

People First. Housing Always.

#### 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 <u>6 months of the tenant's portion for rental arrears.</u>
  - 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).

<u>Do not assume that the family will receive RAFT assistance.</u> 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.



### Massachusetts Department of Housing and Community Development

### RAFT OWNER CONTRACT

(RAFT Administering Ager (RAFT Administering Ager		Date of Contract				
Participant Name						
Participant Address						
The RAFT Administering A named Participant (must ins		ride the following financial assistance on behalf of the above licable):				
Monthly Rental Stipend	\$	(\$ per month x # of months)				
Security Deposit	\$					
First Month's Rent	\$					
Last Month's Rent	\$					
Rent Arrears	\$					
Total	\$	(may not exceed \$4,000)				
<ul> <li>If the RAFT Admin agree to comply wit</li> <li>If the RAFT Admin Participant, I agree to referenced property.</li> <li>If the Participants' to payments were mad Agency.</li> <li>I understand that RAF financial assistance financial assistance repay the duplicative.</li> <li>Nothing in this Agree law, including the interest of the RAF financial assistance.</li> </ul>	istering Agency makes h all landlord obligation istering Agency pays a to return these funds to enancy is terminated p e, I agree to return the AFT funds are to be use If the RAFT Adminis from another source to e assistance as directed element precludes the o	owner/agent from using any and all remedies available under roceedings against the Participant, if the Participant fails to				
Property Owner/Agent Signa	ature	RAFT Administering Agency Staff Signature				
Property Owner/Agent Name	e	RAFT Administering Agency Staff Name & Title				
Property Owner/Agent Addr	ess					

# Department of the Treasury Internal Revenue Service

## Request for Taxpayer Identification Number and Certification

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

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

	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													
s on page 3.	Check appropriate box for federal tax classification of the person whose name is entered on line 1. Check only <b>one</b> of the following seven boxes.						4 Exemptions (codes apply only to certain entities, not individuals; see							
	☐ Individual/sole proprietor or ☐ C Corporation ☐ S Corporation single-member LLC	Partnership Trust/estate				instructions on page 3):								
type	Limited liability company. Enter the tax classification (C=C corporation, S	=S corporation, P=Partnership) ▶				Exempt payee code (if any)								
Print or type. See Specific Instructions	Note: Check the appropriate box in the line above for the tax classification LLC if the LLC is classified as a single-member LLC that is disregarded from the owner for U.S. federal tax propriate box for the subsequent from the owner should check the appropriate box for the subsequence.	from the owner unless the owner of the LLC is ourposes. Otherwise, a single-member LLC that				Exemption from FATCA reporting code (if any)								
ec.	Other (see instructions) ▶						(Applies to accounts maintained outside the U.S.)							
ee Sp	5 Address (number, street, and apt. or suite no.) See instructions.		e and	and address (optional)										
S	6 City, state, and ZIP code													
-	7 List account number(s) here (optional)													
Part	Taxpayer Identification Number (TIN)													
	our TIN in the appropriate box. The TIN provided must match the name	ne given on line 1 to avo	oid	Social s	ecur	ity nι	ımber			]				
backup	withholding. For individuals, this is generally your social security nur	nber (SSN). However, for		T		Г	7	1 Г	T	TTT				
residen	t alien, sole proprietor, or disregarded entity, see the instructions for , it is your employer identification number (EIN). If you do not have a	Part I, later. For other				-		-						
TIN, lat		nambon, occirioni to got		or		٠.	<del></del>	I						
	the account is in more than one name, see the instructions for line 1	. Also see What Name a	nd [	Employ	er id	entific	cation i	umber						
Numbe	r To Give the Requester for guidelines on whose number to enter.		Γ				T							
Part														
•	penalties of perjury, I certify that:													
2. I am Servi	number shown on this form is my correct taxpayer identification number subject to backup withholding because: (a) I am exempt from bacce (IRS) that I am subject to backup withholding as a result of a failuringer subject to backup withholding; and	ckup withholding, or (b) I	l have n	ot been	noti	ified b	ov the	Interna	l Rev me th	enue nat I am				
3. I am	a U.S. citizen or other U.S. person (defined below); and													
4. The F	ATCA code(s) entered on this form (if any) indicating that I am exemp	ot from FATCA reporting	is corre	ect.										
you have acquisiti other tha	ation instructions. You must cross out item 2 above if you have been not a failed to report all interest and dividends on your tax return. For real est on or abandonment of secured property, cancellation of debt, contribution interest and dividends, you are not required to sign the certification, b	tate transactions, item 2 d ons to an individual retirer	does not ment arr	apply. I	For n	nortga RA), a	age intended	erest pa erally,	aid, paym	ents				
Sign Here	Signature of U.S. person ►	Date ►												
Gen	eral Instructions	Form 1099-DIV (divided funds)	dends, i	includin	g the	ose fr	om sto	ocks o	muti	ual				
Section noted.	references are to the Internal Revenue Code unless otherwise	Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)												
<b>Future developments.</b> For the latest information about developments related to Form W-9 and its instructions, such as legislation enacted after they were published, go to <a href="https://www.irs.gov/FormW9">www.irs.gov/FormW9</a> .		Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)												
	•	<ul> <li>Form 1099-S (proceeds from real estate transactions)</li> </ul>												
Purpose of Form  • Form 1099-K (merchant card and third party network transaction					ons)									
An individual or entity (Form W-9 requester) who is required to file an information return with the IRS must obtain your correct taxpayer		<ul> <li>Form 1098 (home mortgage interest), 1098-E (student loan interest), 1098-T (tuition)</li> </ul>							rest),					
	ation number (TIN) which may be your social security number Idividual taxpayer identification number (ITIN), adoption	• Form 1099-C (canceled debt)												
taxpaye	identification number (ATIN), or employer identification number	Form 1099-A (acquisition or abandonment of secured property)												
amount	report on an information return the amount paid to you, or other reportable on an information return. Examples of information nclude, but are not limited to, the following.	Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.												
	099-INT (interest earned or paid)	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,												

### 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.



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

Sect	ion 1: Type of request (check one)					
[ ]	New Request for Direct Deposit OI	R		] Change Current Direct Deposit Information		
Sect	<u>ion 2 : Customer / Vendor / Payee Inf</u>	<u>formation</u>				
Nam	e					
Socia	al Security # or Tax I.D. #	Daytim	e Ph	Phone Number		
Addr	ess	City,	Stat	ate, Zip Code		
E-ma	il Address (please print)		<del></del>			
[ ]	ion 3 : Direct Deposit Information: Checking Of unt Holder's Name	•	_	] Savings		
Bank	Name					
Rout	ng Number1	W-1,1-1,				
Acco	unt Number2	imerimental and the second control of the se				
Substitution account of authors of the substitution account of the substitution accoun	nt name; account number and routing information norize Metro Housing Boston and Bank of America nies to which I am not entitled are deposited to my aurn said funds. This authority will remain in effect un	to make electro	nic d	Bank statement; or 2) Letter from bank that indicate		
mein	writing.					
Signa	ature (required)	Date				
Call (617) 425-6616 if you have any questions. <i>Please note:</i> 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 i	nternal use Only:					
	ram: [ ] MTW / Section 8 or [ ] MF	RVP / CoC F	Prog	ogram or [ ] HomeBASE / RAFT		
Staff	Name :					