## LANDLORD TRANSFER OF OWNERSHIP

Date:	
This will serve to advise the Fall River Housing Authorit	y that I,(Name)
am the new owner of the property/properties located at the	
	(Street
	(City, State, Zip Code)
The above property/properties were transferred into my r	name effective(Date)
All Housing Assistance Payments (HAP) should be for	rwarded to me as the new owner. I agree to
be bound by and comply with the HAP contract that i	is in place for the tenant/tenants that reside
in this property and any changes I would like to make	e to these documents will necessitate a new
lease and HAP contract to be completed.	
Signed:(New landlord signature)	Date:
Address:	
City, State, Zip Code:	
Social Security Number:	<del></del>
Phone #:	
Name of previous landlord:	
cc: landlord file & tenant file	

## TRANSFER OF RENT MONIES

Ι,	, NEW OWNER OF
(PROPERTY ADDRESS	), HEREBY STATE THAT BY
SIGNING BELOW I AM	INFORMING THE FALL RIVER HOUSING AUTHORITY THAT UPON
CLOSING ON THE ABO	OVE PROPERTY STATE THAT I RECEIVED \$
FROM	(FORMER OWNER) RENT OWED ME FOR THE
DATES LISTED BELOW	<i>7</i> :
FROM	TO
I ALSO UNDERSTAND	THAT THIS IS IMPORTANT INFORMATION THAT I AM SUPPLYING
TO YOU AS IT WILL EF	FECT MY 1099 FORMS THAT ARE PROCESSED BY THE FALL RIVER
HOUSING AUTHORITY	FOR TAX PURPOSES.
SIGNED:	DATE:

### Form W-9

(Rev. November 1999)

Department of the Treasury Internal Revenue Service

# Request for Taxpayer Identification Number and Certification

Give form to the requester. Do NOT send to the IRS.

type	Name (If a joint account or you changed your name, see \$	Specific Instructions on pag	e 2.)		
5	Business name, if different from above. (See <b>Specific Instructions</b> on page 2.)				
print	Check appropriate box: Individual/Sole proprietor	Corporation	Partnership	Other >	
Please	Address (number, street, and apt. or suite no.)			Requester	's name and address (optional)
Φ.	City, state, and ZIP code				
Р	art I Taxpayer Identification Number	(TIN)	····	List accou	nt number(s) here (optional)
ind (SS	ter your TIN in the appropriate box. For lividuals, this is your social security number SN). However, if you are a resident alien OR a	Social security number			
Foi ide	e proprietor, see the instructions on page 2. r other entities, it is your employer entification number (EIN). If you do not have a mber, see <b>How to get a TIN</b> on page 2.	OR		Part II	For Payees Exempt From Backup Withholding (See the instructions
No se	nte: If the account is in more than one name, e the chart on page 2 for guidelines on whose mber to enter.	Employer identification n	lumber	<b>&gt;</b>	on page 2.)
Р	art III 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.

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 on page 2.)

Sign
Here Signature ▶ Date ▶

Purpose of form. A person who is required to file an information return with the IRS must get your correct taxpayer identification number (TIN) to report, for example, income paid to you, real estate transactions, mortgage interest you paid, acquisition or abandonment of secured property, cancellation of debt, or contributions you made to an IRA.

Use Form W-9, if you are a U.S. person (including a resident alien), to give your correct TIN to the person requesting it (the requester) and, when applicable, to:

- 1. Certify the TIN you are giving is correct (or you are waiting for a number to be issued),
- 2. Certify you are not subject to backup withholding, or
- 3. Claim exemption from backup withholding if you are an exempt payee

If you are a foreign person, IRS **prefers** you use a Form W-8 (certificate of foreign status). After December 31, 2000, foreign persons **must** use an appropriate Form W-8

Note: If a requester gives you a form other than Form W-9 to request your TIN, you must use the requester's form if it is substantially similar to this Form W-9. What is backup withholding? Persons making certain payments to you must withhold and pay to the IRS 31% of such payments under certain conditions. This is called "backup withholding." Payments that may be subject to backup withholding include interest, dividends, broker and barter exchange transactions, rents, royalties, nonemployee pay, and certain payments from fishing boat operators. Real estate transactions are not subject to backup withholding.

If you give the requester your correct TIN, make the proper certifications, and report all your taxable interest and dividends on your tax return, payments you receive will not be subject to backup withholding. Payments you receive will be subject to backup withholding if:

- 1. You do not furnish your TIN to the requester, or
- 2. You do not certify your TIN when required (see the Part III instructions on page 2 for details), or
- The IRS tells the requester that you furnished an incorrect TIN, or
- 4. The IRS tells you that you are subject to backup withholding because you did not report all your interest and dividends on your tax return (for reportable interest and dividends only), or

5. You do not certify to the requester that you are not subject to backup withholding under 3 above (for reportable interest and dividend accounts opened after 1983 only).

Certain payees and payments are exempt from backup withholding. See the Part II instructions and the separate Instructions for the Requester of Form W-9.

#### **Penalties**

Failure to furnish TIN. If you fail to furnish your correct TIN to a requester, you are subject to a penalty of \$50 for each such failure unless your failure is due to reasonable cause and not to willful neglect.

Civil penalty for false information with respect to withholding. If you make a false statement with no reasonable basis that results in no backup withholding, you are subject to a \$500 penalty.

Criminal penalty for falsifying information. Willfully falsifying certifications or affirmations may subject you to criminal penalties including fines and/or imprisonment.

**Misuse of TINs.** If the requester discloses or uses TINs in violation of Federal law, the requester may be subject to civil and criminal penalties.

LANDLORD NAME:	<b></b> -
LANDLORD ADDRESS:	_
	<del>-</del>
LANDLORD TELEPHONE #:	<b>-</b>
SOCIAL SECURITY # or TAX IDENTIFICATION #:	·
CONTACT NAME:	
CONTACT TELEPHONE #:	
	<b>-</b>
PROPERTY ADDRESS:	
YEAR BUILT:	
TYPE OF BUILDING (Please check only one):	
• SINGLE FAMILY DETACHED (Single family home)	
ROWHOUSE/TOWNHOUSE (Single family attached)	
SEMI-DETACHED (Duplexes, Three-plexus, and Four plexus)	
• LOW RISE (Multifamily apt. buildings of 5 or more units with 4 or less stories or 5 to 6 story buildings without an elevator)	
MANUFACTURED HOME (Transportable structure in 1 or more	

Please return this form at your earliest convenience to: Fall River Housing Authority, 180 Morgan Street, Fall River, MA 02722.

sections)

#### LANDLORD INFORMATION

NAME OF LANDLORD	
(AS IT APPEARS ON YOUR HOL	SING CHECK)
SOCIAL SECURITY # OR	
TAX I.D.	
STREET ADDRESS	
CITY	
STATE, ZIP CODE	
TELEPHONE #	
E-MAIL ADDRESS	
	BANK INFORMATION *********
BANK NAME	BANK INFORMATION ************************************
	BANK INFORMATION ************************************
BANK NAME	BANK INFORMATION *********
BANK NAME BANK ADDRESS	BANK INFORMATION ************************************
BANK NAME  BANK ADDRESS  CITY, STATE, ZIP	BANK INFORMATION ************************************
BANK NAME  BANK ADDRESS  CITY, STATE, ZIP  IS THIS A CHECKING OR	BANK INFORMATION ************************************

FORM IS NEEDED FOR EACH SEPARATE/INDIVIDUAL CHECK YOU RECEIVE. PLEASE MAKE COPIES OR ADDITIONAL FORMS MAY BE PICKED UP AT 180 MORGAN ST. IN FALL RIVER, MA.

A SEPARATE FORM IS NOT NEEDED IF YOU ONLY RECEIVE ONE CHECK EVERY MONTH FOR ALL YOUR TENANTS.

\*\*\*\*\*\*\* PLEASE SUBMIT A VOIDED CHECK **GROUNDING** FOR ABOVE ACCOUNT WHEN RETURNING YOUR PAPERWORK IN THE ENCLOSED POSTAGE PAID ENVELOPE. THANK YOU!!!!!

[AN BACA 70 508.675-3435

#### FALL RIVER HOUSING AUTHORITY

#### 85 MORGAN STREET P.O. BOX 989 FALL RIVER, MASSACHUSETTS 02722

DANIEL P. MCDONALD
INTERIM EXECUTIVE DIRECTOR
DEPUTY EXECUTIVE DIRECTOR OF
OPERATIONS AND TECHNOLOGY

TELEPHONE (508) 675-3500 FAX (508) 677-1346 SECTION 8 FAX (508) 675-3435

Date:	March 13, 2013
From:	Deborah Saba, Housing Assistance Coordinator
То:	ALL LANDLORDS
Re:	E-Mails & Updated Information
It is extremely important that the Housing Authority be kept up to date with pertinent information regarding all our landlords. With this in mind, it is imperative to fill out the following information ASAP. If there are any changes in your information it is just as important to keep us updated at all times.  We are also requiring all our landlords to supply us with a current e-mail address. If you do not have an e-mail address, it is important to acquire one. It is the Housing Authorities intentions to communicate using e-mail for all future correspondences.	
PLEASE PRINT CLEARLY:	

TELEPHONE #

ALTERNATE TELEPHONE #:

E-MAIL ADDRESS:

NAME:

ADDRESS:

(Between the hours of 9:00 am – 4:00 pm)

If you cannot acquire an e-mail address, please check here:

Please complete this form and return to us by <u>March 31, 2013</u>. Failure to complete this form in its entirety will result in a delay in processing your HAP payment.

You may also e-mail this completed form to kerry@fallriverha.org by March 31, 2013.