

1076 N. State St., Ukiah, CA 95482

707/463-5462 Fax: 707/463-4188 TDD: CA relay 711

Landlord / Property Owner,

Welcome to the Community Development Commission of Mendocino County (CDC). We appreciate your participation in our rental assistance programs. Together we provide for the housing needs of approximately 1000 low-income families.

Enclosed are forms to be completed by new participating landlords/owners. You will also find reference materials that may assist in the completion of the forms. In this packet you will find:

- <u>Landlord Declaration</u> (required): If you own the property jointly, please submit only one name and one social security number. This does not prevent you from filing a joint tax return. Please note that WHOMEVER the check is made out to is the SS# or Tax ID number we require to have on file.
- <u>Designation by Owner for management of the Leased Property (required if applicable)</u>: Only applicable if the property is managed by someone other than the owner. By completing this form it will allow CDC to send all paperwork and payments (Housing Assistance Payments) directly to the property management company.
- W-9 and Instructions (required): It is important that you complete the W-9 accurately. Some of the more common pitfalls for errors on this form occur in situations where the property has multiple owners, where a DBA name is used or where the owner is a limited liability company. These situations are covered in the included instructions. CDC will use the W-9 to determine if we need to send a form 1099-Misc to you and the IRS for the rental assistance payments we made during the calendar year. If you still have questions on completing the W-9 after reading the instructions, please contact the Accounting Department at CDC.
- <u>Authorization Agreement for Direct Deposits (optional)</u>: CDC provides landlords the opportunity and convenience to receive monthly housing assistance payments via direct deposit. The CDC provides landlords with a list of tenants and related assistance amounts with each payment. These details provide backup information for the total amount paid. In the case of a paper check, the tenant and amount detail is printed on the check stub. If a landlord opts for electronic direct deposits the Housing Authority will mail a paper statement showing the tenant and amount details. Please remember to attach a VOIDED check to the form, if you choose direct deposit. If you do not wish to set up an electronic payment method at this time please note that you may opt-in for direct deposit at a later date.
- Landlord/Owner Guide (information only): For your reference.
- Housing Assistance Payments Contract (information only): This is a sample copy of the contract between the Owner/Landlord and CDC. This is the document that will be executed upon completion of the leasing process. This is a blank copy for your reference.
- Fair Housing: For your reference.

Please complete the applicable documents as soon as possible and return them to CDC via mail, fax, email, or by dropping them off at the address listed above.







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If the <u>participant/tenant</u> is new to CDC's rental assistance programs, or they are just now moving into your rental property, you will receive a small goldenrod packet from the Participant/Tenant. The packet will include the following documents:

- Request for Tenancy Approval (RFTA): This form requests specific information about the rental property. All utilities must be marked "T" for tenant responsibility or "O" for owner responsibility.
- <u>Lead Based Paint Disclosure</u>: If your property was built BEFORE 1978, this form must be completed with a signature and date.
- Housing Quality Standards Inspection Preparation: This form will help to prepare for the Housing Quality Standards Inspection (HQS). Please sign and date the last page.

Please complete the packet the participant/tenant supplied you with and have them return the information to CDC. Once all documents are received, CDC will determine if the unit is eligible, and if it is, will schedule a Housing Inspection.

#### RELEASE OF THE HOUSING ASSISTANCE PAYMENT

In all circumstances CDC requires a signed rental/lease agreement from the landlord. The rental/lease agreement must include the following information:

- The participant/tenants name
- The effective date of the contract
- All authorized household members
- Unit address,
- Term of the lease (month-to-month/1 year)
- Amount of monthly rent
- Security deposit amount
- What utilities are paid by the owner
- What appliances (refrigerator/range) are supplied by the owner.

Once received CDC will generate a Housing Assistance Payment (HAP) Contract. The HAP contract will be mailed to the landlord for signature. CDC will start the rental assistance payments as of the effective date of the HAP Contract. Once the contract is signed by the landlord and returned to CDC, payment may be released for processing. Please allow up to 3 weeks for the initial payment. CDC processes payments at the beginning of each month and around the 15<sup>th</sup> of each month. After the initial process is complete, you can expect to receive payment regularly around the beginning of each month.

Please call the Housing Authority if you have any questions. We thank you for your participation in our community's rental assistance programs.

Joelle M. Strain Office Representative I (707) 463-5462 ext. 101 strainj@cdchousing.org







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#### **Landlord Declaration**

I, being the true owner of record for the property or properties indicated below authorize Community Development Commission to confirm all information.

**OWNER** must notify CDC in <u>writing</u> of any change. Additionally, the owner or agent acknowledges that the social security number or Employer Identification Number listed below is correct and is the number to be used when reporting monies paid by CDC to the IRS. **WARNING**: **Section 1001 of Title 18 of the U.S. Code makes it a criminal offense to make willful false statements or misrepresent to any Department or Agency of the U.S. as to any matter within its Jurisdiction** 

Property Own	ner Information	Properties
Name		APN # & Tenant name
Business Name		Address City, State and ZIP code
Social Security	Employer ID Number	APN # & Tenant name
Individual Sole	Partnership Corporation	Address City, State and ZIP code
Is this Property Managed by someone else?		APN # & Tenant name
Mailing address		Address City, State and ZIP code
City, State and ZIP code		APN # & Tenant name
Phone Number		Address City, State and ZIP code
Alt Phone Number		APN # & Tenant name
Email		Address City, State and ZIP code
Signature	Date	Are you related to any tenant? Yes-name(s) No

CDC STAFF-checked by:

LL Vendor # v	W-9	Property #	Initials	Property Shark/
Managed Yes No	ACH	Managed Designation		Assessor's office?
Debarred Yes No				







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#### **Designation by Owner-who will Manage and Lease Property**

I, being the true owner of record for the property or properties indicated below hereby grant to my agent as follows:

- 1. To act as my agent and representative with respect to the property with full power to lease said premise and execute a Housing Assistance Payment (HAP) contract with the Community Development Commission of Mendocino County (CDC).
- 2. To order, direct, and manage all repairs, alterations, and improvements to ensure safety and compliance with terms and conditions of the HAP Contract;
- 3. In general, to perform acts and things essential to the management of the premises.

**NOTE** If this agreement between Property Owner and Managing Agent should change, **OWNER** must notify CDC in <u>writing</u> of any such change. Additionally, the owner or agent acknowledges that the social security number or employer identification number listed below is correct and is the number to be used when reporting monies paid by CDC to the IRS.

#### Further thereto, I hereby authorize the CDC to:

Issue payments/checks and form 1099 to:

Mail correspondence to:

Managing Agent

Property Owner

Managing Agent

Property Owner Information				Pro	operty Age	ent Informati	ion
Name				Name			
Business Na	ame			Business Na	me		
Social S	ecurity	Employer ID	Number	Social Se	ecurity	Employer ID	Number
Individual	Sole	Partnership	Corporation	Individual Sole Partnership			Corporation
Mailing addr	ress			Mailing addre	ess		
City, State a	ate and ZIP code  City, State and ZIP code						
Phone Num	ber			Phone Number			
Alt Phone N	Number			Alt Phone No	umber		
Email				Email			
Signature		1	Date	Signature		Da	te







## Request for Taxpayer Identification Number and Certification

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

	1 N	lame (as shown on your income tax return). Name is required on this line; do not leave this line blank.				-				
ge 2.	<b>2</b> B	usiness name/disregarded entity name, if different from above								
Print or type See Specific Instructions on page	<b>3</b> C	check appropriate box for federal tax classification; check only <b>one</b> of the following seven boxes:  Individual/sole proprietor or C Corporation S Corporation Partnership single-member LLC  Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=partners	_	ust/estat	e cert	xemptio ain entit ructions mpt pay	ties, n on p	not ind age 3)	lividua ):	
Print or type		<b>Note.</b> For a single-member LLC that is disregarded, do not check LLC; check the appropriate box in the tax classification of the single-member owner.	'' -	above fo	וכ	mption f		FATC	A repo	orting
문능		Other (see instructions) ▶			(Appl	lies to accou	unts ma	aintained	l outside	the U.S.)
ecific	<b>5</b> A	ddress (number, street, and apt. or suite no.)	Reques	ster's nar	ne and a	ddress (	optio	nal)		
See S	<b>6</b> C	ity, state, and ZIP code								
	7 Li	ist account number(s) here (optional)								
Par	t I	Taxpayer Identification Number (TIN)								
		TIN in the appropriate box. The TIN provided must match the name given on line 1 to av		Social	security	numbe	•r			
reside entitie	nt ali s, it i	thholding. For individuals, this is generally your social security number (SSN). However, filen, sole proprietor, or disregarded entity, see the Part I instructions on page 3. For other is your employer identification number (EIN). If you do not have a number, see <i>How to ge</i>				-		-		
TIN on	pag	ge 3.		or						
Note.	If the	e account is in more than one name, see the instructions for line 1 and the chart on page	4 for	Emplo	yer iden	tificatio	n nu	mber		
guideli	ines	on whose number to enter.			_					
Part	Ш	Certification		-						
Under	pen	alties of perjury, I certify that:								
1. The	nur	mber shown on this form is my correct taxpayer identification number (or I am waiting for	a numb	oer to b	e issued	I to me	); an	d		
Ser	vice	t subject to backup withholding because: (a) I am exempt from backup withholding, or (b. (IRS) that I am subject to backup withholding as a result of a failure to report all interest er subject to backup withholding; and								
3. I ar	nal	J.S. citizen or other U.S. person (defined below); and								
4. The	FAT	CA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting	ng is cor	rect.						
becausinteres genera instruc	se yo st pa ally, p	on instructions. You must cross out item 2 above if you have been notified by the IRS the but have failed to report all interest and dividends on your tax return. For real estate transition, acquisition or abandonment of secured property, cancellation of debt, contributions to payments other than interest and dividends, you are not required to sign the certifications on page 3.	actions o an inc	, item 2 dividual	does no retireme	ot apply ent arra	y. Fo inger	r mor ment	tgage (IRA),	and
Sign Here		Signature of U.S. person ► Da	ate ►							
							-	-		

#### **General Instructions**

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

**Future developments.** Information about developments affecting Form W-9 (such as legislation enacted after we release it) is at www.irs.gov/fw9.

#### **Purpose of Form**

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) which may be your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN), to report on an information return the amount paid to you, or other amount reportable on an information return. Examples of information returns include, but are not limited to, the following:

- Form 1099-INT (interest earned or paid)
- Form 1099-DIV (dividends, including those from stocks or mutual funds)
- Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)
- Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)
- Form 1099-S (proceeds from real estate transactions)
- Form 1099-K (merchant card and third party network transactions)

- Form 1098 (home mortgage interest), 1098-E (student loan interest), 1098-T (tuition)
- Form 1099-C (canceled debt)
- Form 1099-A (acquisition or abandonment of secured property)

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.

If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See What is backup withholding? on page 2.

By signing the filled-out form, you:

- 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, and
- 4. Certify that FATCA code(s) entered on this form (if any) indicating that you are exempt from the FATCA reporting, is correct. See *What is FATCA reporting?* on page 2 for further information.

Form W-9 (Rev. 12-2014) Page **2** 

**Note.** If you are a U.S. person and 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 under section 1446 on any foreign partners' share of effectively connected taxable income from such business. Further, in certain cases where a Form W-9 has not been received, the rules under section 1446 require a partnership to presume that a partner is a foreign person, and pay the section 1446 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 section 1446 withholding on your share of partnership income.

In the cases below, the following person must give 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:

- In the case of a disregarded entity with a U.S. owner, the U.S. owner of the disregarded entity and not the entity;
- In the case of a grantor trust with a U.S. grantor or other U.S. owner, generally, the U.S. grantor or other U.S. owner of the grantor trust and not the trust; and
- In the case of a U.S. trust (other than a grantor trust), the U.S. trust (other than a grantor trust) and not the beneficiaries of the trust.

**Foreign person.** If you are a foreign person or the U.S. branch of a foreign bank that has elected to be treated as a U.S. person, do not use Form W-9. Instead, use the appropriate Form W-8 or Form 8233 (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, give the requester the appropriate completed Form W-8 or Form 8233.

#### **Backup Withholding**

What is backup withholding? Persons making certain payments to you must under certain conditions withhold and pay to the IRS 28% 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, payments made in settlement of payment card and third party network transactions, 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 *Exempt payee code* on page 3 and the separate Instructions for the Requester of Form W-9 for more information.

Also see Special rules for partnerships above.

#### What is FATCA reporting?

The Foreign Account Tax Compliance Act (FATCA) requires a participating foreign financial institution to report all United States account holders that are specified United States persons. Certain payees are exempt from FATCA reporting. See Exemption from FATCA reporting code on page 3 and the Instructions for the Requester of Form W-9 for more information.

#### **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**

#### Line 1

You must enter one of the following on this line; **do not** leave this line blank. The name should match the name on your tax return.

If this Form W-9 is for a joint account, list first, and then circle, the name of the person or entity whose number you entered in Part I of Form W-9.

a. **Individual.** Generally, enter the name shown on your tax return. If you have changed your last name without informing the Social Security Administration (SSA) of the name change, enter your first name, the last name as shown on your social security card, and your new last name.

**Note. ITIN applicant:** Enter your individual name as it was entered on your Form W-7 application, line 1a. This should also be the same as the name you entered on the Form 1040/1040A/1040EZ you filed with your application.

- b. **Sole proprietor or single-member LLC.** Enter your individual name as shown on your 1040/1040A/1040EZ on line 1. You may enter your business, trade, or "doing business as" (DBA) name on line 2.
- c. Partnership, LLC that is not a single-member LLC, C Corporation, or S Corporation. Enter the entity's name as shown on the entity's tax return on line 1 and any business, trade, or DBA name on line 2.
- d. Other entities. Enter your name as shown on required U.S. federal tax documents on line 1. This name should match the name shown on the charter or other legal document creating the entity. You may enter any business, trade, or DBA name on line 2.
- e. **Disregarded entity.** For U.S. federal tax purposes, an entity that is disregarded as an entity separate from its owner is treated as a "disregarded entity." See Regulations section 301.7701-2(c)(2)(iii). Enter the owner's name on line 1. The name of the entity entered on line 1 should never be a disregarded entity. The name on line 1 should be the name shown on the income tax return on which the income should be reported. For example, if a foreign LLC that is treated as a disregarded entity for U.S. federal tax purposes has a single owner that is a U.S. person, the U.S. owner's name is required to be provided on line 1. 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 line 2, "Business name/disregarded entity name." If the owner of the disregarded entity is a foreign person, the owner must complete an appropriate Form W-8 instead of a Form W-9. This is the case even if the foreign person has a U.S. TIN.

Form W-9 (Rev. 12-2014) Page **3** 

#### Line 2

If you have a business name, trade name, DBA name, or disregarded entity name, you may enter it on line 2.

#### Line 3

Check the appropriate box in line 3 for the U.S. federal tax classification of the person whose name is entered on line 1. Check only one box in line 3.

Limited Liability Company (LLC). If the name on line 1 is an LLC treated as a partnership for U.S. federal tax purposes, check the "Limited Liability Company" box and enter "P" in the space provided. If the LLC has filed Form 8832 or 2553 to be taxed as a corporation, check the "Limited Liability Company" box and in the space provided enter "C" for C corporation or "S" for S corporation. If it is a single-member LLC that is a disregarded entity, do not check the "Limited Liability Company" box; instead check the first box in line 3 "Individual/sole proprietor or single-member LLC."

#### Line 4, Exemptions

If you are exempt from backup withholding and/or FATCA reporting, enter in the appropriate space in line 4 any code(s) that may apply to you.

#### Exempt payee code.

- Generally, individuals (including sole proprietors) are not exempt from backup withholding.
- Except as provided below, corporations are exempt from backup withholding for certain payments, including interest and dividends.
- Corporations are not exempt from backup withholding for payments made in settlement of payment card or third party network transactions.
- Corporations are not exempt from backup withholding with respect to attorneys' fees or gross proceeds paid to attorneys, and corporations that provide medical or health care services are not exempt with respect to payments reportable on Form 1099-MISC.

The following codes identify payees that are exempt from backup withholding. Enter the appropriate code in the space in line 4.

- 1-An organization exempt from tax under section 501(a), any IRA, or a custodial account under section 403(b)(7) if the account satisfies the requirements of section 401(f)(2)
  - 2-The United States or any of its agencies or instrumentalities
- $3-\!A$  state, the District of Columbia, a U.S. commonwealth or possession, or any of their political subdivisions or instrumentalities
- $4-\!\mbox{A}$  foreign government or any of its political subdivisions, agencies, or instrumentalities
  - 5-A corporation
- 6—A dealer in securities or commodities required to register in the United States, the District of Columbia, or a U.S. commonwealth or possession
- $7\!-\!\mathrm{A}$  futures commission merchant registered with the Commodity Futures Trading Commission
  - 8-A real estate investment trust
- $9-\!$  An entity registered at all times during the tax year under the Investment Company Act of 1940
  - 10-A common trust fund operated by a bank under section 584(a)
  - 11-A financial institution
- $12\!-\!A$  middleman known in the investment community as a nominee or custodian
  - 13-A trust exempt from tax under section 664 or described in section 4947

The following chart shows types of payments that may be exempt from backup withholding. The chart applies to the exempt payees listed above, 1 through 13.

IF the payment is for	THEN the payment is exempt for
Interest and dividend payments	All exempt payees except for 7
Broker transactions	Exempt payees 1 through 4 and 6 through 11 and all C corporations. S corporations must not enter an exempt payee code because they are exempt only for sales of noncovered securities acquired prior to 2012.
Barter exchange transactions and patronage dividends	Exempt payees 1 through 4
Payments over \$600 required to be reported and direct sales over \$5,000 <sup>1</sup>	Generally, exempt payees 1 through 5 <sup>2</sup>
Payments made in settlement of payment card or third party network transactions	Exempt payees 1 through 4

<sup>&</sup>lt;sup>1</sup>See Form 1099-MISC, Miscellaneous Income, and its instructions.

<sup>2</sup> However, the following payments made to a corporation and reportable on Form 1099-MISC are not exempt from backup withholding: medical and health care payments, attorneys' fees, gross proceeds paid to an attorney reportable under section 6045(f), and payments for services paid by a federal executive agency.

Exemption from FATCA reporting code. The following codes identify payees that are exempt from reporting under FATCA. These codes apply to persons submitting this form for accounts maintained outside of the United States by certain foreign financial institutions. Therefore, if you are only submitting this form for an account you hold in the United States, you may leave this field blank. Consult with the person requesting this form if you are uncertain if the financial institution is subject to these requirements. A requester may indicate that a code is not required by providing you with a Form W-9 with "Not Applicable" (or any similar indication) written or printed on the line for a FATCA exemption code.

- A—An organization exempt from tax under section 501(a) or any individual retirement plan as defined in section 7701(a)(37)
- B-The United States or any of its agencies or instrumentalities
- C—A state, the District of Columbia, a U.S. commonwealth or possession, or any of their political subdivisions or instrumentalities
- D—A corporation the stock of which is regularly traded on one or more established securities markets, as described in Regulations section 1.1472-1(c)(1)(i)
- E—A corporation that is a member of the same expanded affiliated group as a corporation described in Regulations section 1.1472-1(c)(1)(i)
- F—A dealer in securities, commodities, or derivative financial instruments (including notional principal contracts, futures, forwards, and options) that is registered as such under the laws of the United States or any state
  - G—A real estate investment trust
- H—A regulated investment company as defined in section 851 or an entity registered at all times during the tax year under the Investment Company Act of
- I-A common trust fund as defined in section 584(a)
- J-A bank as defined in section 581
- K-A broker
- L-A trust exempt from tax under section 664 or described in section 4947(a)(1)
- M-A tax exempt trust under a section 403(b) plan or section 457(g) plan

**Note.** You may wish to consult with the financial institution requesting this form to determine whether the FATCA code and/or exempt payee code should be completed.

#### Line 5

Enter your address (number, street, and apartment or suite number). This is where the requester of this Form W-9 will mail your information returns.

#### Line 6

Enter your city, state, and ZIP code.

#### Part I. Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. If you are a resident alien and you do not have and are not eligible to get an SSN, your TIN is your IRS individual taxpayer identification number (ITIN). Enter it in the social security number box. If you do not have an ITIN, see *How to get a TIN* below.

If you are a sole proprietor and you have an EIN, you may enter either your SSN or EIN. However, the IRS prefers that you use your SSN.

If you are a single-member LLC that is disregarded as an entity separate from its owner (see *Limited Liability Company (LLC)* on this page), enter the owner's SSN (or EIN, if the owner has one). Do not enter the disregarded entity's EIN. If the LLC is classified as a corporation or partnership, enter the entity's EIN.

**Note.** See the chart on page 4 for further clarification of name and TIN combinations.

How to get a TIN. If you do not have a TIN, apply for one immediately. To apply for an SSN, get Form SS-5, Application for a Social Security Card, from your local SSA office or get this form online at <a href="https://www.ssa.gov">www.ssa.gov</a>. You may also get this form by calling 1-800-772-1213. Use Form W-7, Application for IRS Individual Taxpayer Identification Number, to apply for an ITIN, or Form SS-4, Application for Employer Identification Number, to apply for an EIN. You can apply for an EIN online by accessing the IRS website at <a href="https://www.irs.gov/businesses">www.irs.gov/businesses</a> and clicking on Employer Identification Number (EIN) under Starting a Business. You can get Forms W-7 and SS-4 from the IRS by visiting IRS.gov or by calling 1-800-TAX-FORM (1-800-829-3676).

If you are asked to complete Form W-9 but do not have a TIN, apply for a TIN and write "Applied For" in the space for the TIN, sign and date the form, and give it to the requester. For interest and dividend payments, and certain payments made with respect to readily tradable instruments, generally you will have 60 days to get a TIN and give it to the requester before you are subject to backup withholding on payments. The 60-day rule does not apply to other types of payments. You will be subject to backup withholding on all such payments until you provide your TIN to the requester.

**Note.** Entering "Applied For" means that you have already applied for a TIN or that you intend to apply for one soon.

Caution: A disregarded U.S. entity that has a foreign owner must use the appropriate Form W-8.

Form W-9 (Rev. 12-2014) Page 4

#### Part II. Certification

To establish to the withholding agent that you are a U.S. person, or resident alien, sign Form W-9. You may be requested to sign by the withholding agent even if items 1, 4, or 5 below indicate otherwise.

For a joint account, only the person whose TIN is shown in Part I should sign (when required). In the case of a disregarded entity, the person identified on line 1 must sign. Exempt payees, see Exempt payee code earlier.

Signature requirements. Complete the certification as indicated in items 1 through 5 below

- 1. Interest, dividend, and barter exchange accounts opened before 1984 and broker accounts considered active during 1983. You must give your correct TIN, but you do not have to sign the certification.
- 2. Interest, dividend, broker, and barter exchange accounts opened after 1983 and broker accounts considered inactive during 1983. You must sign the certification or backup withholding will apply. If you are subject to backup withholding and you are merely providing your correct TIN to the requester, you must cross out item 2 in the certification before signing the form.
- 3. Real estate transactions. You must sign the certification. You may cross out item 2 of the certification.
- 4. Other payments. You must give your correct TIN, but you do not have to sign the certification unless you have been notified that you have previously given an incorrect TIN. "Other payments" include payments made in the course of the requester's trade or business for rents, royalties, goods (other than bills for merchandise), medical and health care services (including payments to corporations), payments to a nonemployee for services, payments made in settlement of payment card and third party network transactions, payments to certain fishing boat crew members and fishermen, and gross proceeds paid to attorneys (including payments to corporations).
- 5. Mortgage interest paid by you, acquisition or abandonment of secured property, cancellation of debt, qualified tuition program payments (under section 529), IRA, Coverdell ESA, Archer MSA or HSA contributions or distributions, and pension distributions. You must give your correct TIN, but you do not have to sign the certification.

#### What Name and Number To Give the Requester

For this type of account:	Give name and SSN of:
Individual     Two or more individuals (joint account)	The individual The actual owner of the account or, if combined funds, the first individual on the account
Custodian account of a minor (Uniform Gift to Minors Act)	The minor <sup>2</sup>
a. The usual revocable savings trust (grantor is also trustee)     b. So-called trust account that is not a legal or valid trust under state law	The grantor-trustee¹  The actual owner¹
<ol><li>Sole proprietorship or disregarded entity owned by an individual</li></ol>	The owner <sup>3</sup>
6. Grantor trust filing under Optional Form 1099 Filing Method 1 (see Regulations section 1.671-4(b)(2)(i) (A))	The grantor*
For this type of account:	Give name and EIN of:
7. Disregarded entity not owned by an individual	The owner
8. A valid trust, estate, or pension trust	Legal entity⁴
Corporation or LLC electing corporate status on Form 8832 or Form 2553	The corporation
Association, club, religious, charitable, educational, or other tax- exempt organization	The organization
11. Partnership or multi-member LLC	The partnership
12. A broker or registered nominee	The broker or nominee
13. Account with the Department of Agriculture in the name of a public entity (such as a state or local government, school district, or prison) that receives agricultural program payments	The public entity
14. Grantor trust filing under the Form 1041 Filing Method or the Optional Form 1099 Filing Method 2 (see Regulations section 1.671-4(b)(2)(i) (B))	The trust

List first and circle the name of the person whose number you furnish. If only one person on a joint account has an SSN, that person's number must be furnished.

You must show your individual name and you may also enter your business or DBA name on the "Business name/disregarded entity" name line. You may use either your SSN or EIN (if you have one), but the IRS encourages you to use your SSN.

List first and circle the name of the trust, estate, or pension trust. (Do not furnish the TIN of the personal representative or trustee unless the legal entity itself is not designated in the account title.) Also see Special rules for partnerships on page 2. \*Note. Grantor also must provide a Form W-9 to trustee of trust.

Note. If no name is circled when more than one name is listed, the number will be considered to be that of the first name listed.

#### Secure Your Tax Records from Identity Theft

Identity theft occurs when someone uses your personal information such as your name, SSN, or other identifying information, without your permission, to commit fraud or other crimes. An identity thief may use your SSN to get a job or may file a tax return using your SSN to receive a refund.

To reduce your risk:

- · Protect your SSN,
- Ensure your employer is protecting your SSN, and
- Be careful when choosing a tax preparer.

If your tax records are affected by identity theft and you receive a notice from the IRS, respond right away to the name and phone number printed on the IRS notice or letter.

If your tax records are not currently affected by identity theft but you think you are at risk due to a lost or stolen purse or wallet, questionable credit card activity or credit report, contact the IRS Identity Theft Hotline at 1-800-908-4490 or submit Form 14039

For more information, see Publication 4535, Identity Theft Prevention and Victim

Victims of identity theft who are experiencing economic harm or a system problem, or are seeking help in resolving tax problems that have not been resolved through normal channels, may be eligible for Taxpayer Advocate Service (TAS) assistance. You can reach TAS by calling the TAS toll-free case intake line at 1-877-777-4778 or TTY/TDD 1-800-829-4059.

Protect yourself from suspicious emails or phishing schemes. Phishing is the creation and use of email and websites designed to mimic legitimate business emails and websites. The most common act is sending an email to a user falsely claiming to be an established legitimate enterprise in an attempt to scam the user into surrendering private information that will be used for identity theft.

The IRS does not initiate contacts with taxpayers via emails. Also, the IRS does not request personal detailed information through email or ask taxpayers for the PIN numbers, passwords, or similar secret access information for their credit card, bank, or other financial accounts.

If you receive an unsolicited email claiming to be from the IRS, forward this message to <code>phishing@irs.gov</code>. You may also report misuse of the IRS name, logo, or other IRS property to the Treasury Inspector General for Tax Administration (TIGTA) at 1-800-366-4484. You can forward suspicious emails to the Federal Trade Commission at: spam@uce.gov or contact them at www.ftc.gov/idtheft or 1-877-IDTHEFT (1-877-438-4338).

Visit IRS.gov to learn more about identity theft and how to reduce your risk.

#### **Privacy Act Notice**

Section 6109 of the Internal Revenue Code requires you to provide your correct TIN to persons (including federal agencies) who are required to file information returns with the IRS to report interest, dividends, or certain other income paid to you; mortgage interest you paid; the acquisition or abandonment of secured property; the cancellation of debt; or contributions you made to an IRA, Archer MSA, or HSA. The person collecting this form uses the information on the form to file information returns with the IRS, reporting the above information. Routine uses of this information include giving it to the Department of Justice for civil and criminal litigation and to cities, states, the District of Columbia, and U.S. commonwealths and possessions for use in administering their laws. The information also may be disclosed to other countries under a treaty, to federal and state agencies to enforce civil and criminal laws, or to federal law enforcement and intelligence agencies to combat terrorism. You must provide your TIN whether or not you are required to file a tax return. Under section 3406, payers must generally withhold a percentage of taxable interest, dividend, and certain other payments to a payee who does not give a TIN to the payer. Certain penalties may also apply for providing false or fraudulent information.

Circle the minor's name and furnish the minor's SSN.



1076 N. State St., Ukiah, CA 95482

707/463-5462 Fax: 707/463-4188 TDD: Ca. Relay 711

## **Authorization Agreement for Direct Deposits (ACH Credits)**

I authorize the Community Development Commission of Mendocino County ("CDC") to initiate ACH Credit deposits ("Credit Entries") to my deposit account ("Account") at my Financial Institution named below. The authorization is for the deposit of recurring payments you owe me directly into my Account. IN ORDER TO TERMINATE OR REVOKE THIS AUTHORIZATION, I MUST NOTIFY YOU, THE COMMUNITY DEVELOPMENT COMMISSION OF MENDOCINO COUNTY, IN WRITING. So long as this authorization has not been terminated or revoked, any Credit Entry originated by CDC under this authorization shall be conclusively presumed to be properly authorized for deposit to my Account.

I understand that if my Account is closed, my Financial Institution cannot accept any Credit Entry and the entry will be refused. If this occurs CDC will not be able to reprocess the Credit Entry without further written authorization from me.

I authorize my Financial Institution to accept these Credit Entries to my Account upon receipt and without advice to me.

My Financial Institution Name: Street Address or Branch: City, State, Zip:	
My Deposit Account Number:Names(s) on the Account:	
recurring amounts you owe me on the 1 <sup>st</sup> day that day if that day is not a business day.) The send all notices and advices to the address shall hereby certify that I am an owner and author	ized signer of the Account. I acknowledge receiving y a copy of this Authorization Agreement to my
Date:	O'ana a tama
Tenant names & Property Address(es):	Signature  Mailing Address:  ——————————————————————————————————
	LANDLORD #

PLEASE ATTACH A VOIDED CHECK (NO DEPOSIT TICKETS PLEASE)



Persons requiring a reasonable accommodation due to a disability may request such an accommodation at any time during this process.



\*\*Please attach an additional page if more tenants & properties





1076 N. State St., Ukiah, CA 95482

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#### Landlord/Owner Guide

#### Responsibilities of the Housing Authority, Owner and Assisted Families:

The HCVP depends on a cooperative relationship between the housing authority, assisted family and owner or property manager. The program is designed to maintain the regular owner and tenant relationship. Our main purpose is to subsidize families' rents; all other aspects of the lease agreement must be resolved between the landlord and the tenant. The following summarizes the responsibilities of each party.

#### **The Housing Authority:**

- Reviews all applicants to determine families' eligibility for the program.
- Explain the rules of the program to families and property owners/managers.
- Issue vouchers to families.
- Inspect the assisted units for compliance with housing quality standards.
- Approve the unit, owner and lease.
- Make housing assistance payments to the owner in a timely manner.
- Re-examine the family's income and composition annually and adjust the rent and process changes in rent portions when income of family composition changes.
- Ensure owners and families comply with the program rules.
- Provide prompt, professional service to owners and tenant families.

#### The Owner/Landlord/Manager:

- Thoroughly screen and interview families who apply.
- Maintain the property by making necessary repairs in a timely manner.
- Collect application fees, security deposits and tenant's monthly rent portion.
- Manages the property and enforces the lease.
- Comply with the terms of the Housing Assistance Payment Contract and HUD Tenancy addendum.
- Comply with all fair housing laws, including non-discrimination and reasonable accommodation
- Notify the housing authority if a tenant vacates the unit and return the housing assistance payments received after a family vacates a unit.
- Notify the housing authority of any owner change immediately so payment to the new landlord will not be delayed.
- Notify housing authority of any lease violations.

#### The Tenant/Program Participant/Family:

- Provide the housing authority with complete and accurate information pertaining to the family income and composition.
- Report changes in income and family composition that happens throughout the year.
- Locate a suitable unit and pay security deposit and application fee to the owner.
- Attend scheduled appointments and return documents on time.
- Maintains the property and repairs and damages beyond normal wear and tear.
- Comply with the terms of the lease.
- Pay their portion of rent on time to the owner.
- Comply with all family obligations under the Housing Choice Voucher Program.







1076 N. State St., Ukiah, CA 95482

707/463-5462 Fax: 707/463-4188 TDD: Ca. Relay 711

### The Housing Quality Standards (HQS) Inspection

Housing quality standards (HQS) inspections ensure that your unit is safe and sanitary. An initial HQS inspection is required before assistance can be provided. After that, the unit may be subject to annual or bi-annual inspections to continue in the program. Complaint and quality control inspections may be performed between inspections. A HQS inspector will contact the owner by phone to schedule the inspection.

If a unit fails the initial inspection, all failed items must be corrected prior to subsidy being paid on the unit. If it fails an annual inspection, failed items must be corrected for the subsidy to continue. The owner or property manager is required to repair items within 30 days or less as specified in the inspection report. However, if the failed item is considered life-threatening, federal law requires the repair to be made within 24 hours. Additional time may be granted in cases where extensive repairs are needed.

While it is generally your responsibility to maintain an assisted unit to HUD standards, the tenant is responsible for damages the tenant causes. You may require the tenant to repair or pay for the repair of items the tenant has damaged. You would give the tenant written notice, explaining which items they are to repair and when, with a copy provided to the Housing Authority. If tenants fail to repair damages they caused in 14 to 30 days, their rental assistance may be terminated.

If a landlord fails to complete the repair they are responsible for in the required time, the Housing Authority may begin withholding housing assistance payments. The tenant cannot be held responsible for the Housing Authority's portion of the rent. When the repairs have been made and the unit passes the final HQS inspection, the Housing Authority will resume housing assistance payments, prorated from the date of the inspection.

#### RENT REASONABLENESS

The requested rent amount must be reasonable as compared to other similar un-assisted units. The Housing Authority must approve all rents requested before a contract or lease is executed.

#### **HQS Checklist for Landlords**

Each unit rented under the Housing Choice Voucher Program must pass a Housing Quality Standards (HQS) inspection. Units sometimes fail housing inspections because landlords and tenants are not familiar with HQS requirements and/or have not assessed the condition of the unit prior to the scheduled inspection. For these reasons, the Housing Authority encourages you to conduct pre-inspections prior to the scheduled inspection. If the most commonly failed items are corrected before the inspection, the unit will have a much better chance of passing the inspection the first time. All utilities must be connected before an inspection can be conducted. The checklist below is a tool for owners to prepare their unit for an HQS inspection. The items on this checklist must be working or completed prior to the HQS inspection.







## Community Development Commission of Mendocino County 1076 N. State St., Ukiah, CA 95482

707/463-5462 Fax: 707/463-4188 TDD: Ca. Relay 711

Bathroo	m
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	The bathroom must be located in a separate room and have a flush toilet.
	The unit must have a fixed basin with a sink trap and hot and cold running water.
	The unit must have a shower or bathtub with hot and cold running water.
	The toilet facilities must utilize an approvable public or private disposal system, including a locally approvable septic system.
Kitch	en
	The unit must have a cooking stove or range and refrigerator of appropriate size for the unit (i.e., family) all in proper operating condition. Stoves, ovens, and ranges must be in working condition with all control knobs and handles. Pilots must light when burners and oven are turned on. The refrigerator gasket must be intact, fit snugly, and have no cracks. The kickplate must be secured properly.
	The unit must have a kitchen sink in proper operating condition with a sink trap and hot and cold running water, which drains into an approvable public or private wastewater system.
	The unit must provide space for the storage, preparation, and serving of food.
	There must be facilities and services for the sanitary disposal of food waste and refuse, including temporary storage facilities where necessary (i.e., garbage containers).
Space	e and Security
	The unit must have a minimum of a living room, kitchen area, and bathroom.
	The unit must contain at least one sleeping or living/sleeping room for each two persons.
	The unit's windows, which are accessible from the outside (less than 6 feet off the ground), such as basement, first-floor, and fire escape windows, must be lockable (e.g., window units with sash pins or sash locks, and combination windows with latches). Security bars are allowed. However, if they are installed on bedroom windows and/or exit doors they must be designed to allow emergency egress.
	Vertically opening windows must stay up and open without the use of props.
	Windows designed to open should be in working condition.
	Windowpanes must not be broken or cracked.
	The unit's exterior doors (i.e., those that allow access to or from the unit) must lock properly, and be compliant with current local Property Code requirements regarding security devices for residential tenancies. Striker plate must align with lock and all hardware must be securely attached. If gaps allow for air infiltration, weather-stripping should be applied.







1076 N. State St., Ukiah, CA 95482

707/463-5462 Fax: 707/463-4188 TDD: Ca. Relay 711

#### **Thermal Environment (Heating and Cooling System)**

The unit must contain a safe heating system (and safe cooling system, where present), which is in proper operating condition and can provide adequate heat (and cooling, if applicable), either directly or indirectly, to each room used for living in order to assure a healthy living environment appropriate to the climate.
Hot water heaters must have a pressure relief valve and discharge line that extends to within 6 inches of the floor or to the outside. Discharge tubing must be galvanized steel, copper or CPVC piping, not PVC. There should be no exposed wires. Flammable materials should not be stored near the hot water heater. Gas water heaters must be properly vented.
The unit must not contain any unvented room heaters, which burn gas, oil, or kerosene. A working radiator would be acceptable.
ination and Electricity
There must be at least one window in the living room and in each sleeping room.
The kitchen area and the bathroom must have a permanent ceiling or wall type light fixture in working condition.
The kitchen area must also have at least one electrical outlet in operating condition.
The living room and each bedroom must have <u>at least two</u> electrical outlets in operating condition. Permanently installed overhead or wall-mounted light fixtures may count as one of the required electrical outlets.
All other rooms used for living require a means of natural or artificial illumination such as a light fixture, a wall outlet to serve a lamp, a window in the room, or adequate light from an adjacent room.
Each electrical outlet must be permanently installed in the baseboard, wall, or floor. No extension cords may be used for outlets.
Table or floor lamps, ceiling lamps plugged into a socket, or an extension cord plugged into another plug cannot be counted as an outlet for HQS purposes.
Electrical hazards of any kind, either inside or outside the unit would receive a fail rating.
ture and Materials
Interior ceilings, walls, and floors must not have any serious defects such as severe bulging or leaning, large holes, loose surface materials, severe buckling, missing parts, or other serious damage.
The floors must also not have any major movement under walking stress, or tripping
hazards presented by the permanent floor coverings.



EQUAL HOUSING



1076 N. State St., Ukiah, CA 95482

707/463-5462 Fax: 707/463-4188 TDD: Ca. Relay 711

	TDD. Ga. Relay 1
	The exterior wall structure and surfaces must not have any serious defects such as serious leaning, buckling, sagging, large holes, unfastened and falling components, or defects that would result in air infiltration or vermin infestation.
	The condition and equipment of interior and exterior stairways, halls, porches, walkways, etc. must not present a danger of tripping and falling. Examples of dangerous conditions include, but are not limited to, broken or missing steps and loose boards.
	Stairways with four or more steps must have a handrail that is securely supported and runs the length of the stairway.
	Railings are required for decks, porches or steps that are more than 30 inches from the ground.
	Elevators must be working, safe, and compliant with locally enforced codes.
	Manufactured homes must be securely anchored by tie down devices, which distribute and transfer the loads imposed by the unit to appropriate ground anchors so as to resist wind overturning and sliding.
Interi	or Air Quality
	The unit must be free from dangerous levels of air pollution from carbon monoxide, sewer gas, fuel gas, dust, and other harmful pollutants.
	The unit must have adequate air circulation.
	Bathrooms must have a window that opens properly or a permanently installed exhaust fan.
	Any room used for sleeping must have at least one window that opens properly, if the window was so designed.
Water	Supply
	An approvable public or private water supply must serve the unit, which is sanitary and free from contamination.
Lead-	Based Paint
	A dwelling unit constructed before 1978 that is occupied by a family that includes a child under the age of six years must include a visual inspection for defective paint surfaces. Defective paint surface is defined as a surface on which the paint is cracking, scaling, chipping, peeling or loose. If defective paint surfaces are found, such surfaces must be treated in accordance with state and EPA requirements.
Acces	SS
	The unit must have direct access for the tenant to enter and exit, without the unauthorized use of other private properties.



Persons requiring a reasonable accommodation due to a disability may request such an accommodation at any time during this process.





# Community Development Commission of Mendocino County 1076 N. State St., Ukiah, CA 95482

707/463-5462 Fax: 707/463-4188

	TDD: Ca. Relay The building must provide an alternate means of exit in case of fire (such as fire stairs or exit through windows, with the use of a ladder if windows are above the second floor).
	Entry/exits must not be "blocked" by debris, stored items, non-working locks, or doors that have been nailed shut or otherwise obstructed.
Site a	nd Neighborhood
	The site and neighborhood must be reasonably free of serious conditions, which would endanger the health and safety of residents.
Infest	ation
	The unit and its equipment must be free of serious vermin and rodent infestation.
Smok	e Detectors
	The unit must have at least one battery operated or hardwired smoke detector that is in proper operating condition on each level of the unit, including basements but excluding crawl spaces and unfinished attics. Detectors must be installed in accordance with and meet the requirements of the National Fire Protection Association Standard (NFPA) 74 or its successors (currently NFPA 720). If any hearing-impaired person occupies the unit, smoke detectors must have an alarm system designed for hearing-impaired persons as specified by NFPA 74 (or its successors). In new construction, there must be a smoke detector in each room used for sleeping, and those must be arranged so that the operation of any detector will cause all other detectors to alarm.
Utiliti	es
	All landlord provided appliances must be in place at the time of the inspection.  All utilities (water, electricity, and gas where applicable) should be on at the time of the inspection.
	All gas appliances with manual pilot light must have pilots lit at the time of the inspection.
Occu	pancy
	Unit to be inspected must be either vacant or occupied by the Section 8 client applying for that unit.



