**VERIFICATION OF DISABILITY STATUS**

|  |
| --- |
| Date: **DATE** |
| **PROVIDER INFO** | **NAME****ADDRESS****ADDRESS** |

**TENANT** has applied or receives housing assistance under a program of the US Department of Housing & Urban Development. MaineHousing is required to verify all information used in the determination of eligibility or level of benefits.

Your prompt return of this information is necessary to assure timely processing of the application or continuation of assistance. Please provide the following information and return to MaineHousing’s Housing Choice Voucher Department. A consent to release this information is attached to this form.

|  |  |  |
| --- | --- | --- |
| (207) 624-5713 | (207) 624-5789 | section8hcv@mainehousing.org |
| Fax | Phone  | Email |

**INFORMATION BEING REQUESTED**

For each numbered item below, check “√”the applicable box that accurately describes the person listed above:

1. [ ]Yes [ ]No Has a disability, as defined in 42 U.S.C. 423, which means;

a. Inability to engage in any substantial gainful activity by reason of any medically determinable physical or mental impairment that can be expected to result in death or that has lasted or can be expected to last for a continuous period of not less than 12 months; **or**

b. In the case of an individual who has attained the age of 55 and is blind, inability by reason of such blindness to engage in substantial gainful activity requiring skills or abilities comparable to those of any gainful activity in which he/she has previously engaged with some regularity and over a substantial period of time.

For the purposes of this definition, the term blindness, as defined in Section 416(i)(1) of this title, means central vision acuity of 20/200 or less in the better eye with use of a correcting lens. An eye which is accompanied by a limitation in the fields of vision such that the widest diameter of the visual field subtends an angle no greater than 20 degrees shall be considered for the purposes of this paragraph as having a central visual acuity of 20/200 or less.

***AND/OR….***

1. [ ]Yes [ ]No Has a physical, mental, or emotional impairment that:
2. Is expected to be of long-continued and indefinite duration;
3. Substantially impedes his or her ability to live independently; and
4. Is of such a nature that the ability to live independently could be

 improved by more suitable housing conditions.

***AND/OR….***

1. [ ]Yes [ ]No Has a developmental disability as defined in Section 102(7) of the Developmental

 Disabilities Assistance and Bill of Rights Act of 2000, 42 U.S.C. 15002(8)), i.e., a person with a

 severe chronic disability that:

1. Is attributable to a mental or physical impairment or

combination of mental and physical impairments;

b. Is manifested before the person attains age 22;

c. Is likely to continue indefinitely;

d. Results in substantial functional limitation in three or more of the following

 areas of major life activity:

(1) Self-care,

(2) Receptive and expressive language,

(3) Learning,

(4) Mobility,

(5) Self-direction,

(6) Capacity for independent living, and

(7) Economic self-sufficiency; and

1. Reflects the person's need for a combination and sequence of special,

 interdisciplinary, or generic services, individualized supports, or other forms of assistance that are of lifelong or extended duration and are individually planned and coordinated

***AND/OR….***

 4. [ ]Yes [ ]No Is the above a person whose disability is based **solely** on any drug or

alcohol dependence (the person has no other disability which meets the above definition).

|  |  |
| --- | --- |
|  |  |
| Name and title of person supplying information | Organization name and contact information |
| Signature | Date |

**Penalties for misusing this consent:** Title 18, Section 1001 of the U.S. Code states that a person is guilty of a felony for knowingly and willingly making false or fraudulent statements to any department of the United States Government. HUD, the PHA and any owner (or any employee of HUD, the PHA or the owner) may be subject to penalties for unauthorized disclosures or improper uses of information collected based on the consent form. Use of the information collected based on this verification form is restricted to the purposes cited above. Any person, who knowingly or willingly requests, obtains or discloses any information under false pretenses concerning an applicant or participant may be subject to a misdemeanor and fined not more than $5,000. Any applicant or participant affected by negligent disclosure of information may bring civil action for damages, and seek other relief, as may be appropriate, against the officer or employee of HUD, the PHA or the owner responsible for the unauthorized disclosure or improper use. Penalty provisions for misusing the social security number are contained in the Social Security Act at 42 U.S.C. 208(f)(g) and (h). Violations of these provisions are cited as violations of 42 U.S.C. 408 (f)(g) and (h).