



Housing Authority of the City of Austin

Established in 1937

1124 South IH 35, Austin, TX 78704
P.O. Box 6159, Austin, TX, 78762

(512) 477-1314
Fax (512) 494-0686

In order to complete a change of owner/management please follow the steps listed below:

1. **The current owner needs to provide** a letter requesting the Housing Authority's consent to assign the HAP contract for specific addresses to a new owner. The current owner should also provide a copy of the HAP (Housing Assistance Payments contract) to the new owner.
2. **The new owner must provide** a letter agreeing to comply with the HAP contract indicating the specific addresses (see attached example):
3. Provide a Recorded Deed to show proof of ownership or a Management Agreement verifying the arrangement with a professional management firm:
4. Complete the enclosed W9. This is **REQUIRED** for **each** transaction regardless of whether you have a HACA account or not.
5. Complete the enclosed TAX IDENTIFICATION form. This is **REQUIRED** for **each** transaction regardless of whether you have a HACA account or not.
6. A Notice will be sent approving the transfer. The applicable HAP contract(s) will be provided only upon request.
7. Direct deposit of monies to your bank is now available. Please complete the attached direct deposit authorization form.
 - a. Please be advised that the first direct deposit transaction will occur the second month following the submission of the required paperwork listed above.

NO SUBSIDY PAYMENTS WILL BE MADE PRIOR TO OUR RECEIVING THESE IMPORTANT DOCUMENTS.

Please contact Lisa Muraida at 477-1314 ext 1352 should you have any questions.

Thank you.



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REQUEST FOR TRANSFER OF HAP PAYMENTS TO THE NEW PROPERTY OWNER

Date

I recently purchased a property at (list unit address) which is assisted under the Housing Choice Voucher Program. I request that the HAP (Housing Assistance Payment) Contract be assigned to me. I have received a copy of the HAP (Housing Assistance Payments Contract) and agree to comply with all provisions of the (HAP) Contract.

Sincerely,

PRINT New Property owner name and address

Signature and Date



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TAX – IDENTIFICATION FORM

OWNER INFORMATION TO RECEIVE HOUSING ASSISTANCE PAYMENTS

In accordance with the Department of Housing and Urban Development (HUD), and the Internal Revenue Service (IRS), the Housing Authority is required to provide each Section 8 owner who receives more than six hundred dollars (\$600) during the course of a year with a Form 1099. In order to accurately provide you with a 1099, provide us with your Social Security Number or Federal Tax Identification Number.

Please print clearly to ensure timely/accurate disbursement of Housing Assistance Payments.

Type of Change Requested:

<input type="checkbox"/>	Add a New Owner	<input type="checkbox"/>	Ownership Change	<input type="checkbox"/>	Address Change Only	<input type="checkbox"/>	Direct Deposit
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* Please complete the attached direct deposit authorization form.

Make Housing Assistance Payment Check payable to:

Owner Name: _____

Business Name / Management Company _____

Tax I.D. or Social Security No.# _____

(Tax I.D. # needs to be for the property owner or management company the check is payable to as indicated above.) **(IMPORTANT: USE this number on the W-9 Form!)**

Street Address _____

City _____ State _____ Zip _____

Name of Contact Person _____

Phone # _____

List the name and addresses of ALL Section 8 tenant(s) residing in your unit affected by the change:
(attach a separate sheet if necessary)

TENANT NAME	UNIT ADDRESS

OFFICE USE ONLY			
VENDOR NUMBER		EFFECTIVE DATE	
CLIENT NUMBER			

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	
	Business name, if different from above	
	<input type="checkbox"/> Individual/ Sole Proprietor <input type="checkbox"/> Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Other <input type="checkbox"/> Exempt from backup withholding	
	Check appropriate box: ▶	
	Address (number, street, and apt. or suite no.)	Requester:
	City, state, and ZIP code.	
List Account number(s) here (optional)		

Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. 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 2.** 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 2.**

Social Security number

Note: If the account is in more than one name, see the chart on page 2 for guidelines on whose number to enter.

Employer identification number

Part II Certification

Under penalties of perjury, I certify that:

1. 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**
2. 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**
3. I am a U.S. person (including a U.S. resident alien).

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 2.)

Sign Here	Signature of U.S. person X	Date ▶
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<p>General Instructions Section references are to the Internal Revenue Code unless otherwise noted.</p> <p>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.</p> <p>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:</p> <ol style="list-style-type: none"> 1. Certify that the TIN you are giving is correct (or you are waiting for a number to be issued), 2. Certify that you are not subject to backup withholding, or 3. 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. <p>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.</p>	<p>Definition of a U.S. person. For federal tax purposes, you are considered a U.S. person if you are:</p> <ul style="list-style-type: none"> * 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 <p>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.</p> <p>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:</p> <ul style="list-style-type: none"> c The U.S. owner of a disregarded entity and not the entity,
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Housing Authority Of the City of Austin Direct Deposit Authorization Form

Vendor Information

Business Name or Owner Name:					
Tax ID Number:				Vendor Number:	
Address:					
City:			State:		Zip:
Contact Name:				Phone Number:	

Bank Information

Bank Name:							
Bank Routing (ABA) Number (9 digit number):							
Bank Account Number:							
Please attach (1) one of the following for verification				Check One: (1) one			
<input type="checkbox"/> Voided Check				<input type="checkbox"/> Checking			
<input type="checkbox"/> Voided Deposit Slip				<input type="checkbox"/> Savings			
<input type="checkbox"/> Specification form from bank							

Authorization

I, _____, as an authorized signer or _____

Do hereby authorize the Housing Authority of the City of Austin, to deposit payments by direct deposit (ACH) directly into above specified bank account.

Authorized Signature	Title
HACA Staff Signature	Title

Mail or Fax to:
Housing Authority of the City of Austin
Housing Choice Voucher Program – Lisa Muraida
1124 South IH35, Austin, TX 78704
P.O. Box 6159, Austin, TX 78762
(512) 477-1314 ext. 1352



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ADDRESS CHANGE ONLY

Please print clearly to ensure timely/accurate disbursement of Housing Assistance Payments.

NEW ADDRESS:

Owner name:

Business Name / Management Company:

Tax I.D. or Social Security No. #

Street Address:

(City)

(State)

(Zip)

Name of Contact Person

Phone #

OLD ADDRESS:

Street Address:

(City)

(State)

(Zip)