



Massachusetts Rental Voucher Program Property Owner Packet

RE: (Tenant's Name)

Dear Prospective Property Owner:

The Massachusetts Rental Voucher Program (MRVP) Mobile is a state-funded program that provides rental subsidies to low-income households. Eligible program participants are issued vouchers enabling them to find market-rate units in neighborhoods of their choice. Under MRVP, households pay up to 40% of monthly income toward the rent. Metro Housing|Boston pays the difference in the form of monthly voucher payments to property owners. Program participants remain on the program for as long as they remain income-eligible and in good standing with the program.

The following is a list of documents required to be submitted to Metro Housing|Boston before subsidy payments can be authorized:

- 1) **Request for Program Payment** (attached) – please ensure it is signed and dated by both parties
- 2) **W-9 Form** (attached) – the name on the W9 is required to match the deed / real estate tax bill
- 3) **Direct Deposit Form** (attached) – All property owners are required to sign up for direct deposit. Please submit the completed form along with one of the following: a copy of a voided check, a letter from the bank or a bank statement containing the account name, the routing number and the bank account number.
- 4) **Request for Rent Approval** (attached)
- 5) **Certificate of Fitness (COF)** – To obtain the Certificate of Fitness or equivalent inspection report confirming that the unit is in compliance with Article II of the State Sanitary Code, please contact your local Board of Health, a third-party Certified Health Officer or a Registered Sanitarian. The inspection cannot be scheduled through Metro Housing|Boston.

If you own a property in Boston and will be requesting the inspection through Boston Inspectional Services, you will need to submit the following to Boston Inspectional Services:

- a) A document indicating that the subsidizing agency requires the inspection
- b) A check for the inspection fees (inspections are \$50 per unit for a building with 1-3 units and \$75 for a building with 4 or more)
- c) Registration with the city's rental registration database if the building does *not* have an official lodging house license

Please contact Boston Inspectional Services with any questions regarding these requirements at isd@boston.gov, or (617) 635-5300.

- 6) **Proof of Ownership** – acceptable verifications are either a copy of your most recent real estate tax bill or a registered deed.
- 7) **Lead Paint Certificate (LOC)** – If a child under the age of 6 will be residing in a unit built before 1978, certification from a Certified Lead Inspector is required to verify that the unit is in compliance with applicable lead paint laws. If the unit was built in 1978 or after, a copy of the building permit is required instead.

Please allow 15-30 days for Metro Housing|Boston to approve the documents above and to determine rent reasonableness. The tenant should not move into the unit until Metro Housing|Boston has notified both parties that the unit is approved. The tenant may be responsible for the full contract rent if moving in prior to approval.

Following approval, the relocation specialist will: (1) confirm the move-in date with the property owner; (2) determine the monthly subsidy payment and the tenant's rent portion; and (3) send the MRVP Voucher Payment Contract and the MRVP Lease Addendum to the property owner.

Property owners may use their own lease or request the MRVP Model Lease. Only one lease may be used. The MRVP Lease Addendum must be attached to the lease, regardless of which lease is used.

If you will be using your own lease, it must contain:

- a) full address of the unit;
- b) beginning and ending dates of the 12-month lease (for example: 1/5/2019-12/31/2019);
- c) utility responsibilities; and
- d) the contract rent

Under MRVP, the lease and contract are not signed annually if the terms of the lease and or contract don't change. For lease and contracts received on or before the 18th of any given month, voucher payments (including retroactive payments, if applicable) will be issued to you on the first of the following month. Payments may be delayed by a month for leases and contracts received after the 18th.

Voucher payments will be issued around the first of the month each month for as long as the tenant resides in the unit and remains on the program.

OTHER INFORMATION:

MRVP does not pay for utilities, security deposits, or any other fee or charge owned by the tenant and does not make any advance voucher payments for last month's rent. MRVP will pay the voucher payment for first month's rent once there is a signed lease and contract in place and once the tenant occupies the unit.

Tenants requesting assistance with housing-related costs should contact our Housing Consumer Education Center (HCEC). More information can be found on our website.

We are required to provide property owners with information about their rights and obligations under the Violence Against Women Act (VAWA) when they begin their participation in MRVP. These forms can be found here: <http://bit.ly/VAWAcertification> (the Certification of Domestic Violence, Dating Violence Sexual Assault, and Stalking); <http://bit.ly/VAWANotice> (the Notice to Property Owners and Property Managers Regarding VAWA).

Metro Housing|Boston administers MRVP vouchers in over 30 towns in the Greater Boston Area. A full list can be found on our website under About Us, Communities We Serve. *(Please note: Lynn Housing Authority is administering MRVP vouchers for units located in Lynn.)* In instances where the unit falls outside of our service area, Metro Housing|Boston is required to transfer the tenant's file by mail to the regional administering agency. The transfer takes up to 5 business days. Metro Housing|Boston will notify the property owner and the tenant in writing and or by phone that the voucher is being transferred and will provide contact information for a staff member at the receiving regional administering agency. The new administering agency will complete the leasing process.

For any questions, please contact (617) 425-6611 or Gateway@metrohousingboston.org. You can also find more information on our website: www.metrohousingboston.org.

Sincerely,

MRVP, Leased Housing

Fax: (617) 532-7670

Enclosures: MRVP Request for Program Payment, W9 Form, Direct Deposit Form



People First. Housing Always.

REQUEST FOR RENT APPROVAL (MRVP Mobile Only): For New Lease-Ups and Rent Increases
(Increases only: Attach a copy of the original notice sent to the tenant)

Upon receipt of this form, Metro Housing|Boston will determine if the requested rent is reasonable by comparing rents of equivalent units in the private market. We will notify you in writing regarding the outcome of your request within thirty (30) days.

Mobile Rent Increase Eligibility Requirements:

- 1. The rent increase must be requested for the lease renewal date.
2. The tenant must be notified in writing, and a copy of the request must be submitted to Metro Housing|Boston at least 60 days, but not more than 120 days, prior to the lease renewal date.
3. Only one rent increase can be approved within any 12-month period.

If the above criteria are not met, a rent increase cannot be considered at this time. For project-based rent increases: contact the Project-Based Lead Specialist at (617)425-6757.

For internal use only:
Eligible/Not Eligible
Rent approved/denied
Final Rent: \$
Effective date:
Reason:
Reasonable rent: \$

Please complete this form and have it mailed or hand-delivered with all relevant

attachments to: Metro Housing|Boston, 1411 Tremont Street, Boston, MA 02120, Attn: MRVP Rent. You can also fax (617) 532-7524, or email MRVPrent@metrohousingboston.org. If you have any questions, you may call the MRVP Lead Specialist at (617) 425-6649.

- 1. Type of request (select one): New lease-up Rent Increase
2. What is the requested rent for the unit? \$
Rents for mobile units must fall within MRVP maximum rent limits (under MRVP forms at www.metrohousingboston.org)
3. Number of habitable bedrooms:
4. Tenant Name:
5. Rental Unit Address: Unit #: City/State/Zip:
6. Legal Owner's Name: Property Manager (if different):
7. Property Manager Address: City/State/Zip:
8. Owner's/Property Manager's Phone Number: Email:
9. Select the type of house/apartment: Single Family Detached Duplex/2-Family 3-Family
Row House/Town House Low-Rise (3 or 4 stories) High-Rise (5 or more stories) Multi-family
10. Please complete the table below by indicating the fuel type and payment responsibility for each utility (required):

Table with 3 columns: Utility Type, Fuel Type, Payment Responsibility. Rows include Heating fuel, Cooking fuel, Hot Water, Other Electricity, and Water.

- 11. (Increase only) Will the payment responsibility for the utilities change? No Yes (New lease required)
12. Question 12 (a-d) is optional but will aid in performing a more accurate market analysis.
a. Please indicate which of the following features and amenities are included in the rent: Central AC Refrigerator Microwave Assigned parking space Parking garage In-unit washer & dryer W/D hook-up Dishwasher Other (specify):
b. How many bathrooms are in the unit? 1 1.5 2 Other:
c. What is the square footage of the unit? sq. ft.
d. What year was the property originally built? (if there have been recent renovations, attach documentation)

(Increase Only) Tenant Notification (You must select at least one):

I (the tenant) have acknowledged the notice of rent increase, and by signing I certify that the owner has notified me within the required timeframe.
Tenant Signature: Date:
I (the owner) have attached a copy of the rent increase notice sent to the tenant at least sixty (60) days prior to the lease renewal. The tenant does not need to sign a rent increase request if they are properly notified and Metro Housing|Boston receives a copy.

By executing this request, I am certifying that the information above is true and correct:

Signature of Owner or Property Manager: Date:

Request for Taxpayer Identification Number and Certification

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

▶ Go to www.irs.gov/FormW9 for instructions and the latest information.

Print or type. See Specific Instructions on page 3.	1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank.	
	2 Business name/disregarded entity name, if different from above	
	3 Check appropriate box for federal tax classification of the person whose name is entered on line 1. Check only one of the following seven boxes.	4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):
	<input type="checkbox"/> Individual/sole proprietor or single-member LLC <input type="checkbox"/> C Corporation <input type="checkbox"/> S Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Trust/estate	Exempt payee code (if any) _____
	<input type="checkbox"/> Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Partnership) ▶ _____ Note: Check the appropriate box in the line above for the tax classification of the single-member owner. Do not check LLC if the LLC is classified as a single-member LLC that is disregarded from the owner unless the owner of the LLC is another LLC that is not disregarded from the owner for U.S. federal tax purposes. Otherwise, a single-member LLC that is disregarded from the owner should check the appropriate box for the tax classification of its owner.	Exemption from FATCA reporting code (if any) _____
	<input type="checkbox"/> Other (see instructions) ▶ _____ (Applies to accounts maintained outside the U.S.)	
	5 Address (number, street, and apt. or suite no.) See instructions.	Requester's name and address (optional)
6 City, state, and ZIP code		
7 List account number(s) here (optional)		

Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the instructions for Part I, later. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN*, later.

Note: If the account is in more than one name, see the instructions for line 1. Also see *What Name and Number To Give the Requester* for guidelines on whose number to enter.

Social security number															
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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. citizen or other U.S. person (defined below); and
4. The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

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 for Part II, later.

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.

Future developments. For the latest information about developments related to Form W-9 and its instructions, such as legislation enacted after they were published, go to www.irs.gov/FormW9.

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, later.



Direct Deposit Enrollment Request Form Authorization Agreement for Automatic Deposits (ACH Credits)

Section 1 : Type of request (check one)

New Request for Direct Deposit **OR** Change Current Direct Deposit Information

Section 2 : Customer / Vendor / Payee Information

Name _____

Social Security # or Tax I.D. # _____ Daytime Phone Number _____

Address _____ City, State, Zip Code _____

E-mail Address (please print) _____

Section 3 : Direct Deposit Information:

Checking **OR** Savings

Account Holder's Name _____

Bank Name _____

Routing Number1 _____

Account Number2 _____

Please attached with **voided check** from the specified checking account.

Substitute documentation **for account without paper check**: 1) Bank statement; or 2) Letter from bank that indicate account name; account number and routing information

I authorize Metro Housing|Boston and Bank of America to make electronic deposits to the specified account.
If monies to which I am not entitled are deposited to my account, I authorize Metro Housing|Boston to direct the financial institution to return said funds. This authority will remain in effect until I have filed a new authorization or until this authorization is revoked by me in writing.

Signature (required) _____ Date _____

Call (617) 425-6616 if you have any questions. *Please note:* You may receive one or more "paper" checks before your direct deposit enrollment is processed and becomes active.

¹ The first nine numbers from the left at the bottom of your deposit slip if using a savings account or your check if using a checking account is the bank routing number. This number is always nine digits.

² Your account number is at the bottom of your check or savings deposit slip, after the bank routing number (and before the check number if using a check). If there are zeros before or after your account number, please include them.

For internal use Only:

Program: MTW / Section 8 or MRVP / CoC Program or HomeBASE / RAFT

Staff Name : _____