



**Housing Authority**  

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**of the City of Eastman**

824 Griffin Avenue, SW  
Post Office Drawer 100  
Eastman, Georgia 31023  
[www.eastmanha.com](http://www.eastmanha.com)

# **Public Housing Family**

# **Resident Handbook**

A Guide for Applicants and Residents for the  
Public Housing Program



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*Welcome to the  
Housing Authority of the City of Eastman*

— Executive Director's Welcome —

I would like to take this opportunity to welcome you to the Eastman Housing Authority.

We are dedicated to providing safe, sanitary, and affordable housing to our community and for persons seeking to relocate to our area. We take great pride in our community and consider it a privilege to assist families, single adults, and senior adults find quality homes and neighborhoods. Our housing opportunities offer partnerships in our community to enhance the quality of our resident's lives. Striving for our residents to become self-sufficient and productive citizens is of great importance to us. Eastman Housing Authority is committed to operating efficiently, ethically, and professionally.

We look forward to working with you and we are so happy you are making our homes your home!

Respectfully,

Eastman Housing Authority



Michelle Butler  
Executive Director



# Eastman Housing Authority

Physical Address: 824 Griffin Ave., SW  
Eastman, GA 31023

Mailing Address: P.O. Box 100  
Eastman, GA 31023

Administrative Office: 478-374-5414  
Fax: 478-374-0505  
Website: [www.eastmanha.com](http://www.eastmanha.com)

More contact information for Administrative Office Staff see:  
*General Information Page 7 -*

Maintenance Dept: 478-374-5872

More contact information for Maintenance Department see:  
*Maintenance Page 29 -*

Drop Box Rent & Keys Only:

Administrative Office Front Entrance by the entrance door to the left.

Drop Box for Applications, Pay Stubs, Documents etc.:

Administrative Office beside the ramp on the right.

## **Fair Housing Statement**

Management is committed to compliance with all federal, state and local Fair Housing Laws. In the spirit of these laws, your community policies are designed to provide for consistent and fair treatment of all residents.

**This Handbook will be updated periodically and is available at the website listed above. We recommend you review it occasionally to make sure you remain in compliance with any policy change.**



## Introduction

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This handbook has been prepared as your guide to applying for and participation in the public housing program. It is designed to provide you with information about how this program works. We ask that you take the time to read it carefully and understand it thoroughly because it relates to your lease. It will help you in understanding the benefits and responsibilities of being a resident in the public housing community. As a public housing resident, this handbook will help you to remain in good standing with the Eastman Housing Authority and this is our goal for you.

Keep this Handbook in a safe and easy place to locate to refer to as needed. This handbook is full of important papers for your guide of the house rules and policies.

### Public Housing Program

The rules and regulations for the public housing program are determined by the U.S. Department of Housing and Urban Development (HUD). The purpose of the program is to provide affordable housing to eligible low-income families.

When a family applies for public housing, the agency first determines whether you are eligible to participate in the program. Then you are screened for suitability as renters. When a unit of the proper size and type for your family makeup is available, the agency invites you to inspect the unit with an agency representative. If you accept the housing unit, the agency will then enter into a lease agreement with your family. Once you are leased up, you will pay rent to the agency based on your family's income (TTP) and contact rent.

### Eastman Housing Authority Service Commitment

Our authority assists low-income families with the public housing program. The purpose of the public housing program is to provide:

- Improved living conditions for low-income individuals and to maintain their rent payments at an affordable level
- Providing decent, safe, sanitary, smoke-free and drug-free housing

The Eastman Housing Authority's (EHA) goal is to provide excellent service to the community. We are committed to informing you about this program and the federal



regulations and house rules. If you do not understand, have questions or problems, you must contact and ask the questions or voice your concern.

## **Staying In Touch with YOU**



It is imperative that you provide updated contact information to the EHA. Providing this information will allow the EHA to contact you for an appointment at lease up or during your residency. Appointments will be in advance to schedule via first-class mail (USPS), telephone/cell, texting or by email. Please make arrangements in advance to attend all appointments on time. Your cooperation is essential to the EHA's ability to serve You.

## **Eastman Housing Authority Responsibilities**

The EHA is required by HUD to follow guidelines for all persons interested in our housing and/or providing housing for you based on your eligibility for the program. We want to make you aware of the guidelines and variety of tasks we must perform in partnership with you. By providing you with this handbook you are gaining knowledge about this program so that you will be successful by doing your part.

## **Housing Agency Staff**

Our agency has a wide range of skilled and highly trained staff working to maintain the operations of this authority as high performers. Some of these people work behind the scenes, and some work directly with families. The main people who will work directly with you are trained to provide housing services and to answer your questions. These persons are:

- Housing Specialist
- Residents Services Coordinator
- Maintenance Personnel
- Administrative Assistant

Persons behind the scenes of the operations of the housing authority are:

- Board of Commissioners
- Executive Director



## **Requests for Accommodation**

If you are a person with disabilities or part of a family that includes persons with disabilities, you may request a reasonable accommodation in order to fully utilize this housing program and any related services. More information on reasonable accommodation and your rights under federal fair housing laws can be found in this handbook.

## **Posting of Required Information**

We are required to maintain an official bulletin board with required documents. This board is located at the Administrative Building Lobby. We also maintain an *Unofficial Bulletin Board* full of important information and current events from the housing agency, community, State and Federal Government.

### **Official Bulletin Board**

- Statement of Policies and Procedures governing Admission and Continued Occupancy (ACOP)
- Notice of the status of the waiting list (opened or closed)
- A listing of all the developments by name, address, number of units, units designed with special accommodations, address of all project offices, office hours, telephone numbers, TDD numbers, and Resident Facilities and operation hours
- Income Limits for Admission
- Utility Allowance Schedule
- Current Schedule of Routine Maintenance Charges
- Dwelling Lease
- Grievance Procedure
- Fair Housing Poster
- Equal Opportunity in Employment Poster
- Flat Rents
- Any current Eastman Housing Authority Notices

## **Rent in the Public Housing Program**

### **Family Choice in Rents**

Family living in public housing choose whether they want to pay income-based rent or flat rent every year. We will calculate your rent and provide you with the information for you to choose.



## **Flat Rent**

If a family chooses to pay flat rent, the rent payment is based on reasonable market value of the unit, not your income. If you choose to pay flat rent, your family's income (Recertification) once every three (3) years. However, your family composition is still reviewed every year.

## **Income-Based Rents**

If a family chooses to pay income-based rent, the amount of your rent payment is based on 30% of your family's adjusted monthly income. If your family has a reduction or increase in income, your rent will be recalculated for your rent payment.

## **Switching Rent due to Hardship**

If your family has chosen to pay flat rent, your rent can be adjusted to income-based rent if you cannot pay the flat rent due to the following income decreases circumstances:

- Reduction in work hours or loss of a job
- Death in the family of a member with income
- Reduction in or loss of other income or assistance
- Increase in family's medical costs, child care, etc.





## GENERAL INFORMATION

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### Office Hours

Monday through Thursday from 7:00am to 5:30pm. For the public the hours are from 7:00am to 5:00pm doors are locked @ 5:00 for end of day processing phone calls or appointments only from 5:00pm to 5:30pm.

**Your Mailing Address** is shown on your lease.

The mailing address is your 911 Address for the following: \*All police, 911 calls, fire or any other call requiring a location address.

Rhine Apartments contact Post Office (229) 385-6435 in Rhine for your P.O. Box for your mailing address the address on your lease is used for all calls. *Please ensure you forward your P.O. Box # to Tenant Services to document in your file and system.*

### 911 Calls

Report all emergency issues to 911. Please call the Housing Authority office at 374-5414 Ext. 2 and report your 911 calls to Compliance Staff. After hours please call and leave a voice message.

### Dodge Co. Transit:

To schedule a pick up call 374-2261: \$2.00 fee. They serve within the city limits of Eastman only. Medical appointments within the county - schedule in advance to ensure transportation. **Out of town Transportation for medical purposes only call 1-888-224-7981.**

### Cable

You choose your cable provider. Cable connections are installed in the apartments. If additional connections for cable are desired, you will be responsible for the additional cost of installation and you will be responsible for any damages that maybe caused by the installation.

### Trash Containers

**All trash must be bagged** before placing in outside trash containers. Please ensure you keep your trash container clean to eliminate rodents, roaches and ants.

Place containers at the curb on the day assigned to your apartment for disposal. Make sure your trash container is moved to the back of your apartment the same day of garbage pickup. **Elderly Complex only do not** have to place containers at curb.

Please see the following for trash pickup schedule:

<b>Tuesday</b>	Harrell, Herman, Reddock, Stuckey
<b>Wednesday</b>	Little Reddock, Ragan



Thursday  
Monday & Friday

Eastside  
Rhine

### **Eastman Apartments**

Call the City of Eastman City Hall 478-374-7721 to place a work order if your trash containers are not working properly and/or missing.

If you are disabled and require curb service to have trash container pickup from the back of apartment you are responsible for obtaining a letter from your Doctor/Case Worker and submitting to the City of Eastman City Hall. Please ensure you provide a copy to the housing authority RSC to be placed in your file and documented.

### **Rhine Apartments**

Call Rhine City Hall 229-385-5521 to report problems.

### **Schools**

South Dodge – Harrell, Herman, Rhine, Stuckey A, Eastside  
North Dodge - Stuckey B

### **Smoke-Free Housing Authority**

Eastman Housing Authority adopted a Smoke-Free Housing Policy by Board Action on October 16, 2017. Any and all smoking is prohibited inside and outside your apartment.

### **Section 3**

It is policy of the Eastman Housing Authority to provide employment opportunities to residents through contractors doing business with the Authority. Documents are provided in your orientation package.

### **Resident Calendar**

A yearly calendar is provided at lease up and every year in December for all residents. This calendar serves as your two (2) day notification that a staff member will be in your apartment performing these duties a year in advance for Maintenance preventive work, Inspections, Pest Control and much more. No other notice will be issued unless it is to be rescheduled. It is your responsibility to keep up and stay informed.

### **Common lease and Program Violations**

Protect your family by following the rules and avoid embarrassment from common program and lease violations. It is always unpleasant when penalties are required due to violated program rules. This list is some of the common lease violations:

- **Allowing Unauthorized Persons to Live in Your Apartment** – No one other than the persons on your lease are allowed to live with you. Do Not Allow Barred or Banned persons on EHA Property. Before they move in you must contact the Housing Specialist for your guidance and procedures. (LEASE: Section 6: Occupancy)
- **Underreporting Income** – You must report all income (money) received by everyone in your household. Unreported income is against the law and a violation of your lease and program rules. This is fraud and you will be required to repay the money; you may lose assistance and be subjected to criminal penalties.





## Website

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Visit our website @ [www.eastmanha.com](http://www.eastmanha.com). Our website provides you with information, documents, reminders, current calendar, applications submission for housing online, pay rent online and many more useful tools for our residents.

## On Line Payments

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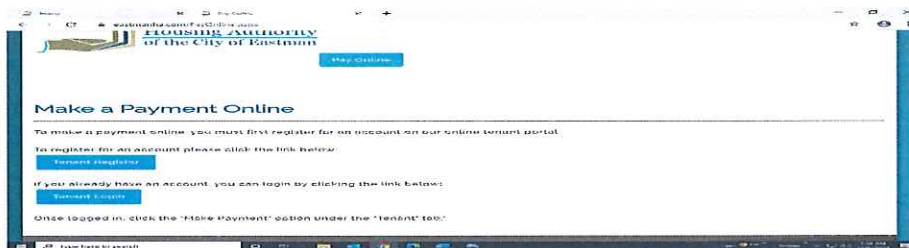
Fast, Easier, Safe and Convenient.

Let us navigate you through the easy steps to setup your personal account with us from your cellphone, iPad, laptop or computer.

>Internet Browser go to [www.eastmanha.com](http://www.eastmanha.com)



>Click on the Pay Online tab



- >Click on Tenant Register – Setup your account. (One time only to setup user information and activate your account.)
- >Click on Tenant Login and pay your Rent, other charges and Security Deposit. No partial payments are allowed.
- >Check your account balance..... logon to [www.eastmanha.com](http://www.eastmanha.com) click on the Pay Online tab, click on the Tenant Logon tab, logon with your username and password that you setup and see what your balance is!

## THINGS TO REMEMBER

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- ✓ Utilities must remain on at all times (electricity and gas). *Lease: 8: Utilities*
- ✓ Tenants are strongly encouraged to **immediately** report the suspicion of possible bedbugs in a housing unit or other areas of the property. **If you suspect bedbugs, do not place any items of clothing, furniture or any other household items outside on the front or back porches or in the yard area. Please follow the Bed Bug Guidelines and Policy and call the office for instructions and to assist you.** See *Bedbug Control and Prevention Guidelines; How to prevent against Bed Bugs*. **RESIDENT SIGNATURE THAT THE BED BUG POLICY HAS BEEN EXPLAINED:**
- ✓ The Eastman Housing Authority contracts with a Licensed Professional Pest Control Service to provide extermination services. This contract also provides Bedbug treatments. The Eastman HA provides a monthly treatment for housing units. The Monthly call back is scheduled on the 3<sup>rd</sup> Tuesday of each month and noted in your Resident Calendar. It is the responsibility of the tenant to contact the office to be placed on the PCA list if you have roaches. **I (tenant) acknowledge and have been advised that extermination services and/or bedbug services will utilize chemicals in my apartment for treatment.**
- ✓ The Eastman Housing Authority carries insurance coverage on the building structure owned by the Authority, but the Authorities insurance does not cover any renter's personal items inside or outside the unit. This is to advise renters/residents of the Eastman Housing Authority that we recommend Renters Insurance to cover your personal items on the property of the Eastman Housing Authority. My signature acknowledges that I have been informed and fully understand that the Eastman Housing Authority does not provide insurance coverage for my personal property and that the Eastman Housing Authority recommends renters insurance for all renters.
- ✓ Eastman Housing Authority adopted a Smoke-Free Housing Policy by Board Action on October 16, 2017. Any and all smoking is prohibited inside and outside your apartment. By signing below, you state that you have read, signed, and understand the Smoke-Free Housing Policy.

Things to Remember will be signed and placed in your Resident File.



*I acknowledge and have completed and received a Resident Handbook and participated in Orientation with All Lease, Policies and Procedures attached discussed.*

_____ Signature Tenant (HOH)	_____ Date
_____ Signature Tenant Spouse	_____ Date
_____ Signature Tenant Adult Member	_____ Date
_____ Signature Tenant Adult Member	_____ Date
_____ Signature EHA Representative	_____ Date



## HOUSE RULES

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### Lease

Your Lease is the agreement between you and the Housing Authority. It's tough reading, we know, but it's important for you to understand it thoroughly. Be sure to ask about any point that isn't clear. This handbook is based on the terms of your lease; keep your lease handy.

### Payment of rent

Draw a circle around the first of the month; that's the day rent is due. In order to provide you with a decent place to live, we must receive rent on time. Therefore, anyone who has not paid by the 5<sup>th</sup> business day may lose his or her home. We don't like to take this kind of action and we hope that your regular rent payments will make it unnecessary.

Rent may be paid on the 1<sup>st</sup> day of the month via:

Drop Box – Located @ Administrative Office Outside Front Entrance

Online Payment – Card payments @ [www.eastmanha.com](http://www.eastmanha.com)

United Postal Service Mail to: PO Box 100, Eastman, GA 31023

In Person – Administrative Office

### Security deposit

When you sign your lease, your security deposit is due. In exceptional situations, the Eastman Housing Authority reserves the right to allow a new resident to pay their security deposit in up to three (3) payments. One third shall be paid in advance, one third with their second rent payment, and one third with their third rent payment. This shall be at the sole discretion of the Housing Authority. Security Deposits will be refunded after you move out.

IF .....

1. You do not owe any rent.
2. You have paid for all damages for which you are responsible.
3. You have cleaned your house thoroughly enough, so there is no extraordinary cleaning to be done after you leave that would involve unusual expense to the Authority.
4. You have given us Thirty (30) days' notice in writing, that you intend to move, so that the Authority can rent the unit promptly, and not lose potential rent earnings because you failed to let us know in time
5. You have returned your two (2) apartment and one (1) mailbox keys.



## **Family Changes**

When important family events occur, don't forget to let us know about them. A change in the size of your family can affect your rent or the size unit that you need. Marriages, births, deaths, and other happenings that make a difference in the size of your family must be reported to the office promptly. Also, let us know about changes in your employment or income within 10 days of the event. Failure to comply with these rules could result in serious charges and violations.

## **Transfers**

As we mentioned above, a change in the size of your family may mean you need a larger, smaller or handicap home and the Management may then ask you to transfer to one that meets your needs. Your expense will be to pay for any damage to the home for which you are responsible as in Move Out. Additionally, you are responsible for any and all transfer and hookup fees with your utility, cable, and phone, as required by those companies and you will pay the difference in rent and security deposit at the time you sign the new lease. Rent of the transferred unit is based on your Rent Choice.

## **Boarders and Lodgers**

The residence into which you move has been carefully selected to meet the bedroom size requirements of your family composition. For this reason, our rule is "NO BOARDERS OR LODGERS". PERSONS NOT LISTED ON YOUR LEASE, STAYING IN YOUR UNIT, WILL BE CLASSIFIED AS UNAUTHORIZED GUESTS AND THEY WILL BE REQUIRED TO LEAVE YOUR UNIT OR YOUR LEASE WILL BE TERMINATED. These persons are subject to being Barred from housing authority property.

## **Disturbances**

Any Tenant causing problems or being involved in any kind of disturbance on Housing Authority property will be given a written disturbance letter and will be put in their file. Once the tenant has had three (3) reports Warning, Repeated and Serious the eviction process will begin.

## **Barr Notice**

Any person involved in any kind of a disturbance that is not a resident of Public Housing will be issued a Barred Notice from the Eastman Police Department and possibly arrested. If any of these people are seen back on Housing Authority Property they will be charged with Criminal Trespass.

## **Curfew**

Remember that we have elderly residents and residents with disabilities who need their rest and also children who need to be in bed early for school. For these





reasons there is a 11:00 P.M. curfew for non-residents and 11:00 pm curfew for residents on all housing authority property. This means you must be inside your apartment after these hours!

### **Business Signs**

Because these houses were built to be your home, no one is permitted to operate a business in them without prior written permission from the Executive Director. For the same reason we must ask you not to make billboards of your home and/or place on social media. No advertising signs, please.

### **Legal Notices**

Any legal notice will be delivered in writing to you or an adult member of your family residing with you with a required signature or will be sent by First Class Mail and/or Certified. Any notice from you to management must be in writing and delivered to our office, or sent First Class Mail and/or Certified. This includes NOTICE TO VACATE.

### **Inspections**

Your apartment is inspected when you move in by the Maintenance Supervisor. You will receive an orientation of your apartment by the Administrative Assistant and you will complete a self-inspection documenting your results on the Move In Inspection form which will become a permanent document in your file. Also, when you move out an inspection will be made. You may request to join in this inspection. If there is damage to the premises, other than normal wear and tear, you will be required to pay.

Annual Inspections will occur and it is documented in your Resident Calendar. This is your notification no other notice will be sent unless this date changes. You will be notified of any inspection to be carried on other than the above. Upon scheduled inspections, tenant-caused damage will be repaired and your account will be charged.

### **Sidewalks**

Sidewalks are not safe places for toys, bicycles, and other wheeled vehicles. Please make it your own personal responsibility to keep these much-used spaces clean and uncluttered at all times.

### **Repairs**

Our Maintenance Department staff makes necessary repairs when something leaks, breaks, not working properly or is otherwise damaged, so please request a Work Order promptly by calling the Maintenance Department at 478-374-5872. If no one answers, leave a message with your name, call back #, apartment # (exp. Harrell 16-



A or Stuckey 501) and a brief message as to the repair needed. A work order will be placed for you and if there are questions the Maintenance Supervisor will call you back for more information to better serve you. You will be charged for any damages to the home resulting from your negligence or damages caused by visitors. Damages due to wear and tear are our responsibility. Emergency repairs only after hours or on weekend or holidays, please call 478-285-1762. (See Maintenance Emergency for complete details)

## **Vehicles**

All residents must have vehicles registered with the housing authority. To register you must provide your driver's license, tag receipt, and insurance card to the administrative office.

Overnight guests, your guests must be registered too. Contact Resident Services Coordinator 478-374-5414 ext. 1 to register overnight guests with a driver's license #, tag #, and make, model, color of vehicle between 7:00am-5:00pm Monday thru Thursday.

All vehicles parked on housing authority property without being registered is subject to towing at owner's expense.

All vehicles on housing authority property must be in running condition and have current license plates.

There is No Assigned parking and No parking on the side of the road.

Vehicle repairs of any kind are not allowed on housing authority property. This includes oil changes.

All vehicles must park in designated parking areas. Parking on lawns, commons areas, playgrounds, and sidewalks is strictly prohibited. Vehicles parked in this matter will be are subject to a charge of 1<sup>st</sup> Offense \$10.00, 2<sup>nd</sup> Offense \$15.00 and 3<sup>rd</sup> Offense \$25.00. or ticketed and towed at owners' expense and a violation of your lease letter issued.

## **Utilities**

When you move in, your electricity and gas must be turned on. All utilities must be on at all times in the head of household's name, IN order to remain in your apartment. If your utilities are disconnected, you will be given a three (3) day demand letter to have utilities back on.



## **Pictures, Fixtures, Wallpaper and Floor Covering**

No nails are to be driven into masonry walls for hanging pictures or other decorative objects. Special stick on hangers may be used for solid walls. A special nail-in hanger may be used on sheetrock walls. You may not apply wallpaper or floor covering. If you install a rug or carpet **you may not glue, tack or use carpet tape to install it.** It will be your responsibility to remove the rug or carpet and clean and wax the floors when you move out. No alterations are allowed.

## **Trash Container**

Please be sure that all your garbage and trash make it into the trash container and not around it. If garbage is left outside in any other place besides the trash container, dogs and other animals will get into it, scattering it about the neighborhood. Keep children away from playing around trash container and require them to place their snack paper in the trash containers. It is also necessary to properly maintain your assigned trash container. It is a safety hazard for these containers if they are left near the street for extended periods of time. Trash containers are only allowed near the street from 4:00 pm on the day before scheduled pick up until 7:00 pm on the day of scheduled trash pickup. Any containers left out for pickup outside these hours will result in the resident being issued a warning violation upon first offense, with a \$10.00 charge for the housing authority personnel to move the trash container to the back door. All trash containers should be stored at the back door when not scheduled for pick up.

## **Trash on The Grounds or On the Roof**

If any garbage, trash or household furnishing are found on the grounds, common areas or scattered about, the resident will first be charged a \$10.00 Trash Pickup fee. On the second offense, the resident will be charged a \$20.00 Trash Pick-up fee. On third offense, you will be charged a \$30.00 Trash Pickup fee. Repeated violations will result in a lease violation letter. If you have trash, toys, sticks or any item on your roof, it is your responsible to call the Maintenance Department to place a work order for removal of the item. If you do not report it and a staff member reports the trash on the roof, you will be charged a \$10.00 Trash Removal fee.

## **Emergencies After Office Hours**

Unfortunately, things occur and sometimes these situations can become emergencies. Real emergencies demand immediate attention for the protection of someone's life, health, or property, whereas at other times, it can wait awhile to be corrected. A fire, either in your home or in the community, is a real emergency. If a fire starts, call the 911 immediately.



Burglary, vandalism, and disturbances of the peace are situations for the police to handle, so they are the ones to call. Maintenance emergencies, such as: gas leaks, broken water lines, broken sewer pipes, serious damages to roof as a result of storm, electric wires down, and any failure of lights when it involves hazards of life, health, or property require different handling. If any of these situations arise, call the Maintenance Department 478-374-5872 immediately and place a work order for a maintenance staff member to be assigned for your repairs. The number to call in case of emergency on weekends and holidays is 478-285-1762. See Maintenance Emergency for a full disclosure.

### **Your Mailing Address**

Obtain your address from your Lease and use the street #, street, drive, avenue, circle etc. name, together with your apartment number. (*exp. 901 Harrell Avenue, Apt. 16A*) If you use only the name of the community as your address or leave out your apartment number, your mail goes back to the Post Office. The result is delay for you and trouble for the Office. Check your mailbox on a regular basis, as the housing authority office sends mailings and notices regularly.

### **Care of the Grounds**

The appearance of the community is a job that you and the Management share. Management is responsible for the care of all the grounds and walks used by the community. We have a Lawn Care Maintenance Contract with a vendor to maintain our lawn care. Your **help** is required to make sure that the grass continues to grow or new grass is given a chance to grow. Walks are provided for your convenience. Do not walk on the grass. Do not allow your children to dig in the dirt or dig up the grass. No grass means erosion problems and it makes it ugly. Keep your grounds and lawns free from trash, toys or any other items. Keeping your yard clear of papers is an all-year round job. We think you'll find it a good idea to go over your grass daily to ensure your yard is well kept and beautiful. (See Yard and Grounds Policy)

### **Extermination**

We contract with a Pest Control Company for Semiannual treatment. Notice for this service is documented in the Resident Calendar. June and December, we schedule the semiannual treatment. We have a monthly call back for residents that need their apartment treated and/or have been place of housekeeping/sanitation. Insects usually are found where food is carelessly left around, trash is not discarded and homes are not cleaned and picked up. Please call the office 478-374-5414 ext. 1 if your apartment needs a follow-up treatment. This is for your protection as well as your neighbors.



## **Absent from Home**

If you are going to be out of town or away from your home for more than fifteen (15) days, you are required to notify the Housing Authority Office. While you are out of your home no one is allowed in your apartment. Plumbing has a way of acting up in expensive ways in unoccupied houses. You will have to bear the cost of repairs if you have not told us you'll be away.

## **Vacating Your Apartment**

When you decide to move out, please come to the Housing Authority Office and sign an Intent to Vacate Notice or visit [www.eastmanha.com](http://www.eastmanha.com) to obtain a form. You must give the Housing Authority a Thirty (30) day notice in advance of your departure, so that we may promptly rent your home to another family in need of housing. If you do not give us Thirty (30) day advance notice in writing, we'll have to charge you for the Thirty (30) days rent, unless the house is occupied in less than that time, in which case we charge you for the number of days for which the house was vacant. When you leave, please clean your home thoroughly. A charge will be made if we have to clean and/or remove trash. Return all keys to the Housing Authority Administrative Office via Drop Box or in person. You will be charged for keys and changing of the locks if you do not return ALL keys at the time of move out not a day and/or week down the road.

## **Screens and Screen Doors**

Be sure to close your windows when you are to be away from home for security of your home and our property. Rain blowing into the apartment from an open window will damage the walls, floors and structure of the unit. Also, shut your screen doors securely so that they will not break as they swing free in a high wind. You will be responsible for damaged items due to your negligence and these charges will be added to your account for payment in full.

## **Public Housing Is Neighborly and Communal Living**

When people live close together, life for all is much more pleasant if they respect and try to understand one another. Loud radios, over-time parties and guest, children outside unattended, shouting, and slamming of doors can be awfully annoying to your neighbors. With a little effort and good will on your part, all of these can be controlled. Be that Good Neighbor!

## **Important Suggestions and NO's**

Do not ignore the ODOR OF GAS. Immediately open all windows and put out all flames. If you have checked and found that all the jets are turned off, notify the Maintenance Department for the leak to be repaired. Escaping gas has caused many bad explosions. Don't neglect those wires that make your toasters, electric irons, radios and lamps work. Check carefully for frayed covering, bent prongs on



plugs, and loose wiring. Don't store paint, oil, gasoline, naphtha, propane, oily rags, clothes with oil or paint on them, or newspapers in your home or around it. These are first-class fire hazards. Don't clutter up the space around stoves or hot water heaters. Keep the area clear at all times.

**NO SWIMMING POOLS ARE ALLOWED...NO EXCEPTION!!**

**NO BOUNCY OR WATER INFLATABLE...NO EXCEPTION!!**

**NO TRAMPOLINE...NO EXCEPTION!!!**

**NO WATER BEDS...NO EXCEPTION!!**

### **Grills and/or Smokers**

ALL OUTSIDE COOKING GRILLS MUST BE USED 10 FEET AWAY FROM COVERED PORCHES, PATIOS AND BUILDING. You damage any EHA property and you will be responsible for the repair cost.

### **Resident Activities**

The civic, educational, health, and recreational organizations help in our community and assist in making it a better place to live. There are groups of residents, just like you, who deal with needs that arise in the community.

The Housing Authority Administrative Management is always working to improve conditions throughout our communities, which will benefit all of our residents. The Management needs the assistance of interested groups who will work closely with us toward this goal. Talk with Management about joining the resident organization in your community. If there is no such organization in the community, ask Management for assistance in organizing the residents. Take the lead – your neighborhood will be a better place to live if we work together.

### **Abandoned Personal Property**

When you move, be sure to take your personal possessions with you. The management cannot be responsible for anything you leave behind. You will be charged if we have to remove abandoned items and your trash. This can be expensive for you and us. Do your part!

### **Holiday Decorations**

We encourage you to enjoy and decorate for any holiday, but all decorations must be removed no later than two (2) weeks after the holiday. For safety purposes, please do not leave lights burning on your Christmas tree when you are not home. Also, water live trees frequently (once a week) to keep them from drying out and becoming a fire hazard.



## **Windows**

All window treatment backing must be white or beige. When you are looking into the apartment, we must see white or beige. The housing authority does not furnish window treatments.

## **Porches**

Your porch front and back must be kept neat and clean. Bagged trash, trash cans, mops or brooms are not to be left outside the apartment. Shades are not allowed to be hung on the porches. Management reserves the right to monitor décor and appearance. Residents may be required to remove items that, in the sole judgment of management, detract from the appearance of the complex. Only patio style furniture for outdoors, grills, bicycles and plants should be visible when stored on the porches. Items may not be stored in the yard. No children toys should be stored outside.

## **Prohibited Conduct**

You, all family members and guests may not engage in the following activities:

- Behaving in a loud or obnoxious manner;
- Disturbing or threatening the rights, comfort, health, safety, or convenience of others (including our employees, agents, or law enforcement officials) in or near the apartment community and or offices;
- Disrupting our business operations; manufacturing, delivering, possessing with intent to deliver, or otherwise possessing a controlled substance or drug paraphernalia;
- Engaging in or threatening violence; possessing a weapon prohibited by state law;
- Discharging a firearm in the apartment community;
- Displaying or possessing a gun, knife or other weapons in the common area in a way that may alarm others;
- Storing anything in water heater closets;
- Tampering with utilities or telecommunications;
- Bringing hazardous materials into the apartment community;
- Allowing children under the age of six (6) to be unsupervised by an adult;
- Injuring our reputation by making bad faith allegations against us to others.
- Littering on the property.
- Smoking on the property inside and/or outside. You must be 25 feet from EHA property.

COVID-19 has altered our daily procedures. We require that you wear a mask when coming to your scheduled appointments, lease up and rent payments. Only one (1) person is allowed in the Administrative Lobby @ all times. We practice social



distancing. The staff will wear mask at all times when working with you and your housing needs.

**You will be required to sign the House Rules and an acknowledgment that you understand your responsibility to read and abide by all the rules. It will become a permanent document in your Resident File.**

*I acknowledge and have completed and received a copy of the House Rules in the Resident Handbook and participated in Orientation with All Lease, Policies and Procedures attached discussed. I further understand that it is my responsible to abide by the House Rules and all Policies and Procedures as a Tenant of the EHA.*

_____ Signature Tenant (HOH)	_____ Date
_____ Signature Tenant Spouse	_____ Date
_____ Signature Tenant Adult Member	_____ Date
_____ Signature Tenant Adult Member	_____ Date
_____ Signature EHA Representative	_____ Date





## HOW TO PREVENT AGAINST BED BUGS

When dealing with bed bugs it is important to always keep in mind that they are hitchhikers and can go just about anywhere! Bed bugs love hotels, cruise ships, dormitories and shelters. Even the nicest hotels and most expensive in the world can, and have, had bed bug infestations. Bed bugs breed quickly and are hitchhikers and move from place to place through luggage, clothes, shoes and other mobile items. While bed bugs have nothing to do with "sanitation", they do love clutter to hide in, so the more clutter in a space, the more bed bugs.

*Here are some steps that you can take to help protect your home against a bed bug infestation.*

1. When possible replace wooden headboards and bed frames with metal ones. Although bed bugs can still hide and nest in metal, they are less likely to than wood.
2. Keep the bed bug protective covers on your mattress and box spring. New mattresses and box springs should immediately be covered as well.
3. Always carefully inspect antiques and any second-hand furniture before bringing them into your home, even if they aren't upholstered.
4. Always wash and dry on high heat any second hand clothing or, when possible toys or other items before bringing them into your home.
5. When travelling, inspect the mattress and box spring you will be sleeping on. In addition to looking for the actual bed bugs, look for small brownish or reddish dots on the bed linens and mattresses. This is why most hotels use white sheets, if the hotels sheets are dark in color, this could be a red flag.
6. When travelling, do not put your luggage on the bed, this gives bed bugs a ride right into your life. Use the metal luggage rack, which should also be kept away from not only the bed, but also the curtains, tables and wall hangings in the rooms. Don't forget to inspect your luggage when you return from trips before you bring them back into your home.
7. If you have already had a bed bug infestation and eradication. Remember that they came from somewhere. They could have from an adjacent apartment or home, while travelling, or at a friend or relative's house. Don't forget that friends or relatives may have picked up these parasites from your home while you had an infestation, so always be careful not to reintroduce them into your home.
8. Have overnight guests to your home check/inspect their bags and luggage as well before placing them in their sleeping quarters.
9. Vacuum at least once a week, pay special attention to areas around beds and furniture posts.

10. Prevent bed bug harborage (hiding places) by keeping all areas free of excessive storage and clutter.

If you think that you have Bed Bugs call the Administrative Office @ 478-374-5414 ext. 2 and report it. The Administrative Assistant will work with you to coordinate the treatment of your unit.





**U.S. Department of Housing and Urban Development  
Office of Public and Indian Housing**

**DEBTS OWED TO PUBLIC HOUSING AGENCIES AND TERMINATIONS**

**Paperwork Reduction Notice:** Public reporting burden for this collection of information is estimated to average 7 minutes per response. This includes the time for respondents to read the document and certify, and any recordkeeping burden. This information will be used in the processing of a tenancy. Response to this request for information is required to receive benefits. The agency may not collect this information, and you are not required to complete this form, unless it displays a currently valid OMB control number. The OMB Number is 2577-0266, and expires 10/31/2019.

**NOTICE TO APPLICANTS AND PARTICIPANTS OF THE FOLLOWING HUD RENTAL ASSISTANCE PROGRAMS:**

- Public Housing (24 CFR 960)
- Section 8 Housing Choice Voucher, including the Disaster Housing Assistance Program (24 CFR 982)
- Section 8 Moderate Rehabilitation (24 CFR 882)
- Project-Based Voucher (24 CFR 983)

The U.S. Department of Housing and Urban Development maintains a national repository of debts owed to Public Housing Agencies (PHAs) or Section 8 landlords and adverse information of former participants who have voluntarily or involuntarily terminated participation in one of the above-listed HUD rental assistance programs. This information is maintained within HUD's Enterprise Income Verification (EIV) system, which is used by Public Housing Agencies (PHAs) and their management agents to verify employment and income information of program participants, as well as, to reduce administrative and rental assistance payment errors. The EIV system is designed to assist PHAs and HUD in ensuring that families are eligible to participate in HUD rental assistance programs and determining the correct amount of rental assistance a family is eligible for. All PHAs are required to use this system in accordance with HUD regulations at 24 CFR 5.233.

HUD requires PHAs, which administers the above-listed rental housing programs, to report certain information at the conclusion of your participation in a HUD rental assistance program. This notice provides you with information on what information the PHA is required to provide HUD, who will have access to this information, how this information is used and your rights. PHAs are required to provide this notice to all applicants and program participants and you are required to acknowledge receipt of this notice by signing page 2. Each adult household member must sign this form.

**What information about you and your tenancy does HUD collect from the PHA?**

The following information is collected about each member of your household (family composition): full name, date of birth, and Social Security Number.

The following adverse information is collected once your participation in the housing program has ended, whether you voluntarily or involuntarily move out of an assisted unit:

1. Amount of any balance you owe the PHA or Section 8 landlord (up to \$500,000) and explanation for balance owed (i.e. unpaid rent, retroactive rent [due to unreported income and/ or change in family composition] or other charges such as damages, utility charges, etc.); and
2. Whether or not you have entered into a repayment agreement for the amount that you owe the PHA; and
3. Whether or not you have defaulted on a repayment agreement; and
4. Whether or not the PHA has obtained a judgment against you; and
5. Whether or not you have filed for bankruptcy; and
6. The negative reason[s] for your end of participation or any negative status (i.e., abandoned unit, fraud, lease violations, criminal activity, etc.) as of the end of participation date.



**Who will have access to the information collected?**

This information will be available to HUD employees, PHA employees, and contractors of HUD and PHAs.

**How will this information be used?**

PHAs will have access to this information during the time of application for rental assistance and reexamination of family income and composition for existing participants. PHAs will be able to access this information to determine a family's suitability for initial or continued rental assistance, and avoid providing limited Federal housing assistance to families who have previously been unable to comply with HUD program requirements. If the reported information is accurate, a PHA may terminate your current rental assistance and deny your future request for HUD rental assistance, subject to PHA policy.

**How long is the debt owed and termination information maintained in EV?**

Debt owed and termination information will be maintained in EV for a period of up to ten (10) years from the end of participation date or such other period consistent with State Law.

**What are my rights?**

In accordance with the Federal Privacy Act of 1974, as amended (5 USC 552a) and HUD regulations pertaining to its implementation of the Federal Privacy Act of 1974 (24 CFR Part 16), you have the following rights:

1. To have access to your records maintained by HUD, subject to 24 CFR Part 16.
2. To have an administrative review of HUD's initial denial of your request to have access to your records maintained by HUD.
3. To have incorrect information in your record corrected upon written request.
4. To file an appeal request of an initial adverse determination on correction or amendment of record request within 30 calendar days after the issuance of the written denial.
5. To have your record disclosed to a third party upon receipt of your written and signed request.

**What do I do if I dispute the debt or termination information reported about me?**

If you disagree with the reported information, you should contact in writing the PHA who has reported this information about you. The PHA's name, address, and telephone numbers are listed on the Debts Owed and Termination Report. You have a right to request and obtain a copy of this report from the PHA. Inquire the PHA why you dispute the information and provide any documentation that supports your dispute. HUD's record retention policies at 24 CFR Part 905 and 24 CFR Part 982 provide that the PHA may destroy your records three years from the date your participation in the program ends. To ensure the availability of your records, disputes of the original debt or termination information must be made within three years from the end of participation date; otherwise the debt and termination information will be presumed correct. Only the PHA who reported the adverse information about you can delete or correct your record. Your filing of bankruptcy will not result in the removal of debt owed or termination information from HUD's EV system. However, if you have included this debt in your bankruptcy filing and/or this debt has been discharged by the bankruptcy court, your record will be updated to include the bankruptcy indicator, when you provide the PHA with documentation of your bankruptcy status.

The PHA will notify you in writing of its action regarding your dispute within 30 days of receiving your written dispute. If the PHA determines that the disputed information is incorrect, the PHA will update or delete the record. If the PHA determines that the disputed information is correct, the PHA will provide an explanation as to why the information is correct.

This Notice was provided by the below-listed PHA:

Housing Authority of the City of Eastman  
 P O Box 100, 824 Griffin Ave. SW  
 Eastman, GA 31023

I hereby acknowledge that the PHA provided me with the  
**Debts Owed to PHAs & Termination Notice:**

Signature

Date

Printed Name





U.S. Department of Housing and Urban Development  
Office of Public and Indian Housing (PIH)



## *What You Should Know About EIV*

### **A Guide for Applicants & Tenants of Public Housing & Section 8 Programs**

#### **What is EIV?**

The Enterprise Income Verification (EIV) system is a web-based computer system that contains employment and income information of individuals who participate in HUD rental assistance programs. All Public Housing Agencies (PHAs) are required to use HUD's EIV system.

#### **What information is in EIV and where does it come from?**

HUD obtains information about you from your local PHA, the Social Security Administration (SSA), and U.S. Department of Health and Human Services (HHS).

HHS provides HUD with wage and employment information as reported by employers; and unemployment compensation information as reported by the State Workforce Agency (SWA).

SSA provides HUD with death, Social Security (SS) and Supplemental Security Income (SSI) information.

#### **What is the EIV information used for?**

Primarily, the information is used by PHAs (and management agents hired by PHAs) for the following purposes to:

1. Confirm your name, date of birth (DOB), and Social Security Number (SSN) with SSA.
2. Verify your reported income sources and amounts.
3. Confirm your participation in only one HUD rental assistance program.
4. Confirm if you owe an outstanding debt to any PHA.
5. Confirm any negative status if you moved out of a subsidized unit (in the past) under the Public Housing or Section 8 program.
6. Follow up with you, other adult household members, or your listed emergency contact regarding deceased household members.

EIV will alert your PHA if you or anyone in your household has used a false SSN, failed to report complete and accurate income information, or is receiving rental assistance at another address. **Remember, you may receive rental assistance at only one home!**

EIV will also alert PHAs if you owe an outstanding debt to any PHA (in any state or U.S. territory) and any negative status when you voluntarily or involuntarily moved out of a subsidized unit under the Public Housing or Section 8 program. This information is used to determine your eligibility for rental assistance at the time of application.

The information in EIV is also used by HUD, HUD's Office of Inspector General (OIG), and auditors to ensure that your family and PHAs comply with HUD rules.

Overall, the purpose of EIV is to identify and prevent fraud within HUD rental assistance programs, so that limited taxpayer's dollars can assist as many eligible families as possible. EIV will help to improve the integrity of HUD rental assistance programs.

#### **Is my consent required in order for information to be obtained about me?**

Yes, your consent is required in order for HUD or the PHA to obtain information about you. By law, you are required to sign one or more consent forms. When you sign a form HUD-9886 (*Federal Privacy Act Notice and Authorization for Release of Information*) or a PHA consent form (which meets HUD standards), you are giving HUD and the PHA your consent for them to obtain information about you for the purpose of determining your eligibility and amount of rental assistance. The information collected about you will be used only to determine your eligibility for the program, unless you consent in writing to authorize additional uses of the information by the PHA.

**Note:** *If you or any of your adult household members refuse to sign a consent form, your request for initial or continued rental assistance may be denied. You may also be terminated from the HUD rental assistance program.*

#### **What are my responsibilities?**

As a tenant (participant) of a HUD rental assistance program, you and each adult household member must disclose complete and accurate information to the PHA, including full name, SSN, and DOB; income information; and certify that your reported household composition (household members), income, and expense information is true to the best of your knowledge.

February 2010



Remember, you must notify your PHA if a household member dies or moves out. You must also obtain the PHA's approval to allow additional family members or friends to move in your home prior to them moving in.

#### What are the penalties for providing false information?

Knowingly providing false, inaccurate, or incomplete information is **FRAUD** and a **CRIME**.

If you commit fraud, you and your family may be subject to any of the following penalties:

1. Eviction
2. Termination of assistance
3. Repayment of rent that you should have paid had you reported your income correctly
4. Prohibited from receiving future rental assistance for a period of up to 10 years
5. Prosecution by the local, state, or Federal prosecutor, which may result in you being fined up to \$10,000 and/or serving time in jail.

**Protect yourself by following HUD reporting requirements.** When completing applications and reexaminations, you must include all sources of income you or any member of your household receives.

If you have any questions on whether money received should be counted as income or how your rent is determined, ask your PHA. When changes occur in your household income, contact your PHA immediately to determine if this will affect your rental assistance.

#### What do I do if the EIV information is incorrect?

Sometimes the source of EIV information may make an error when submitting or reporting information about you. If you do not agree with the EIV information, let your PHA know.

If necessary, your PHA will contact the source of the information directly to verify disputed income information. *Below* are the procedures you and the PHA should follow regarding incorrect EIV information.

**Debts owed to PHAs and termination information** reported in EIV originates from the PHA who provided you assistance in the past. If you dispute this information, contact your former PHA directly in writing to dispute this information and provide any documentation that supports your dispute. If the PHA determines that the disputed information is incorrect, the PHA will update or delete the record from EIV.

**Employment and wage information** reported in EIV originates from the employer. If you dispute this information, contact the employer in writing to dispute and request correction of the disputed employment and/or wage information. Provide your PHA with a copy of the letter that you sent to the employer. If you are unable to get the employer to correct the information, you should contact the SWA for assistance.

**Unemployment benefit information** reported in EIV originates from the SWA. If you dispute this information, contact the SWA in writing to dispute and request correction of the disputed unemployment benefit information. Provide your PHA with a copy of the letter that you sent to the SWA.

**Death, SS and SSI benefit information** reported in EIV originates from the SSA. If you dispute this information, contact the SSA at (800) 772-1213, or visit their website at: [www.socialsecurity.gov](http://www.socialsecurity.gov). You may need to visit your local SSA office to have disputed death information corrected.

**Additional Verification.** The PHA, with your consent, may submit a third party verification form to the provider (or reporter) of your income for completion and submission to the PHA.

You may also provide the PHA with third party documents (i.e. pay stubs, benefit award letters, bank statements, etc.) which you may have in your possession.

**Identity Theft.** Unknown EIV information to you can be a sign of identity theft. Sometimes someone else may use your SSN, either on purpose or by accident. So, if you suspect someone is using your SSN, you should check your Social Security records to ensure your income is calculated correctly (call SSA at (800) 772-1213); file an identity theft complaint with your local police department or the Federal Trade Commission (call FTC at (877) 438-4338, or you may visit their website at: <http://www.ftc.gov>). Provide your PHA with a copy of your identity theft complaint.

#### Where can I obtain more information on EIV and the income verification process?

Your PHA can provide you with additional information on EIV and the income verification process. You may also read more about EIV and the income verification process on HUD's Public and Indian Housing EIV web pages at: <http://www.hud.gov/offices/pih/programs/eiv/hipliv.cfm>.

The information in this Guide pertains to applicants and participants (tenants) of the following HUD-PIH rental assistance programs:

1. Public Housing (24 CFR 960); and
2. Section 8 Housing Choice Voucher (HCV), (24 CFR 982); and
3. Section 8 Moderate Rehabilitation (24 CFR 882); and
4. Project-Based Voucher (24 CFR 983)

My signature below is confirmation that I have received this Guide.

Signature

Date



## Maintenance Department

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The Maintenance Department of the Eastman Housing Authority is located at 703 Harrell Ave., Eastman, GA 31023

Phone: 478-374-5872

Emergency, After Hours and Holidays: 478-285-1762

Maintenance Supervisor – Alton Floyd

Email: [afloyd@eastmanha.com](mailto:afloyd@eastmanha.com)

Maintenance Staff:

Errol Beck, Mechanic

Steven (Dexter) Hester, Mechanic

Derrick Glover, Mechanic Aide

The Maintenance Department is provided to ensure your apartment are in the best possible working condition. It is your responsibility to use reasonable care to keep your apartment in such condition as to ensure proper health and sanitation standards for Resident, household members and neighbors. **RESIDENT SHALL NOTIFY THE AUTHORITY PROMPTLY OF KNOWN NEED FOR REPAIRS TO THE DWELLING UNIT**, and of known unsafe or unsanitary conditions in the dwelling unit or in common areas and grounds of the complex. Resident's failure to report the need for repairs in a timely manner shall be considered to contribute to any damage that occurs.

Call the Maintenance Department and leave a voice message to place your Work order. Please leave the following information on the answer machine:

- Your Name
- Apartment Number and Complex
- Brief description of work and/or repair needed
- Call back number

Routine Work Orders are allowed three (3) working days for repair.

Work Orders generated by Inspections have thirty (30) days for repair. Your Notification that repairs are needed from your inspections is provided in your letter advising of Passed, Failed and/or Repairs needed.



The Resident Calendar notifies you of ALL Inspections, Preventative Maintenance and HVAC Filter replacement. Filters are replaced quarterly.

It is the responsible of the resident for the payment of certain other charges specified by type(s) and amounts in the Schedule of Maintenance Charges incorporated by reference in this Lease Agreement and the Schedule of Maintenance Charges is subject to change at any time. Other charges can include:

- Maintenance costs - The cost for services or repairs due to intentional or negligent damage to the apartment, common areas or grounds beyond normal wear and tear, caused by Resident, household members or by guests. When Landlord determines that needed maintenance is not caused by normal wear and tear, Resident shall be charged for the cost of such service, either in accordance with the Schedule of Maintenance Charges or (for work not listed on the Schedule of Maintenance Charges) based on the actual cost to Landlord for the labor and materials needed to complete the work. If overtime work is required, overtime rates shall be charged.
- After Hour maintenance costs--If maintenance is called to unlock doors after hours, the cost will be \$25 for each occurrence. After 11pm the cost will be \$35.00.

Do not pour grease down your sink drains, out the back door and/or in the wooded area behind/beside your apartment.

Do not flush feminine products, wet wipes or flushable wipes down your toilet.

If you are not at home a maintenance door hanger will be placed on your front door. If the work item was not complete an explanation will be given.

COVID-19 has altered our Maintenance procedures to ensure we protect you and our staff. Maintenance will wear mask and gloves at all times. We ask that our residents wear a mask and/or move to a location in the apartment that the Maintenance staff is not performing the request and/or needed work task. If you do not comply as asked by staff member, the work task item will not be completed. Let's do this together and stay safe!

### **Trash Removal Request by Residents**

Oversized household items that you wish to discard and have no one to discard for you and will not fit in the trash container maybe picked up by the Maintenance Department by Work Order Only. You will be charged a \$10.00 fee and a land fill fee.





This will be charged to your account. Do Not place household items in the back of the apartment and/or on the sidewalk.

## **Inspections**

Annual Inspections are mandated by HUD. The housing authority must conduct one (1) yearly and HUD will conduct a Yearly, 2 Year or 3 Year based on the score the authority receives. So that means we need your help to keep a good score. Call your work orders in and take care of your homes. You are to Keep them in the same working condition when you moved in. If you make a hole in the wall, call that in to the maintenance department for a work order. It's important that we work together to keep your home looking and working in top order!

Units not meeting Housing standards will be placed on weekly/monthly inspections as needed. Residents will be required to attend a Housekeeping workshop if any inspection is failed. Any deficiencies found in the unit during the inspections will be repaired within thirty (30) days of the inspection if it's not an emergency, health and safety repair, the resident may be responsible for the cost of those items. Please refer to your current Schedule of Charges for amounts. (Schedule of Maintenance charges are found in your Lease as an attachment and/or of Official Bulletin Board)



## **Maintenance Emergency**

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Our mission is to keep your apartment in such condition as to ensure proper health and sanitation standards for our Resident, members and neighbors.

Resident must notify the Maintenance Department promptly of known need for repairs to the dwelling unit, and of known unsafe conditions.

We provide after hour calls in an emergency situation that poses a threat to Resident's life or Housing Authority's property. The following is concerned an emergency:

### **AFTER HOUR EMERGENCY MAINTENANCE:**

The Landlord will provide after hour calls in an emergency situation that poses a threat to Resident's life or Housing Authority's property.

- Gas Leaks,
- Exposed Electrical Wires
- Major Water Leaks,
- Malfunction smoke/fire alarm – You have placed the battery
- Unsecured Entrance or Windows
- Clogged Lines which cause Sewage Backup into the apartment

Unless the situation is caused by Resident abuse or neglect, there will be no charge to Resident.

\*Non-Emergency Response After hours is a \$25.00 charge. May sure you are giving the correct information when calling the emergency maintenance for an emergency situation as stated above. If the maintenance staff finds that it does not meet the above policy the request will not be complete a work order for the next working day for you will be issued and you will be charged a \$25.00 charge.

After Hour Emergency maintenance costs--If maintenance is called to unlock doors after business hours, the cost for off duty hours will be \$25 from 5:30 p.m. – 10:59 p.m. and \$35 from 11:00 p.m. - 7:00 a.m. for each occurrence.



## Housing Authority of the City of Eastman, Georgia

### Nondiscrimination Policy

#### Adopted Board Action October 18, 2011

It is the policy of the Housing Authority of the City of Eastman, Georgia (EHA) to comply with Title VIII of the Civil Rights Act of 1968, as amended, (commonly known as the Fair Housing Act) by ensuring that apartments are available to all persons without regard to race, color, religion, national origin, disability, familial status or sex. This policy means that, among other things, the EHA and all its agents and employees with the responsibility for renting, managing or administering any dwelling units must not discriminate in any aspect of the rental of dwellings against qualified applicants or tenants because of race or color. Such agents and employees may not:

- A. Refuse to rent, or negotiate for the rental of, or otherwise make unavailable or deny, a dwelling to any person because of race or color;
- B. Discriminate against any person in the terms, conditions or privileges of rental of a dwelling, or in the provision of services or facilities in connection therewith, because of race or color;
- C. Make, print, or publish, or cause to be made, printed, or published any notice, statement, or advertisement, with respect to the rental of a dwelling that indicated any preference, limitation, or discrimination based on race or color; or
- D. Represent to persons because of race or color that any dwelling is not available for inspection or rental when such dwelling is in fact so available.

Any EHA agent or employee who fails to comply with this Nondiscrimination Policy will be subject to appropriate disciplinary action. Any action taken by an agent or employee that results in the unequal service, treatment or behavior to tenants on the basis of race or color may constitute a violation of state and federal fair housing laws. Any tenant who believes that any of the above policies have been violated by any agent or employee of the EHA may contact the U.S. Department of Housing and Urban Development at 1-888-799-2085, or the U.S. Department of Justice at 1-800-896-7743 or 202-514-4713.





# Housing Authority of the City of Eastman

824 Griffin Avenue, SW  
Post Office Drawer 100  
Eastman, Georgia 31023  
478.374.5414 (P) • 478.374.0505 (F)  
800.255.0056 (TDD)  
Michelle Butler, Executive Director

Date: \_\_\_\_\_

RE: REQUEST GREIVANCE (RESIDENT)

Name of Applicant/Resident: \_\_\_\_\_

Address: \_\_\_\_\_ Apt. \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Phone/Cell #: \_\_\_\_\_

I, \_\_\_\_\_, would like to request a meeting with the Eastman  
Housing Authority in regards to: *(if addition space is needed turn over on back of sheet and please indicate you have  
continued on the back)*

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Resident Signature \_\_\_\_\_

EHA Staff Signature Receiving: \_\_\_\_\_ Date: \_\_\_\_\_

EHA E.D. Signature Receiving: \_\_\_\_\_ Date: \_\_\_\_\_

Scheduled Meeting via ( ) Phone-( ) left message ( ) Mail on Date: \_\_\_\_\_ @ \_\_\_\_\_

Meeting Scheduled for: \_\_\_\_\_ @ \_\_\_\_\_



**EASTMAN HOUSING AUTHORITY**  
**AUTHORIZATION FOR PET OWNERSHIP FORM**  
(Please fill out a form for each pet)

Pet Owner's Name: \_\_\_\_\_

Pet Owner's Address & Apt # \_\_\_\_\_

Home Telephone: \_\_\_\_\_ Work Telephone: \_\_\_\_\_

Pet's Name \_\_\_\_\_ Type or Breed: \_\_\_\_\_

Spayed or Neutered (Circle One)      Date: \_\_\_\_\_

License or ID Number: \_\_\_\_\_

Veterinarian Utilized: \_\_\_\_\_

Address: \_\_\_\_\_ Phone #: \_\_\_\_\_

Emergency Caregiver for the Pet: \_\_\_\_\_

Address: \_\_\_\_\_ Phone #: \_\_\_\_\_

**The pet must be approved and you must pay your Pet Fee prior to pet coming in to your home.**

**I have read and understand the rules governing pets and I and all members of my household promise to fully comply.**

Signature of Pet Owner: \_\_\_\_\_ Date: \_\_\_\_\_

EHA Staff Representative: \_\_\_\_\_ Date: \_\_\_\_\_

Please attach to this form the following:

- Picture of the Pet
- Rabies Certification



## EASTMAN HOUSING AUTHORITY REQUEST FOR REASONABLE ACCOMMODATION

You may utilize this form to request that the Eastman Housing Authority (EHA) provide a reasonable accommodation to you or any member of your household who has a disability, so that you or a member of your household may utilize your residence, or any of the EHA's facilities, programs or services.

For purposes of this form, please refer to the attached "Reasonable Accommodation Policy" to determine whether you are "qualified individual with a disability".

If you would like to request a reasonable accommodation on behalf of yourself or a member of your household, please complete this form. You must date and sign your name at the bottom of this form and return the form to Housing Specialist office. If you need assistance in understanding whether you or a member of your household is a "qualified individual with a disability" or if you need assistance in completing this form, please contact your Housing Specialist at the Administrative Office or the EHA's Executive Director.

Date of Request: \_\_\_\_\_

Name of Applicant/Resident/Participant: \_\_\_\_\_

Address: \_\_\_\_\_ Apt. # \_\_\_\_\_

City/State/Zip \_\_\_\_\_ Telephone No. \_\_\_\_\_

1. I am requesting the following reasonable accommodation(s):

\_\_\_\_\_  
\_\_\_\_\_

2. I am requesting the reasonable accommodation(s) on behalf of: (name)

\_\_\_\_\_

3. My reason(s) for requesting this reasonable accommodation:

\_\_\_\_\_  
\_\_\_\_\_

4. A physician, licensed health care professional, professional representing a social service agency, disability agency or clinic may provide verification of your disability.

You may request a physical modification to your current unit or a transfer to a unit that has been previously modified [in your development or another development]. The Eastman Housing Authority will work with you to determine how to fulfill your reasonable accommodation request. The Eastman Housing Authority may require documentation to support your reasonable accommodation request(s). Please indicate which option you prefer:

\_\_\_\_\_ I wish to have modifications made to my current unit only.



\_\_\_\_\_ I would consider moving to a unit that is currently modified, but only within my current development.

\_\_\_\_\_ I would consider moving to a unit that is currently modified, even in another development.

\_\_\_\_\_  
Signature of Applicant/Resident/Participant

\_\_\_\_\_  
Date

=====  
**EHA Office use only:**

Date and Signature of staff receiving form:

\_\_\_\_\_  
Staff Signature and Title

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature and Title of Reviewing Staff Member

\_\_\_\_\_  
Date



## EASTMAN HOUSING AUTHORITY AUTHORIZATION FOR RELEASE OF INFORMATION

Household member with disability: \_\_\_\_\_

I hereby authorize the release of information to the Eastman Housing Authority regarding the request for reasonable accommodation described on this form. This release shall constitute a limited authorization for the release of information, as described below.

I hereby authorize \_\_\_\_\_ [insert name of health care provider or other appropriate documenting authority] to consult with representatives of the Eastman Housing Authority, in writing, in person, or by telephone concerning the physical or mental impairment(s) that I assert to qualify as a individual with a disability for the sole purpose of this reasonable accommodation request.

For purposes of this Release, a "Qualified Individual with a Disability" is defined as a person who has a physical or mental impairment that:

1. Substantially limits one or more major life activities.
2. Has a record of such an impairment.
3. Is regarded as having an impairment.

"A physical or Mental Impairment" is defined as:

1. Any physiological disorder or condition, cosmetic disfigurement, or anatomical loss affecting one or more of the body systems including, but not limited to: neurological, musculoskeletal, special sense organs, respiratory, and speech organs: or
2. Any mental or psychological disorder, such as mental retardation, organic brain syndrome, emotional or mental illness and specific learning disabilities.

The term "Physical or Mental Impairment" includes, but is limited to, such diseases and conditions as visual, speech and hearing impairments, epilepsy, multiple sclerosis, cancer, etc.

"Major Life Activities" include functions such as caring for one's self, performing manual tasks, walking, seeing, hearing, speaking, breathing, learning, and working.

"Has a Record of 'Such an Impairment (mental or physical)'" means has a history of, or has been misclassified as having, a mental or physical impairment that substantially limits one or more major life activities.

"Is Regarded as Having an Impairment" means:

1. Has a physical or mental impairment that does not substantially limit one or more major life activities, but is treated by a recipient as constituting such a limitation.
2. Has a physical or mental impairment that substantially limits one or more major life activities only as a result of the attitude of others toward the impairment.
3. Has none of the impairments defined by Section 504's definition of "physical or mental impairment, but is treated by a recipient as having such an impairment.





In addition, I authorize \_\_\_\_\_ *[insert name of health care provider or other appropriate documenting authority]* to provide only documentation that is necessary to verify that I meet the definition of a "Qualified Individual with a Disability", as defined above.

This Authorization solely authorizes the release of information necessary to verify the following:

1. Documentation necessary to verify that the person meets the definitions noticed above;
2. A description of the needed accommodation; and,
3. A description of the identifiable relationship between my disability and the requested accommodation(s).

This Authorization for Release of Information should only seek information that is necessary to determine if the requested reasonable accommodation is needed because of a disability.

This Authorization does not authorize the Public Housing Authority to examine my medical records, including diagnosis or test result(s); nor does this authorize the release of detailed information about the nature or severity of my disability.

The information/documentation released as a result of this Authorization shall be kept confidential and not shared with anyone unless required to make or assess a decision to grant or deny a reasonable accommodation request.

\_\_\_\_\_  
Name of Family Member/Parent/Legal Guardian

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Relationship to Resident

\_\_\_\_\_  
Date

**PLEASE PROVIDE THE FOLLOWING INFORMATION:**

Name of Health Care Provider/Documenting Authority:

\_\_\_\_\_

Address of Health Care Provider/Documenting Authority:

\_\_\_\_\_

\_\_\_\_\_

Telephone Number of Health Care Provider/Documenting Authority: \_\_\_\_\_

Facsimile Number of Health Care Provider/Documenting Authority: \_\_\_\_\_





## REQUEST FOR UNIT TRANSFER FORM

### Unit Transfers

#### Objectives of the Transfer Policy

The objectives of the Transfer Policy include the following:

- A. To address emergency situations.
- B. To fully utilize available housing resources while avoiding overcrowding by ensuring that each family occupies the appropriate size unit.
- C. To facilitate a relocation when required for modernization or other management purposes.
- D. To facilitate relocation of families with inadequate housing accommodations.
- E. To provide an incentive for families to assist in meeting the Eastman Housing Authority's deconcentration goal, if appropriate.
- F. To eliminate vacancy loss and other expenses due to unnecessary transfers.

#### Categories of Transfers

**Please check the Category that pertains to your request for Transfer.**

\_\_\_\_\_ Category A: Emergency transfers. These transfers are necessary when conditions pose an immediate threat to the life, health, or safety of a family or one of its members. Such situations may involve defects of the unit or the building in which it is located, the health condition of a family member, a hate crime, the safety of witnesses to a crime, or a law enforcement matter particular to the neighborhood.

\_\_\_\_\_ Category B: Immediate administrative transfers. These transfers are necessary in order to permit family needing accessible features to move to a unit with such a feature or to enable modernization, revitalization, disposition or demolition work to proceed.

\_\_\_\_\_ Category C: Regular administrative transfers. These transfers are made to offer incentives to families willing to help meet certain Eastman Housing Authority occupancy goals, to correct occupancy standards where the unit size is inappropriate for the size and composition of the family, to allow for non-emergency but medically advisable transfers, and other transfers approved by the Eastman Housing Authority when a transfer is the only or best way of solving a serious problem.

I, \_\_\_\_\_, am a tenant currently living at \_\_\_\_\_  
(Print name) (Address)

Apartment # \_\_\_\_\_ Phone/Cell # \_\_\_\_\_ I hereby request a transfer due to (please give a complete explanation)

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#### Documentation

When the transfer is at the request of the family, the family may be required to provide third party verification of the need for the transfer.



#### Incentive transfers

Transfer requests will be encouraged and approved for families who live in a development where their income category (below or above 30% of area median) predominates and wish to move to a development where their income category does not predominate.

#### Processing Transfers

Transfers on the waiting list will be sorted by the above categories and within each category by date and time.

Transfers in category A and B will be housed ahead of any other families, including those on the applicant waiting list. Transfers in category A will be housed ahead of transfers in category B.

Transfers in category C will be housed along with applicants for admission. The ratio of transfers to admissions will be posted each year for each development after the annual reexamination. This ratio will be calculated by the Executive Director or his/her designee taking into account the vacancy rate and the number of pending transfers for each neighborhood.

Upon offer and acceptance of a unit, the family will execute all lease up documents and pay any rent and/or security deposit within two (2) business days of being informed the unit is ready to rent. The family will be allowed seven (7) calendar days to complete a transfer. The family will be responsible for paying rent at the old unit as well as the new unit for any period of time they have possession of both. The prorated rent and other charges (key deposit and any additional security deposit owing) must be paid at the time of lease execution.

The following is the policy for the rejection of an offer to transfer:

- A. If the family rejects with good cause any unit offered, they will not lose their place on the transfer waiting list.
- B. If the transfer is being made at the request of the Eastman Housing Authority and the family rejects two offers without good cause, the Eastman Housing Authority will take action to terminate their tenancy. If the reason for the transfer is that the current unit is too small to meet the Eastman Housing Authority's optimum occupancy standards, the family may request in writing to stay in the unit without being transferred so long as their occupancy will not exceed two people per living/sleeping room.
- C. If the transfer is being made at the family's request and the rejected offer provides deconcentration incentives, the family will maintain their place on the transfer list and will not otherwise be penalized.
- D. If the transfer is being made at the family's request, the family may, without good cause and without penalty, turn down one offer that does not include deconcentration incentives. After turning down a second such offer without good cause, the family's name will be removed from the transfer list.

#### Cost of the family's move

The cost of the transfer generally will be borne by the family in the following circumstances:

- A. When the transfer is made at the request of the family or by others on behalf of the family (i.e., by the police);
- B. When the transfer is needed to move the family to an appropriately sized unit, either larger or smaller;
- C. When the transfer is necessitated because a family with disabilities needs the accessible unit into which the transferring family moved (The family without disabilities signed a statement to this effect prior to accepting the accessible unit); or
- D. When the transfer is needed because action or inaction by the family caused the unit to be unsafe or uninhabitable.

The cost of the transfer will be borne by the Eastman Housing Authority in the following circumstances:

- A. When the transfer is needed in order to carry out modernization, disposition or demolition activities; or
- B. When action or inaction by the Eastman Housing Authority has caused the unit to be unsafe or inhabitable.



The responsibility for moving costs in other circumstances will be determined on a case by case basis.

#### Tenants in good standing

When the transfer is at the request of the family, it will not be approved unless the family is in good standing with the Eastman Housing Authority. This means the family must be in compliance with their lease, current in all payments to the Housing Authority, and must pass a housekeeping inspection.

#### Transfer Requests

A tenant may request a transfer at any time by completing a transfer request form. In considering the request, the Eastman Housing Authority may request a meeting with the tenant to better understand the need for transfer and to explore possible alternatives. The Eastman Housing Authority will review the request in a timely manner and if a meeting is desired, it shall contact the tenant within ten (10) business days of receipt of the request to schedule a meeting.

The Eastman Housing Authority will grant or deny the transfer request in writing within ten (10) business days of receiving the request or holding the meeting, whichever is later.

If the transfer is approved, the family's name will be added to the transfer waiting list.

If the transfer is denied, the denial letter will advise the family of their right to utilize the grievance procedure.

#### Right of the Eastman Housing Authority in transfer policy

The provisions listed above are to be used as a guide to ensure fair and impartial means of assigning units for transfers. It is not intended that this policy will create a property right or any other type of right for a tenant to transfer or refuse to transfer.

### **TRANSFERS OF RESIDENTS AND PLACEMENT OF APPLICANTS WITH DISABILITIES**

- I. Transfers of residents with disabilities and placement of applicants with disabilities requiring UFAS-accessible units will be centrally coordinated through the section 504 and ADA coordinator with the assistance of an EHA Housing Specialist;
- II. When a UFAS-accessible unit becomes available, the unit will first be offered to a current occupant with disabilities who requires the accessibility features of the vacant, accessible unit and is occupying a unit not having those features;
- III. If there is no current resident who requires the accessibility features of the vacant, accessible unit, then the vacant accessible unit will be offered to an eligible, qualified applicant with disabilities on the waiting list who can benefit from the accessible features of the available, accessible unit;
- IV. If there is not an eligible qualified resident or applicant with disabilities, needing the features of the vacant available unit, on the waiting list who wishes to reside in the available accessible unit, then it will be offered to an applicant on the waiting list who does not need the accessible features of the unit. See 24 C.F.R. § 8.27. However, the EHA will require the applicant to execute the dwelling lease, which requires the resident to relocate to a vacant non-accessible unit within thirty (30) days of notice by the EHA that there is an eligible applicant or existing resident with disabilities who requires the accessibility features of the unit. See 24 C.F.R. § 8.27.

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Tenant's Signature

Date



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**EHA OFFICE ONLY**

Received Transfer: \_\_\_\_\_  
Signature of EHA Staff \_\_\_\_\_ Date \_\_\_\_\_

Meeting with Tenant required: Yes (  ) No (  ) Meeting Date: \_\_\_\_\_

\_\_\_\_\_  
Executive Director Approval \_\_\_\_\_ Date \_\_\_\_\_

\_\_\_\_\_  
Executive Director Denial \_\_\_\_\_ Date \_\_\_\_\_

Date added to Transfer Waiting List: \_\_\_\_\_ H.S. Initials: \_\_\_\_\_

Note: Once Tenant has been added to Transfer Waiting List file this form in Resident File under tab Application for Occupancy and Move in Documents.

COMMENTS:



# VEHICLE REGISTRATION

Date: \_\_\_\_\_

Name of Resident: \_\_\_\_\_

Address: \_\_\_\_\_

Year: \_\_\_\_\_ Make: \_\_\_\_\_ Model: \_\_\_\_\_ Color: \_\_\_\_\_

Tag# \_\_\_\_\_ State: \_\_\_\_\_

VIN# \_\_\_\_\_

Driver's License# \_\_\_\_\_ Issue Date: \_\_\_\_\_ Expired Date: \_\_\_\_\_

**Please be advised if you have overnight guest it is your responsibility to come to the administrative office and get a visitor pass for your guest vehicle. All guest vehicles not reported to Eastman Housing Authority are subject to violation of the Vehicle and Parking Policy as well as ticketing per Eastman Police Department Safety Officer.**



## **HOUSING AUTHORITY OF THE CITY OF EASTMAN**

### **ONE STRIKE AND YOU'RE OUT ZERO TOLERANCE POLICY**

**Adopted Board Action February 10, 1997**

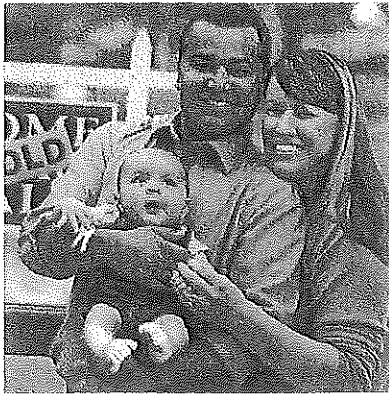
Notice of Termination of Tenancy and Eviction – Once the HA has determined that there is sufficient documented justification to proceed with termination of tenancy and eviction in cases involving (a) any criminal activity or other activity that threatens the health, safety, or right to peaceful enjoyment of the premises by other residents or employees of the HA, or (b) any drug-related criminal activity on or off the HA's premises, the HA shall promptly issue notification to the tenant specifying (1) that the tenant is in serious violation of the terms and conditions of the dwelling leases and are grounds for termination of tenancy; (2) the lease provisions that the tenant has violated; (3) that the HA is terminating tenancy as of a specified date (which may be from one day to seven days from the date of the notice, depending upon the seriousness of the violation); (4) that the termination action is not subject to the grievance procedure.

\*\* (Per law in the State of Georgia, Eastman Housing Authority will not give a copy of the criminal record to the family. They will however show a copy to the family. If the applicant family wants a copy of the criminal record, they will have to pursue the proper avenues to obtain it on their own.) [State of Georgia Law Code 130-2-1043-F]

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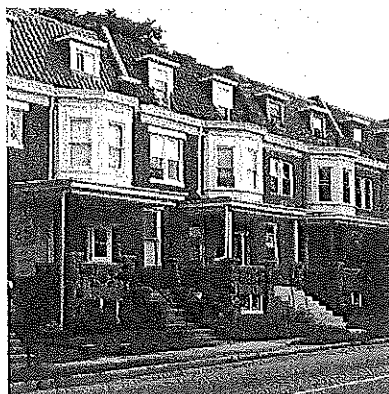
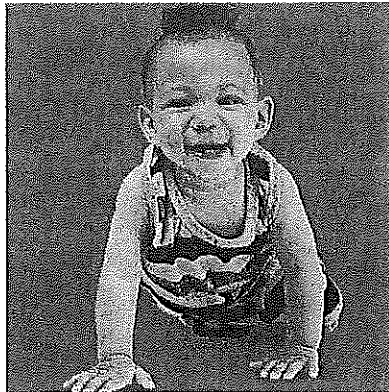




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# Protect Your Family From Lead in Your Home

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United States  
Environmental  
Protection Agency



United States  
Consumer Product  
Safety Commission



United States  
Department of Housing  
and Urban Development

September 2013



## Simple Steps To Protect Your Family From Lead Hazards

If you think your home has high  
levels of lead:

- ◆ Get your young children tested for lead, even if they seem healthy.
- ◆ Wash children's hands, bottles, pacifiers, and toys often.
- ◆ Make sure children eat healthy, low-fat foods.
- ◆ Get your home checked for lead hazards.
- ◆ Regularly clean floors, window sills, and other surfaces.
- ◆ Wipe soil off shoes before entering house.
- ◆ Talk to your landlord about fixing surfaces with peeling or chipping paint.
- ◆ Take precautions to avoid exposure to lead dust when remodeling or renovating (call 1-800-424-LEAD for guidelines).
- ◆ Don't use a belt-sander, propane torch, high temperature heat gun, scraper, or sandpaper on painted surfaces that may contain lead.
- ◆ Don't try to remove lead-based paint yourself.

# IMPORTANT!

## Lead from Paint, Dust, and Soil Can Be Dangerous If Not Managed Properly

- FACT:** Lead exposure can harm young children and babies even before they are born.
- FACT:** Even children who seem healthy can have high levels of lead in their bodies.
- FACT:** People can get lead in their bodies by breathing or swallowing lead dust, or by eating soil or paint chips containing lead.
- FACT:** People have many options for reducing lead hazards. In most cases, lead-based paint that is in good condition is not a hazard.
- FACT:** Removing lead-based paint improperly can increase the danger to your family.

If you think your home might have lead hazards, read this pamphlet to learn some simple steps to protect your family.



# Lead Gets in the Body in Many Ways

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**Childhood lead poisoning remains a major environmental health problem in the U.S.**

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**Even children who appear healthy can have dangerous levels of lead in their bodies.**

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**People can get lead in their body if they:**

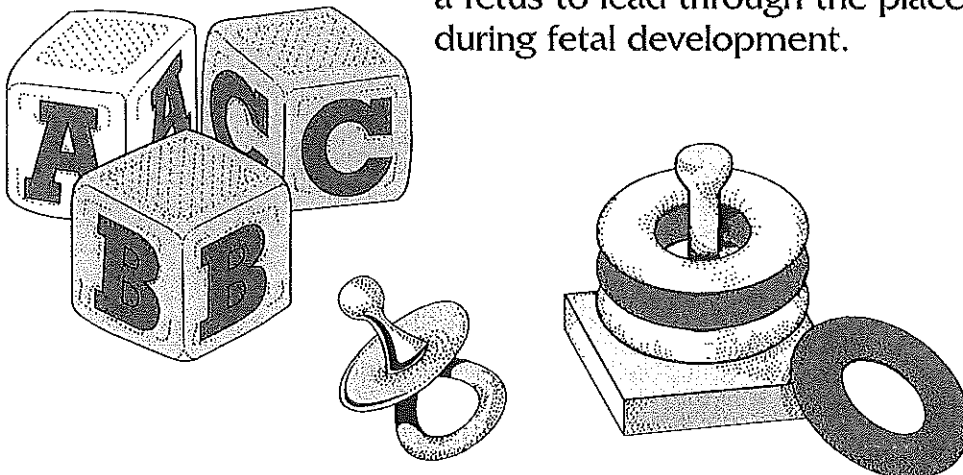
- ◆ Breathe in lead dust (especially during renovations that disturb painted surfaces).
- ◆ Put their hands or other objects covered with lead dust in their mouths.
- ◆ Eat paint chips or soil that contains lead.

**Lead is even more dangerous to children under the age of 6:**

- ◆ At this age children's brains and nervous systems are more sensitive to the damaging effects of lead.
- ◆ Children's growing bodies absorb more lead.
- ◆ Babies and young children often put their hands and other objects in their mouths. These objects can have lead dust on them.

**Lead is also dangerous to women of childbearing age:**

- ◆ Women with a high lead level in their system prior to pregnancy would expose a fetus to lead through the placenta during fetal development.



## **Consumer Product Safety Commission (CPSC)**

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The CPSC protects the public against unreasonable risk of injury from consumer products through education, safety standards activities, and enforcement. Contact CPSC for further information regarding consumer product safety and regulations.

**CPSC**  
4330 East West Highway  
Bethesda, MD 20814-4421  
1-800-638-2772  
cpsc.gov or saferproducts.gov

## **U. S. Department of Housing and Urban Development (HUD)**

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HUD's mission is to create strong, sustainable, inclusive communities and quality affordable homes for all. Contact HUD's Office of Healthy Homes and Lead Hazard Control for further information regarding the Lead Safe Housing Rule, which protects families in pre-1978 assisted housing, and for the lead hazard control and research grant programs.

**HUD**  
451 Seventh Street, SW, Room 8236  
Washington, DC 20410-3000  
(202) 402-7698  
hud.gov/offices/lead/

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U. S. EPA Washington DC 20460  
U. S. CPSC Bethesda MD 20814  
U. S. HUD Washington DC 20410

EPA-747-K-12-001  
September 2013

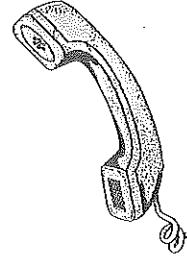


## For More Information

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### The National Lead Information Center

Call **1-800-424-LEAD (424-5323)** to learn how to protect children from lead poisoning and for other information on lead hazards. To access lead information via the web, visit [www.epa.gov/lead](http://www.epa.gov/lead) and [www.hud.gov/offices/lead/](http://www.hud.gov/offices/lead/).

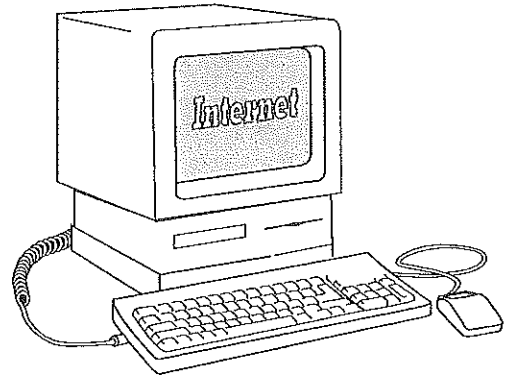


### EPA's Safe Drinking Water Hotline

Call **1-800-426-4791** for information about lead in drinking water.

### Consumer Product Safety Commission (CPSC) Hotline

To request information on lead in consumer products, or to report an unsafe consumer product or a product-related injury call **1-800-638-2772**, or visit CPSC's Web site at: [www.cpsc.gov](http://www.cpsc.gov).



### Health and Environmental Agencies

Some cities, states, and tribes have their own rules for lead-based paint activities. Check with your local agency to see which laws apply to you. Most agencies can also provide information on finding a lead abatement firm in your area, and on possible sources of financial aid for reducing lead hazards. Receive up-to-date address and phone information for your local contacts on the Internet at [www.epa.gov/lead](http://www.epa.gov/lead) or contact the National Lead Information Center at **1-800-424-LEAD**.

For the hearing impaired, call the Federal Information Relay Service at **1-800-877-8339** to access any of the phone numbers in this brochure.



# EPA Regional Offices

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Your Regional EPA Office can provide further information regarding regulations and lead protection programs.

## EPA Regional Offices

**Region 1** (Connecticut, Massachusetts, Maine, New Hampshire, Rhode Island, Vermont)

Regional Lead Contact  
U.S. EPA Region 1  
Suite 1100 (CPT)  
One Congress Street  
Boston, MA 02114-2023  
1 (888) 372-7341

**Region 2** (New Jersey, New York, Puerto Rico, Virgin Islands)

Regional Lead Contact  
U.S. EPA Region 2  
2890 Woodbridge Avenue  
Building 209, Mail Stop 225  
Edison, NJ 08837-3679  
(732) 321-6671

**Region 3** (Delaware, Maryland, Pennsylvania, Virginia, Washington DC, West Virginia)

Regional Lead Contact  
U.S. EPA Region 3 (3WC33)  
1650 Arch Street  
Philadelphia, PA 19103  
(215) 814-5000

**Region 4** (Alabama, Florida, Georgia, Kentucky, Mississippi, North Carolina, South Carolina, Tennessee)

Regional Lead Contact  
U.S. EPA Region 4  
61 Forsyth Street, SW  
Atlanta, GA 30303  
(404) 562-8998

**Region 5** (Illinois, Indiana, Michigan, Minnesota, Ohio, Wisconsin)

Regional Lead Contact  
U.S. EPA Region 5 (DT-8J)  
77 West Jackson Boulevard  
Chicago, IL 60604-3666  
(312) 886-6003

**Region 6** (Arkansas, Louisiana, New Mexico, Oklahoma, Texas)

Regional Lead Contact  
U.S. EPA Region 6  
1445 Ross Avenue, 12th Floor  
Dallas, TX 75202-2733  
(214) 665-7577

**Region 7** (Iowa, Kansas, Missouri, Nebraska)

Regional Lead Contact  
U.S. EPA Region 7  
(ARTD-RALI)  
901 N. 5th Street  
Kansas City, KS 66101  
(913) 551-7020

**Region 8** (Colorado, Montana, North Dakota, South Dakota, Utah, Wyoming)

Regional Lead Contact  
U.S. EPA Region 8  
999 18th Street, Suite 500  
Denver, CO 80202-2466  
(303) 312-6021

**Region 9** (Arizona, California, Hawaii, Nevada)

Regional Lead Contact  
U.S. Region 9  
75 Hawthorne Street  
San Francisco, CA 94105  
(415) 947-4164

**Region 10** (Alaska, Idaho, Oregon, Washington)

Regional Lead Contact  
U.S. EPA Region 10  
Toxics Section WCM-128  
1200 Sixth Avenue  
Seattle, WA 98101-1128  
(206) 553-1985



## CPSC Regional Offices

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Your Regional CPSC Office can provide further information regarding regulations and consumer product safety.

**Eastern Regional Center**  
Consumer Product Safety Commission  
201 Varick Street, Room 903  
New York, NY 10014  
(212) 620-4120

**Western Regional Center**  
Consumer Product Safety Commission  
1301 Clay Street, Suite 610-N  
Oakland, CA 94612  
(510) 637-4050

**Central Regional Center**  
Consumer Product Safety Commission  
230 South Dearborn Street, Room 2944  
Chicago, IL 60604  
(312) 353-8260

## HUD Lead Office

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Please contact HUD's Office of Healthy Homes and Lead Hazard Control for information on lead regulations, outreach efforts, and lead hazard control and research grant programs.

**U.S. Department of Housing and Urban Development**  
Office of Healthy Homes and Lead Hazard Control  
451 Seventh Street, SW, P-3206  
Washington, DC 20410  
(202) 755-1785

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U.S. EPA Washington DC 20460  
U.S. CPSC Washington DC 20207  
U.S. HUD Washington DC 20410

EPA747-K-99-001  
June 2003







# EASTMAN HOUSING AUTHORITY ACTIVE BARR LIST



Listed below are the persons who are barred or banned from the Eastman Housing Authority properties.

If any of these people come to visit or live with you two (2) things can happen:

1. This person will be arrested for criminal trespassing.
2. You and your family will be evicted from your home. (Lease; Section 19.w.).

Remember it is Your Responsibility to **KNOW YOUR LEASE**

- |                                 |                               |                                 |
|---------------------------------|-------------------------------|---------------------------------|
| 1. Abbott, Regina Marie         | 40. Carswell, Christopher     | 80. Freeney, Whitney            |
| 2. Adams, Hakeem                | 41. Champion, Nancy           | 81. Fullwood, Lenmiele Morresse |
| 3. Attaway, Seaborn Jackson     | 42. Chancey, Bianca           | 82. Gaskin, Jonathan N.         |
| 4. Austin, Dontavius            | 43. Chaney, Lacsresia Ann     | 83. George, Jr., David D        |
| 5. Robert Batten                | 44. Clemons, Cory             | 84. George, Zachary             |
| 6. Battle, Arlene               | 45. Cockrell, Brandon         | 85. Gibson, Cheryl              |
| 7. Batts, Tonya                 | 46. Cole, David Wayne         | 86. Gibson, Jamie               |
| 8. Baxter, Jonathan             | 47. Collins, Joseph Franklin  | 87. Giddens, Brent              |
| 9. Belford, Nathaniel Lamar     | 48. Crawford, Amber           | 88. Goolsby, Christopher        |
| 10. Bennet, Jr., Willie (Bud)   | 49. Crawford, Joseph          | 89. Gordon, Justin Lee          |
| 11. Bishop, Blondelle           | 50. Crim, Brenda              | 90. Nicky Griffin Jr.           |
| 12. Blackshear, Tyqueshia Lasha | 51. Cummings, Lakwana         | 91. Griggs, Rodney              |
| 13. Blade, Brittany             | 52. Dassie, Donald            | 92. Grinnery, Kelsi Ann         |
| 14. Blash, Derrick              | 53. Davis, Delbert            | 93. Guyton, Jr., Jonathan N     |
| 15. Blash, Tyrese               | 54. Deeds, Ramello Deuntae    | 94. Hall, Monica                |
| 16. Bolden, Lasean Laspencer    | 55. Deeds, Trustis Darun      | 95. Hamilton, Conchita Mashae   |
| 17. Bolton, Jr., Tony Curtis    | 56. Dellamar, Monti Maurice   | 96. Haney, Matthew              |
| 18. Bolton, Sr., Tony Curtis    | 57. Dennis, Carli Taylor      | 97. Henley, Paul                |
| 19. Branch, Zachary             | 58. Deshotel, Kenneth         | 98. Hickman, Anthony            |
| 20. Bray Daveion Deonti         | 59. Dixon, Matthew            | 99. Hickman, Bobbie Renae       |
| 21. Bray, Shawn Donell          | 60. Dixon, Rodney             | 100. Hightower, Latasha         |
| 22. Bray, Solomon               | 61. Dolce, Harry              | 101. Holloman, Martin           |
| 23. Brown, Maurice              | 62. Drake, Carmen             | 102. Howell, Anthony Thomas     |
| 24. Brown, Willie Lee Jr.       | 63. Dunfee, Erick             | 103. Howell, Joshua             |
| 25. Burch, Jamarques Antwan     | 64. Dupree, Dereck Allen      | 104. Huff, Justin               |
| 26. Burch, Wayne                | 65. Durham, Robert            | 105. Hughes, Jermaine Ronnell   |
| 27. Burke, Angela               | 66. Durham, Sharon (Charon)   | 106. Hunter, Tori               |
| 28. Burns, Cedric               | 67. Duron, Michael A.         | 107. Jackson, Antonio           |
| 29. Burns, Joshua               | 68. Eady, Andy                | 108. Jackson, Brandon           |
| 30. Burns, Shanequa Shakira     | 69. Edwards, Curtis           | 109. Jackson, Eddie             |
| 31. Butler, Timonthy Bernard    | 70. Facison, Aquanda          | 110. Jackson, Joseph            |
| 32. Byram, Christopher Kyle     | 71. Facison, Cathedral Markel | 111. Jackson, Katrina           |
| 33. Caine, Norman               | 72. Facison, Tyrone (Tyronza) | 112. Jackson, Keith "Bubba"     |
| 34. Caldwell, Airiel Storm      | 73. Faulkenberry, Rhonda Kay  | 113. Jackson, Lakeisha Tara     |
| 35. Caldwell, Patrick           | 74. Floyd, Jimmy              | 114. Ke-Yonna Alyis James       |
| 36. Campbell, Billy             | 75. Fordham, Jeanette Payne   | 115. Jenkins, Celica Constance  |
| 37. Carr, Leon Otis             | 76. Fordham, Wendy            | 116. Johnson, Dwayne Terrell    |
| 38. Carr, Michelle              | 77. Fortner, Freedom Dawn     | 117. Johnson, Nebreya           |
| 39. Carr, Robert Earl           | 78. Fountain, Angel           |                                 |
|                                 | 79. Fountain, Larry           |                                 |



118. Joiner, Jeff  
 119. Joiner, Roxanna  
 120. Jordan, Ramone Mushaw  
 121. Kelley, Dwayne  
 122. King, Anthony  
 123. King, Cedric Darnell  
 124. King, Brandon Jamal  
 125. King, Kenisha Stubbs  
 126. King, Norman  
 127. Lampkin, Brandon  
 128. Lawson, Patrick  
 129. Travarious Deyoun Lawson  
 130. Level, Deshuantie  
 131. Level, Jr., Willie Roy  
 132. Lockett, Pamela  
 133. Lockett, Sidney  
 134. Marks, Myeshia Yuderria  
 135. Marshall, Jason Whitney  
 136. Matthews, Trey  
 137. McCullough, Devon Marie  
 138. McDaniel, Tasha  
 139. McRae, Precious  
 140. Melvin, Darien  
 141. Melvin, Deonco  
 142. Meminger, Christopher  
 Marquan  
 143. Miller, Erica  
 144. Miller, Leroy  
 145. Mitchell, Grady  
 146. Mulberry, Alonza  
 147. Mulberry, Antonia  
 148. Mullins, Justin  
 149. Nelson, Emily  
 150. Newton, Jr., Dairel  
 Lushawn  
 151. Northcutt, Nicholas  
 Lachazes  
 152. Odum, Bradley  
 153. John A. Patillo  
 154. Patterson, Timothy P  
 155. Payton, Bryan Langdon  
 156. Pennamon, Monkeesia  
 Lanette  
 157. Pickett, Jonathan Joel  
 158. Powell, Woodrow  
 159. Powers, Huberta Shanard  
 160. Price, Cathleen  
 161. Randolph, James Robert  
 162. Richarson, Michael Leon  
 163. Riley, Sylvester  
 164. Roberson, Alvinskie  
 165. Roberson, Jaheem  
 166. Roberson, Shawn Wilowell  
 167. Robinson, Elijah Ali  
 168. Rogers, Kaitlynn Dawn  
 169. Rollins, Rocky Roger Lee  
 170. Rooks, Mike  
 171. Scarbro, Alan James  
 172. Shearin, Delfenia Lawson  
 173. Sheffield, David  
 174. Sheriff, Harold  
 175. Shipman, Sterlig  
 176. Sisk, Ashley  
 177. Smith, Jan Melissa  
 178. Smith, Michael Jamal  
 179. Snellgrove, Jonathan  
 180. Sobotta, Timothy Samuel  
 181. Speight, Carl  
 182. Steward, Everett Roderick  
 183. Strutchens, Henry Arthur  
 Collis  
 184. Sutton, Raymond  
 185. Swint, Kevin  
 186. Thomas, Richard Joseph  
 187. Thompson, Lavon  
 188. Tillman, Tavoris  
 189. Todd, Donald Dorian  
 190. Reginald Roshoan Tucker  
 Jr.  
 191. Walker, Eric  
 192. Walker, Ernest  
 193. Walker, Henry  
 194. Walker, Roger  
 195. Walker, Sammy  
 196. Webb, Belinda  
 197. Wells, Christopher Isaiah  
 198. Wells, Roderick LaDarius  
 199. Westbrook, Frank James  
 200. Westbrook, Stephen W.  
 201. Whipple, Devon Jacquei  
 202. Whipple, Raheem Tyrice  
 203. White, David Ray  
 204. White, Juwuan  
 205. Whitehead, Keith James  
 206. Wilcox, Kelvin  
 207. Wilcox, Marty  
 208. Williams, Bruce Eric  
 209. Williams, Clare Ann  
 210. Williams, Maria  
 211. Wilson, Desmond Shawn  
 212. Winans, Heather Earlene  
 213. Wood, Rita  
 214. Woodall, Benjamin Ricard  
 215. Young, James Quincey



## GLOSSARY

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**50058 Form:** The HUD form that housing authorities are required to complete for each assisted household in public housing to record information used in the certification and re-certification process and, at the option of the housing authority, for interim reexaminations.

**1937 Housing Act:** The United States Housing Act of 1937 (42 U.S.C. 1437 et seq.) (24 CFR 5.100)

**Adjusted Annual Income:** The amount of household income, after deductions for specified allowances, on which tenant rent is based. (24 CFR 5.611)

**Adult:** A household member who is 18 years or older or who is the head of the household, or spouse, or co-head. An emancipated minor is also considered an adult. In the anti-drug portions of this policy, it also refers to a minor who has been convicted of a crime as an adult under any Federal, State or tribal law.

**Allowances:** Amounts deducted from the household's annual income in determining adjusted annual income (the income amount used in the rent calculation). Allowances are given for elderly families, dependents, medical expenses for elderly and disabled families, disability expenses, and childcare expenses for children under 13 years of age. Other allowance can be given at the discretion of the housing authority.

**Annual Contributions Contract (ACC):** The written contract between HUD and a housing authority under which HUD agrees to provide funding for a program under the 1937 Act, and the housing authority agrees to comply with HUD requirements for the program. (24 CFR 5.403)

**Annual Income:** All amounts, monetary or not, that:

- A. Go to (or on behalf of) the family head or spouse (even if temporarily absent) or to any other family member; or
- B. Are anticipated to be received from a source outside the family during the 12-month period following admission or annual reexamination effective date; and
- C. Are not specifically excluded from annual income.

Annual income also includes amounts derived (during the 12-month period) from assets to which any member of the family has access. (1937 Housing Act; 24 CFR 5.609)

**Applicant (applicant family):** A person or family that has applied for admission to a program but is not yet a participant in the program. (24 CFR 5.403)

**Assets:** The value of equity in savings, checking, IRA and Keogh accounts, real property, stocks, bonds, and other forms of capital investment. The value of necessary items of personal property such as furniture and automobiles are not counted as assets. (Also see "net family assets.")

**Asset Income:** Income received from assets held by family members. If assets total more than \$5,000, income from the assets is "imputed" and the greater of actual asset income and imputed asset income is counted in annual income. (See "imputed asset income" below.)

**Assistance applicant:** A family or individual that seeks admission to the public housing program.

**Bifurcate:** with respect to a public housing or Section 8 lease, it means to divide a lease as a matter of law such that certain tenants can be evicted or removed while the remaining family members' lease and occupancy rights are allowed to remain intact.

**Business Days:** Days the housing authority is open for business.

**Certification:** The examination of a household's income, expenses, and family composition to determine the family's eligibility for program participation and to calculate the family's share of rent.

**Child:** For purposes of citizenship regulations, a member of the family other than the family head or spouse who is under 18 years of age. (24 CFR 5.504(b))



**Childcare Expenses:** Amounts anticipated to be paid by the family for the care of children under 13 years of age during the period for which annual income is computed, but only where such care is necessary to enable a family member to actively seek employment, be gainfully employed, or to further his or her education and only to the extent such amounts are not reimbursed. The amount deducted shall reflect reasonable charges for childcare. In the case of childcare necessary to permit employment, the amount deducted shall not exceed the amount of employment income that is included in annual income. (24 CFR 5.603(d))

**Citizen:** A citizen or national of the United States. (24 CFR 5.504(b))

**Community Service:** The performance of voluntary work or duties that are a public benefit and that serve to improve the quality of life, enhance resident self-sufficiency, or increase resident self-responsibility in the community. Community service is not employment and may not include political activities.

**Consent Form:** Any consent form approved by HUD to be signed by assistance applicants and participants for the purpose of obtaining income information from employers and SWICAs, return information from the Social Security Administration, and return information for unearned income from the Internal Revenue Service. The consent forms may authorize the collection of other information from assistance applicants or participant to determine eligibility or level of benefits. (24 CFR 5.214)

**Covered Families:** Families who receive welfare assistance or other public assistance benefits ("welfare benefits") from a State or other public agency ("welfare agency") under a program for which Federal, State, or local law requires that a member of the family must participate in an economic self-sufficiency program as a condition for such assistance.

**Covered Person:** For purposes of the anti-drug provisions of this policy, a covered person is a tenant, any member of the tenant's household, a guest or another person under the tenant's control.

**Currently engaging in:** With respect to behavior such as illegal use of a drug, other drug-related criminal activity, or other criminal activity, currently engaging in means that the individual has engaged in the behavior recently enough to justify a reasonable belief that the individual's behavior is current.

**Dating Violence:** Violence committed by a person: (A) who is or has been in a social relationship of a romantic or intimate nature with the victim; and (B) where the existence of such a relationship shall be determined based on a consideration of the following factors: (i) the length of the relationship; (ii) the type of relationship; and (iii) the frequency of interaction between the persons involved in the relationship.

**Decent, Safe, and Sanitary:** Housing is decent, safe, and sanitary if it satisfies the applicable housing quality standards.

**Department:** The Department of Housing and Urban Development. (24 CFR 5.100)

**Dependent:** A member of the family (except foster children and foster adults), other than the family head or spouse, who is under 18 years of age or is a person with a disability or is a full-time student. (24 CFR 5.603(d))

**Dependent Allowance:** An amount, equal to \$480 multiplied by the number of dependents, that is deducted from the household's annual income in determining adjusted annual income.

**Disability Assistance Expenses:** Reasonable expenses that are anticipated, during the period for which annual income is computed, for attendant care and auxiliary apparatus for a disabled family member and that are necessary to enable a family member (including the disabled member) to be employed, provided that the expenses are neither paid to a member of the family nor reimbursed by an outside source. (24 CFR 5.603(d))

**Disability Assistance Expense Allowance:** In determining adjusted annual income, the amount of disability assistance expenses deducted from annual income for families with a disabled household member.

**Disabled Family:** A family whose head, spouse, or sole member is a person with disabilities; two or more persons with disabilities living together; or one or more persons with disabilities living with one or more live-in aides. (24 CFR 5.403(b)) (Also see "person with disabilities.")

**Disabled Person:** See "person with disabilities."

**Displaced Family:** A family in which each member, or whose sole member, is a person displaced by governmental action (such as urban renewal), or a person whose dwelling has been extensively damaged or destroyed as a result of a disaster declared or otherwise formally recognized pursuant to Federal disaster relief laws. (24 CFR 5.403(b))



**Displaced Person:** A person displaced by governmental action or a person whose dwelling has been extensively damaged or destroyed as a result of a disaster declared or otherwise formally recognized pursuant to Federal disaster relief laws. [1937 Act]

**Domestic Violence:** Includes felony or misdemeanor crimes of violence committed by a current or former spouse of the victim, by a person with whom the victim share a child in common, by a person who is cohabitated with or has cohabited with the victim as a spouse, by a person similarly situated to a spouse of the victim under the domestic or family violence laws of the jurisdiction receiving grant monies, or by any other person against an adult or youth victim who is protected from that persons acts under the domestic or family violence laws of the jurisdiction.

**Drug:** means a controlled substance as defined in section 102 of the Controlled Substances Act (21 U.S.C. 802).

**Drug-Related Criminal Activity:** The illegal manufacture, sale, distribution, or use of a drug, or the possession of a drug with intent to manufacture, sell, distribute or use the drug.

**Economic self-sufficiency program:** Any program designed to encourage, assist, train or facilitate the economic independence of HUD-assisted families or to provide work for such families. These programs include programs for job training, employment counseling, work placement, basic skills training, education, English proficiency, workfare, financial or household management, apprenticeship, and any program necessary to ready a participant for work (including a substance abuse or mental health treatment program), or other work activities.

**Elderly Family:** A family whose head, spouse, or sole member is a person who is at least 62 years of age; two or more persons who are at least 62 years of age living together; or one or more persons who are at least 62 years of age living with one or more live-in aides. (24 CFR 5.403)

**Elderly/Disabled Family Allowance:** For elderly families, an allowance of \$400 is deducted from the household's annual income in determining adjusted annual income.

**Elderly Person:** A person who is at least 62 years of age. (1937 Housing Act)

**Employment:** Employment for admission preference purposes is defined as:

Employment must have been held continuously for a minimum of nine (9) months within the twelve (12) month period prior to the time the preference is claimed and if not current the employment was terminated solely due to an involuntary layoff of the employee by the employer.

The amount of earned income shall not be a factor in granting this preference.

The employment part of this preference is also extended equally to (1) a family if the head, spouse, or sole member is 62 years of age or older or who is receiving social security or Supplemental Security Income disability benefits or any other payments based on the individual's inability to work and, (2) any family whose head, spouse, co-head or unrelated partner of head of household is currently a full time student or enrolled in an employment training program.

**Extremely low-income families:** Those families whose incomes do not exceed 30% of the median income for the area or the federal poverty level, as determined by HUD with adjustments for smaller and larger families, except that HUD may establish income limits higher or lower than 30% of the median income for the area if HUD finds that such variations are necessary because of unusually high or low family incomes.

**Fair Housing Act:** Title VIII of the Civil Rights Act of 1968, as amended by the Fair Housing Amendments Act of 1988 (42 U.S.C. 3601 et seq.). (24 CFR 5.100)

**Family** includes but is not limited to:

- A. A family with or without children;
- B. An elderly family;
- C. A near-elderly family;
- D. A disabled family;
- E. A displaced family;
- F. The remaining member of a tenant family; and
- G. A single person who is not an elderly or displaced person, a person with disabilities, or the remaining member of a tenant family. (24 CFR 5.403)



**Family Members:** All members of the household other than live-in aides, foster children, and foster adults. All family members permanently reside in the unit, though they may be temporarily absent. All family members are listed on the lease.

**Flat Rent:** A rent amount the family may choose to pay in lieu of having their rent determined under the income method. The flat rent is established by the housing authority set at the lesser of the market value for the unit or the cost to operate the unit. Families selecting the flat rent option have their income evaluated once every three years, rather than annually.

**Full-Time Student:** A person who is attending school or vocational training on a full-time basis as defined by the institution.

**Guest:** Means a person temporarily staying in the unit with the consent of a tenant or other member of the household who has express or implied authority to so consent on behalf of the tenant.

**Head of Household (HOH):** The adult member of the family who is the head of the household for purposes of determining income eligibility and rent. (24 CFR 5.504(b))

**Household Members:** All members of the household including members of the family, live-in aides, foster children, and foster adults. All household members are listed on the lease, and no one other than household members are listed on the lease.

**Housing Assistance Plan:** A housing plan that is submitted by a unit of general local government and approved by HUD as being acceptable under the standards of 24 CFR 570.

**Immediate Family Member:** a spouse, parent, brother or sister, or child of the person, or an individual to whom that person stands in loco parentis (in place of a parent); or any other person living in the household of that person and related to that person by blood or marriage.

**Imputed Income:** For households with net family assets of more than \$5,000, the amount calculated by multiplying net family assets by a HUD-specified percentage. If imputed income is more than actual income from assets, the imputed amount is used as income from assets in determining annual income.

**Imputed welfare income:** The amount of annual income not actually received by a family, as a result of a welfare benefit reduction for welfare fraud or the failure to comply with economic self-sufficiency requirements that is nonetheless included in the family's annual income for purposes of determining rent.

**In-Kind Payments:** Contributions other than cash made to the family or to a family member in exchange for services provided or for the general support of the family (e.g., groceries provided on a weekly basis, babysitting provided on a regular basis).

**Income Method:** A means of calculating a family's rent based on the greater of 10% of their monthly income, 30% of their adjusted monthly income, the welfare rent, or the minimum rent. Under the income method, rents may be capped by a ceiling rent. Under this method, the family's income is evaluated at least annually.

**Interim (examination):** A reexamination of a family income, expenses, and household composition conducted between the regular annual recertification's when a change in a household's circumstances warrants such a reexamination.

**Law enforcement agency:** The National Crime Information Center (NCIC), police departments and other law enforcement agencies that hold criminal conviction records.

**Live-In Aide:** A person who resides with one or more elderly persons, near-elderly persons, or persons with disabilities and who:

- A. Is determined to be essential to the care and well-being of the persons;
- B. Is not obligated for the support of the persons; and
- C. Would not be living in the unit except to provide the necessary supportive services. (24 CFR 5.403(b))

A live-in aide is not a party to the lease.

**Low-Income Families:** Those families whose incomes do not exceed 80% of the median income for the area, as determined by HUD with adjustments for smaller and larger families, except that HUD may establish income ceilings



higher or lower than 80% of the median for the area on the basis of HUD's findings that such variations are necessary because of unusually high or low family incomes.

**Medical Expenses:** Medical expenses (of all family members of an elderly or disabled family), including medical insurance premiums, that are anticipated during the period for which annual income is computed and that are not covered by insurance. (24 CFR 5.603(d)). These expenses include, but are not limited to, prescription and non-prescription drugs, costs for doctors, dentists, therapists, medical facilities, care for a service animals, transportation for medical purposes.

**Mixed Family:** A family whose members include those with citizenship or eligible immigration status and those without citizenship or eligible immigration status. (24 CFR 5.504(b))

**Mixed population development:** A public housing development, or portion of a development, that was reserved for elderly and disabled families at its inception (and has retained that character). If the development was not so reserved at its inception, the PHA has obtained HUD approval to give preference in tenant selection for all units in the development (or portion of development) to elderly families and disabled families. These developments were formerly known as elderly projects.

**Monthly Adjusted Income:** One twelfth of adjusted income. (24 CFR 5.603(d))

**Monthly Income:** One twelfth of annual income. (24 CFR 5.603(d))

**National:** A person who owes permanent allegiance to the United States, for example, as a result of birth in a United States territory or possession. (24 CFR 5.504(b))

**Near-Elderly Family:** A family whose head, spouse, or sole member is a person who is at least 50 years of age but below the age of 62; two or more persons, who are at least 50 years of age but below the age of 62, living together; or one or more persons who are at least 50 years of age but below the age of 62 living with one or more live-in aides. (24 CFR 5.403(b))

**Net Family Assets:**

- A. Net cash value after deducting reasonable costs that would be incurred in disposing of real property, savings, stocks, bonds, and other forms of capital investment, excluding interests in Indian trust land and excluding equity accounts in HUD homeownership programs. The value of necessary items of personal property such as furniture and automobiles shall be excluded.
- B. In cases where a trust fund has been established and the trust is not revocable by, or under the control of, any member of the family or household, the value of the trust fund will not be considered an asset so long as the fund continues to be held in trust. Any income distributed from the trust fund shall be counted when determining annual income.
- C. In determining net family assets, housing authorities or owners, as applicable, shall include the value of any business or family assets disposed of by an applicant or tenant for less than fair market value (including a disposition in trust, but not in a foreclosure or bankruptcy sale) during the two years preceding the date of application for the program or reexamination, as applicable, in excess of the consideration received therefore. In the case of a disposition as part of a separation or divorce settlement, the disposition will not be considered to be for less than fair market value if the applicant or tenant receives important consideration not measurable in dollar terms. (24 CFR 5.603(d))

**Non-Citizen:** A person who is neither a citizen nor national of the United States. (24 CFR 5.504(b))

**Occupancy Standards:** The standards that a housing authority establishes for determining the appropriate number of bedrooms needed to house families of different sizes or composition.

**Other person under the tenant's control:** For the purposes of the definition of covered person it means the person, although not staying as a guest (as defined in this section) in the unit, is, or was at the time of the activity in question, on the premises (as premises is defined in this section) because of an invitation from the tenant or other member of the household who has express or implied authority to so consent on behalf of the tenant. Absent evidence to the contrary, a person temporarily and infrequently on the premises solely for legitimate commercial purposes is not under the tenant's control.

**Participant:** A family or individual that is assisted by the public housing program.

**Person with Disabilities:** A person who:



- A. Has a disability as defined in 42 U.S.C. 423
- B. Is determined, pursuant to HUD regulations, to have a physical, mental, or emotional impairment that:
  - 1. Is expected to be of long-continued and indefinite duration;
  - 2. Substantially impedes his or her ability to live independently; and
  - 3. Is of such a nature that the ability to live independently could be improved by more suitable housing conditions.
- C. Has a developmental disability as defined in 42 U.S.C. 6001.

This definition does not exclude persons who have the disease of acquired immunodeficiency syndrome or any conditions arising from the etiologic agent for acquired immunodeficiency syndrome.

For purposes of qualifying for low-income housing, it does not include a person whose disability is based solely on any drug or alcohol dependence.

**Premises:** for purposes of the anti-drug provisions of this policy it means the building or complex or development in which the public or assisted housing dwelling unit is located, including common areas and grounds.

**Previously unemployed:** This includes a person who has earned, in the 12 months previous to employment, no more than would be received for 10 hours of work per week for 50 weeks at the established minimum wage.

**Proration of Assistance:** The reduction in a family's housing assistance payment to reflect the proportion of family members in a mixed family who are eligible for assistance. (24 CFR 5.520)

**Public Housing:** Housing assisted under the 1937 Act, other than under Section 8. Public housing includes dwelling units in a mixed-finance project that are assisted by a PHA with capital or operating funds.

**Public Housing Agency (PHA):** Any State, county, municipality, or other governmental entity or public body (or agency or instrumentality thereof) which is authorized to engage in or assist in the development or operation of low-income housing under the 1937 Housing Act. (24 CFR 5.100)

**Recertification:** The annual reexamination of a family's income, expenses, and composition to determine the family's rent.

**Remaining Member of a Tenant Family:** A member of the family listed on the lease who continues to live in the public housing dwelling after all other family members have left. (Handbook 7565.1 REV-2, 3-5b.)

**Responsible Entity:**

- A. For the public housing program, the Section 8 tenant-based assistance program (24 CFR 982), and the Section 8 project-based certificate or voucher program (24 CFR 983), and the Section 8 moderate rehabilitation program (24 CFR 882), responsible entity means the PHA administering the program under an ACC with HUD;
- B. For all other Section 8 programs, responsible entity means the Section 8 project owner.

**Self-Declaration:** A type of verification statement by the tenant as to the amount and source of income, expenses, or family composition. Self-declaration is acceptable verification only when third-party verification or documentation cannot be obtained.

**Shelter Allowance:** That portion of a welfare benefit (e.g., TANF) that the welfare agency designates to be used for rent and utilities.

**Single Person:** Someone living alone or intending to live alone who does not qualify as an elderly family, a person with disabilities, a displaced person, or the remaining member of a tenant family. (Public Housing: Handbook 7465.1 REV-2, 3-5)

**Specified Welfare Benefit Reduction:**

- A. A reduction of welfare benefits by the welfare agency, in whole or in part, for a family member, as determined by the welfare agency, because of fraud by a family member in connection with the welfare program; or because of welfare agency sanction against a family member for noncompliance with a welfare agency requirement to participate in an economic self-sufficiency program.





- B. "Specified welfare benefit reduction" does not include a reduction or termination of welfare benefits by the welfare agency:
1. at the expiration of a lifetime or other time limit on the payment of welfare benefits;
  2. because a family member is not able to obtain employment, even though the family member has complied with welfare agency economic self-sufficiency or work activities requirements; or
  3. because a family member has not complied with other welfare agency requirements.

**Stalking:** to follow, pursue, or repeatedly commit acts with the intent to kill, injure, harass, or intimidate; or to place under surveillance with the intent to kill, injure, harass, or intimidate another person; and in the course of, or as a result of, such following, pursuit, surveillance, or repeatedly committed acts, to place a person in reasonable fear of the death of, or serious bodily injury to, or to cause substantial emotional harm to (i) that person; (ii) a member of the immediate family of that person; or (iii) the spouse or intimate partner of that person.

**State Wage Information Collection Agency (SWICA):** The State agency receiving quarterly wage reports from employers in the State or an alternative system that has been determined by the Secretary of Labor to be as effective and timely in providing employment-related income and eligibility information. (24 CFR 5.214)

**Temporarily absent:** A person or persons not actually residing in a unit for a period of time while still maintaining control of the unit. If the absence exceeds thirty (30) calendar days, the Housing Authority must agree to the absence.

**Temporary Assistance to Needy Families (TANF):** The program that replaced the Assistance to Families with Dependent Children (AFDC) that provides financial assistance to needy families who meet program eligibility criteria. Benefits are limited to a specified time period.

**Tenant:** The person or family renting or occupying an assisted dwelling unit. (24 CFR 5.504(b))

**Tenant Rent:** The amount payable monthly by the family as rent to the housing authority. Where all utilities (except telephone) and other essential housing services are supplied by the housing authority or owner, tenant rent equals total tenant payment. Where some or all utilities (except telephone) and other essential housing services are supplied by the housing authority and the cost thereof is not included in the amount paid as rent, tenant rent equals total tenant payment less the utility allowance. (24 CFR 5.603(d))

**Third-Party (verification):** Written or oral confirmation of a family's income, expenses, or household composition provided by a source outside the household.

**Telecommunications Device for the Deaf TTY (Tele Type), TDD (Telecommunications Device for the Deaf), and TT (Text Telephone)** acronyms are used interchangeably to refer to any type of text-based telecommunications equipment used by a person who does not have enough functional hearing to understand speech, even with amplification

**Total Tenant Payment (TTP):**

- A. Total tenant payment for families whose initial lease is effective on or after August 1, 1982:
1. Total tenant payment is the amount calculated under Section 3(a)(1) of the 1937 Act which is the higher of:
    - a. 30% of the family's monthly adjusted income;
    - b. 10% of the family's monthly income; or
    - c. If the family is receiving payments for welfare assistance from a public agency and a part of such payments, adjusted in accordance with the family's actual housing costs, is specifically designated by such agency to meet the family's housing costs, the portion of such payments which is so designated.If the family's welfare assistance is ratably reduced from the standard of need by applying a percentage, the amount calculated under section 3(a)(1) shall be the amount resulting from one application of the percentage.
  2. Total tenant payment for families residing in public housing does not include charges for excess utility consumption or other miscellaneous charges.
- B. Total tenant payment for families residing in public housing whose initial lease was effective before August 1, 1982: Paragraphs (b) and (c) of 24 CFR 913.107, as it existed immediately before November 18, 1996), will continue to govern the total tenant payment of families, under a public housing program, whose initial lease was effective before August 1, 1982.



**Utility Allowance:** If the cost of utilities (except telephone) and other housing services for an assisted unit is not included in the tenant rent but is the responsibility of the family occupying the unit, an amount equal to the estimate made by a housing authority of the monthly cost of a reasonable consumption of such utilities and other services for the unit by an energy-conservative household of modest circumstances consistent with the requirements of a safe, sanitary, and healthful living environment. (24 CFR 5.603)

**Utility Reimbursement:** The amount, if any, by which the utility allowance for the unit, if applicable, exceeds the total tenant payment for the family occupying the unit. (24 CFR 5.603)

**Very Low-Income Families:** Families whose incomes do not exceed 50% of the median family income for the area, as determined by HUD with adjustments for smaller and larger families, except that HUD may establish income ceilings higher or lower than 50% of the median for the area if HUD finds that such variations are necessary because of unusually high or low family incomes.

**Violent criminal activity:** means any criminal activity that has as one of its elements the use, attempted use, or threatened use of physical force substantial enough to cause, or be reasonably likely to cause, serious bodily injury or property damage.

**Welfare Assistance:** Welfare or other payments to families or individuals, based on need, that are made under programs funded, separately or jointly, by Federal, State or local governments (including assistance provided under the Temporary Assistance for Needy Families (TANF) program, as that term is defined under the implementing regulations issued by the Department of Health and Human Services at 45 CFR 260.31).

45 CFR 260.31 defines the term "assistance" to include cash, payments, vouchers, and other forms of benefits designed to meet a family's ongoing basic needs (i.e., for food, clothing, shelter, utilities, household goods, personal care items, and general incidental expenses).

It includes such benefits even when they are:

- A. Provided in the form of payments by a TANF agency, or other agency on its behalf, to individual recipients; and
- B. Conditioned on participation in work experience or community service (or any other work activity under 45 CFR 261.30).

Except where excluded later in this definition, it also includes supportive services such as transportation and childcare provided to families who are not employed.

The term "assistance" excludes:

- A. Nonrecurrent, short-term benefits that:
  1. Are designed to deal with a specific crisis situation or episode of need;
  2. Are not intended to meet recurrent or ongoing needs; and
  3. Will not extend beyond four months.
- B. Work subsidies (i.e., payments to employers or third parties to help cover the costs of employee wages, benefits, supervision, and training);
- C. Supportive services such as child care and transportation provided to families who are employed;
- D. Refundable earned income tax credits;
- E. Contributions to, and distributions from, Individual Development Accounts;
- F. Services such as counseling, case management, peer support, childcare information and referral, transitional services, job retention, job advancement, and other employment-related services that do not provide basic income support; and
- G. Transportation benefits provided under a Job Access or Reverse Commute project, pursuant to section 404(k) of the Act, to an individual who is not otherwise receiving assistance.

**Welfare Rent:** In "as-paid" welfare programs, the amount of the welfare benefit designated for shelter and utilities.

**Written notification:** All written notifications required in this policy shall be hand delivered with a signed receipt or mailed via first class mail unless specified otherwise.

