

**OWNER PARTICIPATION APPLICATION
BIG STONE GAP REDEVELOPMENT & HOUSING AUTHORITY
HUD SECTION 8 RENTAL ASSISTANCE HOUSING VOUCHER PROGRAM**

Please complete and return this form to Big Stone Gap Redevelopment & Housing Authority at 170 Dogwood Terrace, Big Stone Gap, VA 24219 or via mail POB 536, Big Stone Gap, VA 24219. False responses will result in an automatic denial of participation in the Housing Choice Voucher Program administered by Big Stone Gap Redevelopment & Housing Authority.

Tenant Name: _____
Property Address: _____
(A copy of your deed or tax ticket will be required for documentation legal ownership.)

Owner (s) Information:

Name _____
Address _____
Telephone number _____ **Email address:** _____
SS#: _____

Name _____
Address _____
Telephone number _____ **Email address:** _____
SS#: _____

1. **Do you have a criminal record? Yes or No**
If yes, list all names, dates, locations, offenses and case disposition:

2. **Have you ever been debarred, suspended or subject to a limited denial of participation under HUD regulatory program? Yes or No**

3. *Have you ever been convicted of fraud, bribery or any other corrupt criminal act in connection with any federal or state housing assistance program? Yes or No*
4. *Is this property pending foreclosure or tax lien status? Yes or No*
5. *Are you in any way related to the prospective tenant? Yes or No*

Please be advised:

If you have engaged in or been convicted of any drug-related criminal activity, violent criminal act, or have been charged with a sex crime, you are NOT ELIGIBLE to participate in the Housing Choice Voucher Program. Based on HUD regulations, by signing below as the owner of the above referenced rental property, you affirm that you have not engaged in or been convicted of any drug-related criminal activity, violent criminal act, or have been charged with a sex crime. You further affirm that you are in no way related to the tenant listed above.

By signing below, I/we also understand, as the owner (s) of the above referenced rental property, any and all rental revenue I/we receive on this property will be recaptured if I/we are found to have engaged in or been convicted of any drug-related criminal activity, violent criminal act, have been charged with a sex crime, or found to be related to the tenant. It is further acknowledged by signature below that affirming false information could result in fraud charges being filed under Title 18, Section 1001 of the United States Code which states a person is guilty of a felony for knowingly and willfully making false or fraudulent statements to any department of agency of the United States and could mean a fine of up to \$10,000.00 and/or five years in prison.

Owner

Owner

*Certificate of Acknowledgement: City/County of _____
Commonwealth of Virginia*

*The foregoing instrument was acknowledged before me this _____ day of
_____, 20___, by _____.*

Notary

Notary registration number: _____

My commission expires: _____

*Certificate of Acknowledgement: City/County of _____
Commonwealth of Virginia*

*The foregoing instrument was acknowledged before me this _____ day of
_____, 20___, by _____.*

Notary

Notary registration number: _____

My commission expires: _____