

REQUEST FOR TENANCY APPROVAL

Please note that this HUD form has been adopted for use by the Arizona Department of Housing, Special Needs Division.

| | | | | | |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------|--------------------------------------------------------------------|-------------------------------------------------------------------|----------------------------------------------|
| 1. Name of Sub-recipient | | | 2. Address of Unit (street address, apartment #, city, zip) | | |
| 3. Requested Beginning Date of Lease | 4. # of Bedrooms | 5. Year Constructed | 6. Proposed Rent | 7. Security Deposit Amount | 8. Date Unit Available for Inspection |
| 9. Type of House/Apartment <input type="checkbox"/> Single Family Detached <input type="checkbox"/> Semi-Detached/Row House <input type="checkbox"/> Manufactured Home <input type="checkbox"/> Garden/Walkup <input type="checkbox"/> Elevator/High Rise | | | | | |
| 10. If this Unit is subsidized, indicate type of subsidy: <input type="checkbox"/> Section 202 <input type="checkbox"/> Section 221(d)(3)(BMIR) <input type="checkbox"/> Section 236 (insured or non-insured) <input type="checkbox"/> Section 515 Rural Development <input type="checkbox"/> Home <input type="checkbox"/> Tax Credit <input type="checkbox"/> Other (Describe the subsidy, including any state or local subsidy) _____ _____ | | | | | |
| 11. Utilities and Appliances The Owner shall provide or pay for the utilities and appliances indicated below by checking the marked box "Owner". The Tenant shall provide or pay for the utilities and appliances indicated below by checking the box marked "Tenant". Unless specified below, the Owner shall pay for all utilities provided by the Owner. | | | | | |
| Item | Specify Fuel Type | Provided By | | Paid By | |
| Heating | <input type="checkbox"/> Natural Gas <input type="checkbox"/> Bottle Gas <input type="checkbox"/> Oil <input type="checkbox"/> Electric <input type="checkbox"/> Other | <input type="checkbox"/> Owner <input type="checkbox"/> Tenant | | <input type="checkbox"/> Owner <input type="checkbox"/> Tenant | |
| Cooking | <input type="checkbox"/> Natural Gas <input type="checkbox"/> Bottle Gas <input type="checkbox"/> Oil <input type="checkbox"/> Electric <input type="checkbox"/> Other | <input type="checkbox"/> Owner <input type="checkbox"/> Tenant | | <input type="checkbox"/> Owner <input type="checkbox"/> Tenant | |
| Water Heating | <input type="checkbox"/> Natural Gas <input type="checkbox"/> Bottle Gas <input type="checkbox"/> Oil <input type="checkbox"/> Electric <input type="checkbox"/> Other | <input type="checkbox"/> Owner <input type="checkbox"/> Tenant | | <input type="checkbox"/> Owner <input type="checkbox"/> Tenant | |
| Other Electric | -----▶ | <input type="checkbox"/> Owner <input type="checkbox"/> Tenant | | <input type="checkbox"/> Owner <input type="checkbox"/> Tenant | |
| Water | -----▶ | <input type="checkbox"/> Owner <input type="checkbox"/> Tenant | | <input type="checkbox"/> Owner <input type="checkbox"/> Tenant | |
| Sewer | -----▶ | <input type="checkbox"/> Owner <input type="checkbox"/> Tenant | | <input type="checkbox"/> Owner <input type="checkbox"/> Tenant | |
| Trash Collection | -----▶ | <input type="checkbox"/> Owner <input type="checkbox"/> Tenant | | <input type="checkbox"/> Owner <input type="checkbox"/> Tenant | |
| Air Conditioning | -----▶ | <input type="checkbox"/> Owner <input type="checkbox"/> Tenant | | <input type="checkbox"/> Owner <input type="checkbox"/> Tenant | |
| Refrigerator | -----▶ | <input type="checkbox"/> Owner <input type="checkbox"/> Tenant | | <input type="checkbox"/> Owner <input type="checkbox"/> Tenant | |
| Range/Microwave | -----▶ | <input type="checkbox"/> Owner <input type="checkbox"/> Tenant | | <input type="checkbox"/> Owner <input type="checkbox"/> Tenant | |
| Other (specify) | -----▶ | <input type="checkbox"/> Owner <input type="checkbox"/> Tenant | | <input type="checkbox"/> Owner <input type="checkbox"/> Tenant | |

REQUEST FOR TENANCY APPROVAL

12. Owner's Certification

a. The Owner (including a principal or other interested party) is not the parent, child, grandparent, grandchild, sister or brother of any member of the household, unless the Sub-recipient has determined (and has notified the Owner and the household of such determination) that approving leasing of the unit, notwithstanding such relationship, would provide reasonable accommodation for a household member who is a person with disabilities.

b. Check one of the following:

- Lead-based paint disclosure requirements do not apply because the property was built on or after January 1, 1978.
- The unit, common areas servicing the unit, and exterior painted surfaces associated with such unit or common areas, have been found to be lead-based paint free by a lead-based paint inspector certified under the Federal certification program or under a federally accredited State certification program.
- A completed statement is attached containing disclosure of known information on lead-based pain and/or lead-based paint hazards in the unit, common areas or exterior painted surfaces, including a statement that the Owner has provided the lead hazard information pamphlet to the family.

13. The Sub-recipient will arrange for inspection of the unit and will notify the Owner and household as to whether or not the unit will be approved.

| | | | |
|---------------------------------------------------------|-------------|------------------------------------------------------------------------------|-------------|
| Print or type name of Owner/Owner Representative | | Print or type name of Project Participant | |
| Signature | | Signature (Project Participant) | |
| Business Address | | Present Address of Household (street address, apartment #, city, zip) | |
| Telephone Number | Date | Telephone Number | Date |