**Add Member Housing Choice Voucher Check List**

Head of Household:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**\*\*\*\*\*\*\* The following items must be submitted to have the application processed: \*\*\*\*\*\*\***

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| --- | --- |
|  | **HUD Form 9886 Authorization for the Release of Information/Privacy Act**  Must be signed by each person in the household 18 or older. |
|  | **General Authorization to Release Information**  Must be signed by each person in the household 18 or older. |
|  | **HUD Form 52675 Debts Owed to Public Housing Agencies and Terminations**  One form completed for EACH person in the household 18 or older. |
|  | **HUD Form 92006 Supplement to Application for Federally Assisted Housing** This form is to help us assist tenants in resolving any tenancy issues. Although an applicant is not required to fill out this form, the head of household still must sign and check off that they do not wish to complete this form. |
|  | **Authorization for Release of Protected Health Care Information** This form complies with HIPPA requirements and enables us to verify any medical deductions they are claiming. The household member must print their full name and check off their consent to the release information at the top of the form and sign and date at the bottom of the form. One for every disabled individual with medical expenses. |
|  | **Household Information Form** Review carefully with client and ensure accuracy. Must be fully completed and signed by all household members 18 and older. |
|  | **Consent to Screen for Criminal Activity** One form completed for EACH person in the household 18 or older. |
|  | **Declaration of 214 status** One form for EVERY household member. |
|  | **What You Should Know About EIV** Must be signed by every household member 18 or older in the space provided. |
|  | **Copies of every household member’s birth certificate.** |
|  | **Copies of every household member’s social security cards** |
|  | **Copies of all State or Federally issued photo Id’s for all household members 18 or older.** |
|  | **Copy of Benefit Award Letter** if applicable for each individual receiving SSA, SSDI, SSI, Survivor or Dependent Benefits regardless of age. |
|  | **Proof of all income sources** If employed last four consecutive paystubs. If self employed most current copy of tax returns. If unemployed proof of unemployment benefit. Child support either requires a printout of the last 6 months for state issued child support or a written statement from the source regarding direct pay child support. |