

Syracuse Housing Authority (SHA) Income / Household Change and Verification Form

| | | | |
|---------------------|-------------|------------|----------------|
| Last Name of Tenant | First Name: | Phone No.: | Account Number |
| Address | | | |

SHA requires that a resident or head of household report any increase or reduction in income after initial occupancy or after annual re-examination within fourteen (14) calendar days. SHA will recalculate your rent and determine if a rent adjustment is warranted if the tenant follows the procedure below.

How to Obtain a Reduction in Rent:

To have your SHA Property Manager determine if your rent can be reduced you must complete the following steps:

1. **“Income / Household Change and Verification Form”** : sign and submit this form to SHA.
2. **Consent Forms:** sign and submit consent forms to SHA. Consent forms are used to assist the SHA in obtaining verification documentation necessary per 24 CFR 960.259(b) or 24 CFR [§ 5.230](#).
3. **Verification documentation** (or other information per 24 CFR 960.259(a) that the SHA or HUD determines necessary for the annual reexamination or interim reexamination of family income and/or composition) is submitted to SHA. ** Ask your property manager what is acceptable verification of your change in income.

Effective Date of Rent Change: The first of the month after the reduction is timely reported.

Delay By SHA: The reduction will be effective the first of the month after the interim reexamination should have been completed.

Delay caused by Tenant: If the new rent is a reduction and the family caused the delay or did not report the change in a timely manner, the change will be effective the first of the month after the rent amount is determined.

I have the following change:

I will provide the following documentation to verify this change:

Signature _____ Date _____

I certify that all the information provided on household composition, income, family assets and items for allowances and deductions, is accurate and complete to the best of my knowledge.

I understand that an applicant or resident in the public housing program must not knowingly: 1. Make a false statement to the SHA [Title 18 U.S.C. Section 1001]; 2. Provide incomplete or false information to the SHA [24 CFR 960.259(a)(4)]; Commit fraud, or make false statements in connection with an application for assistance or with reexamination of income [24 CFR 966.4(l)(2)(iii)(C)].



516 Burt Street / Syracuse, New York 13202 / PH 315.475.6181 / FAX 315-470-4203 / www.syracusehousing.org

We are an equal opportunity housing provider. We do not discriminate on the basis of race, color, national origin, religion, sex, family status or disability. This document is available in an alternate, accessible format upon request. Promovemos la igualdad de oportunidades de acceso a la vivienda. No discriminamos en base a raza, color, nacionalidad, religión, sexo, estado civil o discapacidad. Este documento se encuentra también disponible en un formato accesible a pedido.

FRAUD AND FALSE STATEMENTS

Title 18, Section 1001 of the U.S. Code states that a person whom knowingly and willingly makes false and fraudulent statements to any department of the United States Government, HUD, a public housing authority (PHA), and any owner (or employee of HUD, the PHA, or the owner) may be subject to penalties that include fines and/or imprisonment.

VERIFICATION: Ways to Document Income

1. **Current Pay Stubs or Employer(s) Statement** ◇ signed by the responsible officer of the firm;
2. **TANF: Public Assistance** ◇ budget sheet and/or an approval / change / or discontinuance notice;
3. **Social Security Benefits** ◇ official award letter or other verification;
4. **Worker's Compensation** ◇ must be the official report from the state or federal agency;
5. **Unemployment Compensation** ◇ Tenant's notification of benefits and/or check stubs;
6. **Periodic Payments** ◇ official statement or copy of most recent checks for periodic payments received from annuities, insurance policies, retirement funds, pensions, disability or death benefits and other types of similar periodic receipts, including a lump sum payment for the delayed start of a periodic payment (except SSI and Social Security)
7. **Child Support or Alimony** ◇ any official statement including, but not limited to, divorce decrees or separation agreements, or copies of most recent checks;
8. **Self Employment Income** ◇ statement verifying net income from operation of a business or profession;
9. **Notarized Affidavit** ◇ from (a) person or persons providing tenant or household member with periodic financial support (dates, amounts of contributions, and names and addresses of contributors must be specified) or (b) the tenant or house hold member evidencing a self-declaration of earned income;
10. **Military Benefits** ◇ military pay and allotment tables, allotment checks, statement from commanding officer of unit to which the service person is assigned;
11. **Asset Income** ◇ statement verifying net income of any kind from Real or Personal property, savings and/or checking account statement, and statements for certificates of deposit, money market, IRA, stock, dividend, annuities and/or other statement verifying asset income;
12. **Income Tax Report** ◇ transcript from Internal Revenue Service and supported by W-2 forms, pay stubs, etc.
13. **W-2 Forms** ◇ may be used as supplemental verification of pay stubs and employer statements.
Note: this is not always adequate if wages have been received from more than one employer;
14. **Relocation Payments** ◇ official statement.
15. Any additional information as required.



516 Burt Street / Syracuse, New York 13202 / PH 315.475.6181 / FAX 315-470-4203 / www.syracusehousing.org

We are an equal opportunity housing provider. We do not discriminate on the basis of race, color, national origin, religion, sex, family status or disability. This document is available in an alternate, accessible format upon request. Promovemos la igualdad de oportunidades de acceso a la vivienda. No discriminamos en base a raza, color, nacionalidad, religión, sexo, estado civil o discapacidad. Este documento se encuentra también disponible en un formato accesible a pedido.