To Property Owner/Agent:

Your tenant or future tenant is in the process of applying for Residential Assistance for Families in Transition (RAFT). Below is a list of things that Metro Housing|Boston will need from you to process the tenant’s application.

**Required Property Owner Documentation:**

1. RAFT Owner Contract (enclosed)
   a. The RAFT Owner Contract may not exceed the program limit of $4,000. The total amount must be verified with documentation. If a client has a subsidy, we cannot pay more than 6 months of the tenant’s portion for rental arrears.
   b. For all rental arrears, please add the most recent ledger.
2. W-9 form (enclosed)
3. Proof of ownership of the property the tenant is or will be living in.
   a. See enclosed list of acceptable proof of ownership
4. Direct Deposit Enrollment Request Form (enclosed)
5. **Voided check or letter from bank (We do not accept deposit tickets)**
6. Letter of Lead Compliance or building permit showing the residence was built after 1978 (required only if there is or will be a child under the age of 6 in the household).

**Do not assume that the family will receive RAFT assistance.** There are many eligibility criteria and documentation requirements for this program. The family must meet them all before we can approve their application. We will process their application as quickly as we can after all documents are submitted.

We will notify you if they are approved. If your tenant is using RAFT funds for startup costs, please do not allow the tenant to move in prior to approval.

**Please send all requested documentation to:**

RAFTdocs@metrohousingboston.org

Please include your tenant’s name in the subject line or body of the email.

1411 Tremont Street, Boston, MA 02120-3401
Phone 617-859-0400 | Toll-Free 800-272-0990 | info@MetroHousingBoston.org | MetroHousingBoston.org
Emergency Rental & Mortgage Assistance (ERMA) Program

OWNER CONTRACT

Metro Housing/Boston
1411 Tremont Street
Boston, MA 02120

Date of Contract ____________________________

Participant Name ___________________________________________

Participant Address ___________________________________________

The ERMA Administering Agency intends to provide the following financial assistance on behalf of the above named Participant (must insert “N/A” if Not Applicable):

| Monthly Rental Stipend | $__________ | ($________ per month x ______ # of months) |
| Rent Arrears           | $__________ |
| Total                  | $__________ | (may not exceed $4,000) |

Owner Acknowledgements and Agreements

- Under the pains and penalties of perjury, I certify that I am the property owner (or authorized agent for the owner) of the above referenced property (Participant Address).
- I agree that by accepting payments for rent arrears in accordance with this Agreement,
  o I will reinstate the Participant’s tenancy (if an eviction case has not been filed).
  o I will not proceed with eviction (if an eviction case has been filed).
- If the Participants’ tenancy is terminated prior to the period for which any monthly rental stipend payments were made, I agree to return the unused balance of said funds to the ERMA Administering Agency.
- I understand that ERMA funds are to be used only for expenses that are not paid by other sources of financial assistance. If the ERMA Administering Agency determines that the Participant has received financial assistance from another source to pay the same expenses paid by the ERMA program, I agree to repay the duplicative assistance as directed by the Agency.
- Nothing in this Agreement precludes the owner/agent from using any and all remedies available under law, including the institution of eviction proceedings against the Participant, if the Participant fails to pay any future rent due after the date of this Agreement.

______________________________  ______________________________
Property Owner/Agent Signature  ERMA Administering Agency Staff Signature

______________________________  ______________________________
Property Owner/Agent Name  ERMA Administering Agency Staff Name & Title

______________________________
Property Owner/Agent Address
Request for Taxpayer Identification Number and Certification

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

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

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.
   - Individual/sole proprietor or single-member LLC
   - C Corporation
   - S Corporation
   - Partnership
   - Trust/estate
   - Other (see instructions)
   - Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Partnership).

4. Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3): Exempt payee code (if any)
Exemption from FATCA reporting code (if any)

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.

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

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 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.
Proof of Ownership

Needs to contain the rental property address as well as the owner’s name

Accepted documents:
1) Tax Bill
2) Water Bill
3) Deed
4) Mortgage Bill
5) Rental Property Insurance Bill (Binder)
6) Assessor’s website

**If the property owner’s name from the above documents does not match the W-9, please provide a letter or supporting documents from the property owner (with signature) explaining the relationship between the two names (W-9 vs. Proof of Ownership)**

**If the address of the unit is not the same as the address written on the document given, please provide a letter (with signature) explaining why the addresses don’t match.**
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 __________________________________________
Routing Number2 __________________________________________
Account Number2 __________________________________________

Please attach 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 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: ________________________________