

HOUSING AUTHORITY OF RACINE COUNTY (HARC)
ACKNOWLEDGEMENT OF HCV TO PBV

Resident's Name: _____

Residents Address: _____

Voucher Number: _____

By signing this form, I acknowledge that:

1. The unit that I currently reside in has been selected by the HARC as a Project Based Voucher (PBV) assisted unit
2. I have accepted an offer to participate in the PBV program and have been briefed on how the PBV program works and the responsibilities of the family and owner.
3. As an eligible participant in the PBV program, I agree to relinquish my tenant-based voucher effective: _____(insert date).
4. I have been provided a briefing packet that explains how the HARC determines the total tenant payment for a family, the family obligations under the PBV and applicable fair housing information.
5. As an eligible participant in the PBV, I agree to abide by the family responsibilities and obligations as set forth in the Statement of Family Responsibility (HUD Form 52578b).
6. I may terminate the lease at any time after one year of occupancy and will be eligible to receive a tenant-based voucher provided that:
 - a) There are tenant-based vouchers available from the HARC;
 - b) I remain eligible to participate in the PBV program and have complied with PBV family responsibilities;
 - c) I have remained lease-compliant during my tenancy at this property;
 - d) I have contacted the HARC requesting tenant-based assistance prior to providing notice to terminate the lease;
 - e) I have given advance written notice to the owner in accordance with the lease and provided a copy of such notice to the HARC.

Resident's Name

HARC Representative

Print

Name

Signature

Title

Date

Date
