



Palm Beach County Housing Authority Housing Choice Voucher Program Landlord Change of Ownership Form

DATE OF CHANGE: _____

This document is to inform Palm Beach County Housing Authority that a Change in Ownership has occurred:

A. Previous Landlord/Owner Information

Name: _____

Address: _____

City, State & Zip _____

Phone Number: _____

Please mail all future rental assistance payments to the new owner(s) effective: _____

Signature of previous owner: _____ Date: _____

B. New Landlord/Owner Information

I. Owner(s) Legal Name; as recorded on Property Deed: _____

II. Owner(s) Social Security Number or Federal I. D. Number for the above named person to appear on Tax Form 1099-Miscellaneous Income: _____

III. Owner's Phone Number(s): Day Phone: _____
 Evening Phone: _____
 Fax Number: _____

IV. Owner(s) Addresses:

Physical - Street _____
 City _____
 State _____ Zip _____

Mailing - Street _____
 City _____
 State _____ Zip _____

- Please indicate mailing preference for all correspondence:
 Physical
 Mailing

Email Address: _____

Will owner of property manage units? Yes _____ No _____

If "No"; Please complete Section C of this application.



Palm Beach County Housing Authority Housing Choice Voucher Program Landlord Change of Ownership Form

C. Property Management Information:

Manager or Management Firm Name: _____
 Day Phone: _____ Evening Phone: _____
 Fax Number: _____
 Street _____
 City _____ State _____ Zip _____
 Email Address: _____

D. Assisted Units:

Change of Ownership for the following Housing Choice Voucher participants:

Tenant Name	Assisted Unit Address	City, State, Zip

E. Certification and Signatures:

By signing this application, I am expressing my interest in participating in the Palm Beach County Housing Authority's Housing Choice Voucher Program. This application signifies my intent to rent to families who receive housing assistance with their monthly rent via subsidy payments from Palm Beach County Housing Authority. I further understand that the completion and submission of this application does not mean that I have been accepted as a landlord with the Housing Choice Voucher program. The Palm Beach County Housing Authority will only enter into a Housing Assistance Payment Contract with any individual who meet the landlord qualifications.

I understand that the Palm Beach County Housing Authority may conduct background check before entering into a Housing Assistance Payment Contract. Per the Department of Housing and Urban Development (HUD), the Palm Beach County Housing Authority is prohibited from entering into a Housing Assistance Payment Contract with any individuals who have been involved in violent criminal or drug related activity.

WARNING: TITLE 18, US CODE SECTION 1001, States that a person who knowingly and willfully makes any materially false, fictitious, or fraudulent statement or representation; to any Department or Agency of the United States is guilty of a felony. State Law shall be fined under this title, imprisoned not more than 5 years or, if the offense involves international or domestic terrorism (as defined in section 2331), imprisoned not more than 8 years, or both.

By signing this application below, I certify that the information contained in this application is true and complete to the best of my knowledge:

Print Name of New Owner/Landlord: _____ Date: _____

Signature of New Owner/Landlord: _____

Print Name of New Co-Owner/Landlord: _____ Date: _____

Signature of New Co-Owner/Landlord: _____