## GRAHAM HOUSING AUTHORITY – 109 E. Hill Street, Graham PHONE (336)229-7041 FAX (336)227-0561 - <u>www.grahamhanc.com</u>

## <u>Checksheet-FAMILY RESPONSIBILITIES &</u> <u>REQUIREMENTS for Successful Use of Voucher</u>

## My Housing Specialist is \_\_\_\_

@graham	housing.com	Ext
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	u have been issued a bedroom Voucl					
	T THE ACTUAL AMOUNT BEING PAID FO					
that GHA will pay towards your rent by comparing it to the Gross Rent. Maximum Subsidy the PHA can pay is the lesser						
	RPS minus TTP or RPS – Gross Rent. ** <u>Gr</u>		-	· · · · ·		
AT	TACHED UTILITY ALLOWANCE WORKSHEE	T ** When searching for a u	nit, it is important to und	erstand that your total		
ho	using costs includes both the rent to owne	er and any utility costs that t	the family is responsible t	o pay, ie: Electric, Gas		
& ۱	Nater. ***** <u>Your share of the rent</u> is bas	ed on at least 30% of your h	ousehold monthly adjust	ed income ( <u>TTP)</u> , <u>Utility</u>		
Allo	owance & Gross Rent that exceeds RPS. T	he higher your household in	come is, the more likely	you'll be able to afford		
a Gross Rent that exceeds the RPS. **** * A very low household income will not support higher rents; unit rent will						
need to be much lower than RPS listed above to be affordable for the family* Based on the information and						
documents you've provided at voucher issue, we've calculated your Adjusted Annual Income as \$; Use the						
worksheets in your Voucher Handbook & the Utility Allowance worksheet to determine if the rent for a unit is						
affordable for you.						
1.						
	responsibility) to your Housing Specialist		-			
	VOUCHER (exception: incoming ports). A proposed/unsigned lease must accompany the RFTA packet. When the RFTA is received the Housing Specialist will review it for completeness and determine if it is approved or					
	denied. You and the LL will be notified if the RFTA is denied or approved based on the following criteria: **-RFTA					
	and /or lease incomplete or incorrect mismatched information **A <u>National criminal history report</u> will be pulled for					
	all members of household age 18 and over. ** <u>Rent Reasonableness:</u> Rent amount must be reasonable with other comparable unassisted units nearby ** <u>Affordability</u> : Rent will not be affordable for the family If the Gross Rent					
	exceeds RPS & if the total family share (T	TP +UA) exceeds 40% of you	ur adjusted monthly incol	me. (reference your		
_	voucher handbook)					
2.	<b>INSPECTION:</b> McCright & Associates w					
	letters to you and the landlord. DO NO	T CALL YOUR HOUSING SPE	CIALIST ABOUT INSPECTI	ON DATES. Your		
	landlord can give you the date & results	s of the inspection.				
3.	Within 14 days of a passed inspection					
	Housing Specialist (Housing Assistance	-				
	company must include: tenants name, new address, new account# and the date service will begin. These can be faxed					
	336-227-0561, emailed or hand delivered	-				
	and maintained in your name at all tim		•			
	DEPOSITS AS VERIFICATION OF UTILITIES As soon of	,		the Utility Companies		
	immediately to discuss preparations for utilities to be transferred or cut on in your name					
	Duke Energy 1-800-777-9898	Water/Sewer:		Green Level 578-3443		
	Piedmont Gas 1-800-752-7504	Burlington 222-5100	Elon 584-0282	Haw River 578-0784		
	PSNC 1-877-776-2427	Graham 570-6700	Gibsonville 449-4144	Mebane 919-563-3401		
4.	Double Subsidy is not allowed; If you a	are currently living in any o	other Government Assis	sted Housing, you		
	must provide Proof that you do not have possession of your current assisted unit by providing GHA with End					
	of participation report: 50058 or 5005			-		
5.						
	your signed lease to your housing specialist.					
6.	Change of Address to Post Office; we	are not responsible for un	delivered mail			
All changes in income, employment or household composition must be reported in <i>writing</i> within 10 calendar days to your						
housing specialist; phone calls are not acceptable notification.						
I (PRINT NAME) have read & understand all statements above. I am aware that Graham						
Housing will not assist with my rent until the unit passes inspection AND all required documents and verifications have been						
given to my Housing Services Specialist at GHA by the dates requested.						
Sig	Signature: Date: Date:					