s) for the remainder of the period started on said Lease and Housing Assistance Payments Contract for the unit located at _____ and rented to _____ known as the resident. This transfer is subject to the same terms and conditions of the original lease and Housing Assistance Payments Contract.

Owner's Information

Owner's Name: _____

Co-Owner's Name _____

Street Address City State Zip

Mailing Address City State Zip

Phone Number: Fax Number: _____

Email Address (Required) _____

Have you ever participated in the Ocala Housing Authority's Section 8 Program? Yes _____

No _____, If yes, then what time period _____, and under what name _____

Owner's Eligibility

Conflict of Interest: The Annual Contributions Contract (ACC) and the Housing Assistance Payments Contract, contains Conflict of Interest Provisions which may prohibit some owners from participating in the Ocala Housing Authority's Section 8 Program. In accordance with the Annual Contributions Contract, Section 2.13; Paragraph A, neither the PHA nor any of its contractors or their subcontractors shall enter into a contract, subcontract, or arrangement in connection with the Program in which any of the following classes of persons has an interest, direct or indirect, during tenure or for one year thereafter:

- Any present or former member or officer of the PHA (except tenant commissioners).
Any employee of the PHA who formulates policy or who influences decisions with respect to the Program.
Any public official, member of a governing body, or State or local legislator who exercises functions or responsibilities to the Program.

Any member of the classes described above must disclose their interest or prospective interest to the Ocala Housing Authority and the Department of Housing and Urban Development The Housing Assistance Payments Contracts for the Section 8 Program contains conflict of interest provisions, which states "No present or former member or officer of the PHA (except tenant commissioners), no employee of the PHA who formulates policy or influences decisions with respect to the Section 8 Program and no public official or member of a governing body or State or local legislator who exercises functions or responsibilities with respect to the Section 8 Program, during this person's tenure or for one year thereafter, shall have any direct or indirect interest in this Contract or in any proceeds or benefits arising from the Contract". Therefore, it is requested that the legal owner of the below referenced unit for which this document is being executed, hereby certifies that he/she is eligible to participate in the Ocala Housing Authority's Section 8 Program.

U.S. Department of Housing and Urban Development clearly states that leasing to a parent, child, grandparent, grandchild, sister, brother or any member of the family is prohibited.

Disclosure of Relationship

Do you have a relative, related by blood, marriage or operation of law which is a present or former member or officer of the Ocala Housing Authority (OHA) (with the exception of Tenant Commissioners), or an employee of the OHA who formulates policy or influences decisions with respect to the Section 8 Program, or a public official or member of a governing body or State or local legislator? Yes No if yes, please provide the following information.

Relative's Name: Place of Employment: _____

Responsibilities and Duties in Relation to the Section 8 Program: _____

Are you related by blood or marriage to the tenant; head of household, co-head or any family member you are leasing to or proposing to lease to? Yes No, if yes, please provide the relationship: _____

Have you used any other name(s) previously Yes No, if yes, please list ALL former names and respective date(s) used: _____

_____ If more than 3

former names, please write below

Management of Rental Unit

Is the referenced unit going to be managed by any other person other than the owner? ___ Yes ___ No if yes, please provide the following information:

Name of Manager or Agency: _____

Address _____ City _____ State _____ Zip _____

Phone Number: _____ Fax Number: _____

Management Agreement

I, _____, legal owner of property located at _____, Ocala Florida, Parcel # _____, agree to the following:

1) The Ocala Housing Authority is authorized to make all Housing Assistance Payments (HAP) for the referenced property payable to: _____, effective, _____.

2) The Manger has full authority to manage the referenced property, including all communications with the Ocala Housing Authority and tenant, execution of all documents applicable to this property for participation in the Housing Choice Voucher Program, and any applicable repairs necessary to maintain the property within the Housing Quality Standards (HQS).

Housing Assistance Payment (HAP)

I, _____, owner of the referenced Property authorize the Housing Assistance Payment to be made payable to:

Name: _____ SSN/TIN: _____ via

ACH Direct Deposit into _____ Bank,

Routing Number: _____ Account Number: _____

(A W-9 and Social Security Card Must be attached) 1099 will be mailed in the name that the HAP is payable.

Notary Acknowledgement

(Attention: Must be signed by owner and co-owner; also notary must acknowledge both signatures)

Signature of Owner

Signature of Co-Owner

The forgoing Instrument was acknowledged before me this _____ day of _____,

By _____, Who is
Name of Person(s) Acknowledged

(circle one) Personally known to me or who has Produced _____

Form of Identification

as Identification and who Did/Did Not take an Oath.

(circle one)

Signature of Notary: _____

My Commission Expires: _____

Print Name of Notary: _____



Revised 05/2012