TO: Project-Based Section 8 Property Owners and Managers
FROM: Robert Conroy, Director of Asset Management

TOPICS

SECTION I: HUD Notice H 2009-13: Supplemental Information to Application for Assistance Regarding Identification of Family Member, Friend or Other Person or Organization Supportive of a Tenant for Occupancy in HUD Assisted Housing and Form HUD-92006

On September 15, 2009, The U.S. Department of Housing and Urban Development (HUD) issued Notice H 2009-13. The purpose of the notice is to provide guidance to owners/agents on the implementation of Section 644 of the Housing and Community Development Act of 1992. This Section requires that owners and agents provide applicants, as part of their application for housing, the option to include information on an individual or organization that may be contacted to assist in providing any delivery of services or special care to applicants who become tenants and to assist with the resolving of any tenancy issues arising during the applicant’s tenancy. This supplemental application information is to be maintained by the housing provider as confidential information.

Attached please find Form HUD-92006 – Supplemental and Optional Contact Information for HUD-Assisted Housing Applicants. This form must be made part of the standard application. Completion of this form is optional and owners/agents may not require that the form be completed. Applicants on an owner's/agent's waiting list who have not completed this form must be given the opportunity to provide the information at the time of admission to the property. Applicants who decline to provide information should still sign and date the form and check the box which states “choose not to provide the contact information”.

For existing tenants, the owner/agent is not required to provide the tenants with an opportunity to provide the information, but it is recommended to do so at the time of the next recertification. It is further recommended that at the time of recertification, the tenant be provided an opportunity to update any of the information provided earlier. Tenants and applicants may request to update information at any time.
For more detailed information regarding this new requirement, please review the attached copy of HUD Notice H 2009-13. MaineHousing staff will be verifying compliance with the new procedure at the time of the Management and Occupancy Review. This and all other notices may be found on HUD’s website at http://www.hud.gov/offices/adm/hudclips.

SECTION II:  HUD Notice H 09-16: Exclusion from Annual Income of Temporary Employment from the U.S. Census Bureau

On October 2, 2009, the U.S. Department of Housing and Urban Development (HUD) issued Notice H 09-16 which provides for the exclusion of temporary employment payments received from the U.S. Census Bureau from annual income. As one of the U.S. Census Bureau partners, HUD is committed to supporting such employment that will help to ensure the validity and accuracy of the census counts. Previously, recipients of rental assistance have declined employment due to the perceived impact to rental and other public assistance benefits.

Temporary employment is defined as employment lasting no longer that 180 days and not culminating in permanent employment. Employer verification of both the employment dates and income amount must be maintained in the tenant’s file.

For additional information regarding this notice, please see the attached copy of HUD Notice H 09-16. This and all other notices may be found on HUD’s website at http://www.hud.gov/offices/adm/hudclips.

ATTACHMENTS:

- HUD Notice H 2009-13: Supplemental Information to Application for Assistance Regarding Identification of Family Member, Friend or Other Person or Organization Supportive of a Tenant for Occupancy in HUD Assisted Housing
- Form HUD-92006: Supplemental and Optional Contact Information for HUD-Assisted Housing Applicants
- HUD Notice H 09-16: Exclusion from Annual Income of Temporary Employment from the U.S. Census Bureau
MAINEHOUSING NONDISCRIMINATION NOTICE

Maine State Housing Authority (“MaineHousing”) does not discriminate on the basis of race, color, religion, sex, sexual orientation, national origin, ancestry, age, physical or mental disability, or familial status in the admission or access to, or treatment or employment in, its programs, and activities. MaineHousing will provide appropriate communication auxiliary aids and services upon sufficient notice. MaineHousing will also provide this document in alternative formats upon sufficient notice. MaineHousing has designated the following person responsible for coordinating compliance with applicable federal and state nondiscrimination requirements and addressing grievances: Mary Darling, Maine State Housing Authority, 353 Water Street, Augusta, Maine 04330-4633, Telephone Number (207) 626-4000 or 1-800-452-4668 (voice), or 1-800-452-4603 (TTY).
SUBJECT: Supplemental Information to Application for Assistance Regarding Identification of Family Member, Friend or Other Person or Organization Supportive of a Tenant for Occupancy in HUD Assisted Housing

I. PURPOSE.

The purpose of this Notice is to provide guidance to owners and management agents (O/As) and Public Housing Agencies (PHAs) on implementation of the requirements of Section 644 of the Housing and Community Development Act of 1992 (Section 644). Under Section 644, O/As and PHAs must provide applicants as part of their application for housing, the option to include information on an individual or organization that may be contacted to assist in providing any delivery of services or special care to applicants who become tenants and to assist with resolving any tenancy issues arising during tenancy.

This Notice transmits Form HUD-92006, Supplement to Application for Federally Assisted Housing, (Attachment A) which must be included as part of the O/A’s and PHA’s application.

II. APPLICABILITY.
The requirements of Section 644 of the Housing and Community Development Act of 1992 apply to O/As and PHAs administering the following assisted housing programs:

- Section 202 Project Rental Assistance Contracts (PRAC)
- Section 811 PRAC
- Section 202/162 Project Assistance Contract (PAC)
- Section 202/8
- Section 8 Project-based
- Section 236
- Section 236 Rental Assistance Payment (RAP)
- Section 221(d)(3) Below Market Interest Rate (BMIR)
- Section 101 Rent Supplement
- Public Housing
- Tenant-based Housing Choice Vouchers
- Project-based Housing Choice Vouchers

III. BACKGROUND.

Section 644 of the Housing and Community Development Act of 1992 (42 U.S.C. 13604) imposed on HUD the obligation to require housing providers participating in federally assisted housing programs to give any individual or family applying for occupancy the option to provide additional contact information as part of their application. The contact information included in the application for occupancy is the name, address, telephone number, and other relevant information of a family member, friend, or person associated with a social, health, advocacy, or similar organization. The housing provider may not require the applicant to provide such information.

The objective of providing such information, if the applicant becomes a tenant, is to facilitate contact by the housing provider with the person or organization identified to assist in providing any delivery of services or special care to the tenant and to assist with resolving any tenancy issues arising during their tenancy. This supplemental application information is to be maintained by the housing provider as confidential information.

A Notice was published in the January 22, 2009 Federal Register of the requirements of Section 644. A copy of the Federal Register is located at: [http://edocket.access.gpo.gov/2009/pdf/E9-1165.pdf](http://edocket.access.gpo.gov/2009/pdf/E9-1165.pdf). HUD will be issuing a conforming rule amending the regulations to reflect these requirements.

IV. IMPLEMENTATION REQUIREMENTS.

A. Owners and management agents (O/As) and Public Housing Agencies (PHAs) must implement the requirements of Section 644 and begin using form HUD-92006, Supplement to Application for Federally Assisted Housing, by no later than 90 days from the issued date of this Notice.
B. O/As and PHAs must notify applicants at the time of application of their right to include as part of their application the name, address, telephone number and other relevant information of a family member, friend, or social, health, advocacy or other organization. This individual or organization may be contacted by the O/A or PHA to help in resolving issues that may arise during the applicant’s tenancy or to assist in providing special care or services the applicant may require as a tenant.

C. Form HUD-92006, Supplement to Application for Federally Assisted Housing.

1. Form HUD-92006 must be included as an attachment to the O/A’s or PHA’s application.

2. Applicants

   a. Applicants must be provided the opportunity to complete the information on form HUD-92006, Supplement to Application for Federally Assisted Housing. The form gives applicants the option to identify an individual or organization that the O/A or PHA may contact and the reason(s) the individual or organization may be contacted. The applicants, if they choose to provide the additional contact information, must sign and date the form.

   b. Applicants who are currently on the O/A’s or PHA’s waiting list and who have not been provided the opportunity to complete form HUD-92006, Supplement to Application for Federally Assisted Housing, must be provided the opportunity at the time of admission.

   c. O/As and PHAs cannot require any individual or family applying for occupancy to provide the contact information as providing contact information is optional on the part of the individual or family. Those applicants who choose not to provide the contact information should check the box indicating that they “choose not to provide the contact information” and sign and date the form.

   d. O/As and PHAs should provide applicants the opportunity at time of admission to update, remove or change contact information provided at the time of application, particularly if a long period of time has elapsed between the time of application and actual admission to the program.

   e. If the applicant chooses to have more than one contact person or organization, the applicant must make clear to the O/A or PHA the reason each person or organization may be contacted. The O/A or PHA should accommodate the applicant by allowing the applicant to
complete a form HUD-92006 for each contact and indicating the reason the O/A or PHA may contact the individual or organization. For example, the applicant may choose to have a relative as a contact for emergency purposes and an advocacy organization for assistance for tenancy purposes.

3. **Tenants.**

   a. Although it is not required, O/As and PHAs should provide tenants who were not provided the opportunity to provide contact information at the time of application and admission, the option to complete form HUD-92006 and provide contact information at the time of their next annual reexamination/recertification.

   b. O/As and PHAs **cannot** require tenants who have not provided contact information to provide the contact information at the time of annual recertification as providing this information is optional on the part of the individual or family.

   c. Tenants may request to update, remove or change the information provided on form HUD-92006 at any time and O/As and PHAs must honor this request.

   d. O/As and PHAs should provide tenants who have provided contact information using form HUD-92006, the opportunity to update, remove or change the information at the time of annual recertification to ensure that current information is on file. This includes allowing tenants who originally chose not to provide contact information the opportunity to provide contact information if they request to do so. Remember, providing contact information is optional on the part of applicants or tenants.

V. **USE OF THE CONTACT INFORMATION.**

O/As and PHAs will contact the individual or organization provided only for the use or uses indicated by the applicant or tenant on form HUD-92006. This contact information will assist the O/A or PHA in providing the delivery of any services or special care to the tenant and assist in any tenancy issues arising during the term of tenancy of the tenant.

VI. **RETENTION OF CONTACT INFORMATION (Form HUD-92006).**

1. O/As and PHAs must retain the form HUD-92006 with the applicant’s application.

2. O/As or PHAs must retain the information for as long as the tenant is a resident. O/As and PHAs will follow program retention requirements for retention of tenant files after end of participation in the program or after move-out. For example,
Multifamily O/As are required to retain tenant file information for term of tenancy plus three years.

VII. CONFIDENTIALITY OF CONTACT INFORMATION.

Section 644 requires that O/As and PHAs keep the contact information confidential. O/As and PHAs are allowed to release the information for the stated statutory purpose only: To assist the O/As or PHAs in providing services or special care for such tenants, and in resolving issues that may arise during the tenancy of such tenants.

VIII. OTHER INFORMATION.

Further questions on the requirements and implementation of Section 644 of the Housing and Community Development Act of 1992 and use of form HUD-92006, Supplement to Application for Federally Assisted Housing, should be directed to the local HUD Field Office in your jurisdiction.

IX. PAPERWORK REDUCTION.

The information collection requirements contained in this notice have been approved by the Office of Management and Budget (OMB) under the Paperwork Reduction Act of 1995 (44 U.S.C. 3520) and assigned OMB Control Number 2502-0581. In accordance with the Paperwork Reduction Act, HUD may not conduct or sponsor, and a person is not required to respond to a collection of information unless the collection displays a currently valid OMB control number.

_____________________________ ________________________________
David H. Stevens     Sandra B. Henriquez
Assistant Secretary for Housing -              Assistant Secretary for Public and
Federal Housing Commissioner               Indian Housing

Attachment
# Supplemental and Optional Contact Information for HUD-Assisted Housing Applicants

**SUPPLEMENT TO APPLICATION FOR FEDERALLY ASSISTED HOUSING**

This form is to be provided to each applicant for federally assisted housing.

**Instructions: Optional Contact Person or Organization:** You have the right by law to include as part of your application for housing, the name, address, telephone number, and other relevant information of a family member, friend, or social, health, advocacy, or other organization. This contact information is for the purpose of identifying a person or organization that may be able to help in resolving any issues that may arise during your tenancy or to assist in providing any special care or services you may require. **You may update, remove, or change the information you provide on this form at any time.** You are not required to provide this contact information, but if you choose to do so, please include the relevant information on this form.

**Applicant Name:**

**Mailing Address:**

**Telephone No:**  
**Cell Phone No:**

**Name of Additional Contact Person or Organization:**

**Address:**

**Telephone No:**  
**Cell Phone No:**

**E-Mail Address (if applicable):**

**Relationship to Applicant:**

**Reason for Contact:** (Check all that apply)

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<tr>
<th>Option</th>
<th>Description</th>
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<tbody>
<tr>
<td>Emergency</td>
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<tr>
<td>Unable to contact you</td>
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<td>Termination of rental assistance</td>
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<td>Eviction from unit</td>
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<td>Late payment of rent</td>
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<td>Assist with Recertification Process</td>
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<td></td>
<td>Change in lease terms</td>
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<td>Change in house rules</td>
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<td>Other: __________________________</td>
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**Commitment of Housing Authority or Owner:** If you are approved for housing, this information will be kept as part of your tenant file. If issues arise during your tenancy or if you require any services or special care, we may contact the person or organization you listed to assist in resolving the issues or in providing any services or special care to you.

**Confidentiality Statement:** The information provided on this form is confidential and will not be disclosed to anyone except as permitted by the applicant or applicable law.

**Legal Notification:** Section 644 of the Housing and Community Development Act of 1992 (Public Law 102-550, approved October 28, 1992) requires each applicant for federally assisted housing to be offered the option of providing information regarding an additional contact person or organization. By accepting the applicant’s application, the housing provider agrees to comply with the non-discrimination and equal opportunity requirements of 24 CFR section 5.105, including the prohibitions on discrimination in admission to or participation in federally assisted housing programs on the basis of race, color, religion, national origin, sex, disability, and familial status under the Fair Housing Act, and the prohibition on age discrimination under the Age Discrimination Act of 1975.

☐ Check this box if you choose not to provide the contact information.

**Signature of Applicant**  
**Date**

The information collection requirements contained in this form were submitted to the Office of Management and Budget (OMB) under the Paperwork Reduction Act of 1995 (44 U.S.C. 3501-3520). The public reporting burden is estimated at 15 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Section 644 of the Housing and Community Development Act of 1992 (42 U.S.C. 13604) imposes on HUD the obligation to require housing providers participating in HUD’s assisted housing programs to provide any individual or family applying for occupancy in HUD-assisted housing with the option to include in the application for occupancy the name, address, telephone number, and other relevant information of a family member, friend, or person associated with a social, health, advocacy, or similar organization. The objective of providing such information is to facilitate contact by the housing provider with the person or organization identified by the tenant to assist in providing any delivery of services or special care to the tenant and assist with resolving any tenancy issues arising during the tenancy of such tenant. This supplemental application information is to be maintained by the housing provider and maintained as confidential information. Providing the information is basic to the operations of the HUD Assisted-Housing Program and is voluntary. It supports statutory requirements and program and management controls that prevent fraud, waste and mismanagement. In accordance with the Paperwork Reduction Act, an agency may not conduct or sponsor, and a person is not required to respond to, a collection of information, unless the collection displays a currently valid OMB control number.

**Privacy Statement:** Public Law 102-550, authorizes the Department of Housing and Urban Development (HUD) to collect all the information (except the Social Security Number (SSN)) which will be used by HUD to protect disbursement data from fraudulent actions.
Subject: Exclusion from Annual Income of Temporary Employment from the U.S. Census Bureau

I. Purpose

This notice provides for the exclusion of temporary employment payments received from the U.S. Census Bureau from annual income.

II. Background

Article I, Section 2 of the Constitution of the United States calls for an actual enumeration of the people every ten years to be used for appointment of seats in the House of Representatives among the states. Many individuals are hired temporarily by the U.S. Census Bureau to assist in counting the population. As one of the Census partners, HUD is committed to supporting such employment that will help to ensure the validity and accuracy of the census counts. Previously, recipients of rental assistance have declined employment due to the perceived impact to rental and other public assistance benefits.

III. Applicability

This Notice applies to administrators of the following programs:

A. Project-based Section 8
   1. New Construction
   2. State Agency Financed
   3. Substantial Rehabilitation
   4. Section 202/8
   5. Rural Housing Services Section 515/8
   6. Loan Management Set-Aside (LMSA)
   7. Property Disposition Set-Aside (PDSA)
B. Rent Supplement  
C. Rental Assistance Payment (RAP)  
D. Section 202/162 Project Assistance Contract (PAC)  
E. Section 202 Project Rental Assistance Contract (PRAC)  
F. Section 811 PRAC  
G. Section 236  
H. Section 221(d)(3) Below Market Interest Rate (BMIR)  

IV. Implementation  

Pursuant to Section 24 CFR §5.609(c)(9), owners and management agents of housing occupied by tenants who receive Section 8 benefits are to exclude from the calculation of annual income any temporary income payments received by those tenants from the U.S. Census Bureau. Temporary is defined as employment lasting no longer than 180 days and not culminating in permanent employment. Employer verification of both the employment dates and income amount must be maintained in the tenant’s file.

Paperwork reduction information collection requirements contained in this document have been approved by the Office of Management and Budget (OMB) under the Paperwork Reduction Act of 1995 (44 U.S.C. 3501-3520) and assigned OMB Control Number 2502-0204. In accordance with the Paperwork Reduction Act, HUD may not conduct or sponsor, and a person is not required to respond to, a collection of information unless the collection displays a currently valid OMB Control Number.

___________________________
David H. Stevens  
Assistant Secretary for Housing- Federal Housing Commissioner
Supplemental and Optional Contact Information for HUD-Assisted Housing Applicants

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**Instructions:** **Optional Contact Person or Organization:** You have the right by law to include as part of your application for housing, the name, address, telephone number, and other relevant information of a family member, friend, or social, health, advocacy, or other organization. This contact information is for the purpose of identifying a person or organization that may be able to help in resolving any issues that may arise during your tenancy or to assist in providing any special care or services you may require. **You may update, remove, or change the information you provide on this form at any time.** You are not required to provide this contact information, but if you choose to do so, please include the relevant information on this form.

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<tr>
<th>Applicant Name:</th>
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<td>Mailing Address:</td>
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<td>Telephone No:</td>
<td>Cell Phone No:</td>
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<td>Name of Additional Contact Person or Organization:</td>
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<td>Address:</td>
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<td>Telephone No:</td>
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<td>E-Mail Address (if applicable):</td>
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<td>Relationship to Applicant:</td>
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<td><strong>Reason for Contact:</strong> (Check all that apply)</td>
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<td>[ ] Emergency</td>
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<td>[ ] Unable to contact you</td>
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<td>Commitment of Housing Authority or Owner:</td>
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<td>If you are approved for housing, this information will be kept as part of your tenant file. If issues arise during your tenancy or if you require any services or special care, we may contact the person or organization you listed to assist in resolving the issues or in providing any services or special care to you.</td>
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[ ] Check this box if you choose not to provide the contact information.

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<th>Date</th>
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**Privacy Statement:** Public Law 102-550, authorizes the Department of Housing and Urban Development (HUD) to collect all the information (except the Social Security Number (SSN)) which will be used by HUD to protect disbursement data from fraudulent actions.

Form HUD-92006 (05/09)