

LEGAL OWNER & PAYMENT INFORMATION



Instructions: Each owner of a unit receiving Section 8 rental assistance must complete the Owner Information section below. The owner will receive all Housing Authority correspondence and Housing Assistance Payments (HAP) unless a different agent/payee is designated below.

A. Legal Owner Information

Owner Name: _____ Email: _____

(must match legal name as reported on Grant Deed/County records)

Circle one: Home Work Cell

Circle one: Home Work Cell

Primary Phone Number: _____ Alternate Phone Number: _____

Owner Address: _____ City _____ State _____ Zip Code _____

Enter Owner's Taxpayer Identification Number (TIN) issued by the Internal Revenue Service (IRS) or Social Security Number (SSN) in the below box.

The TIN/SSN must match the name given on the 'Legal Owner Name' line. The Housing Authority may request a copy of the TIN letter or Social Security card, if necessary.

TIN: -

SSN: - -

If more than 1 owner is listed, specify name associated with SSN/TIN: _____

Is the legal owner of this property a trust or a trustee? YES NO

If YES, a copy of the executed trust document or other documentation confirming the person listed in Section A. is the trustee must be provided to the Housing Authority with this form

B. Payee Information (Leave Blank if Owner is Also the Payee)

Payee Name: _____ Email: _____

(must match Line 1 of completed W-9 form)

Primary Phone Number: _____ Alternate Phone Number: _____

Circle one: Home Work Cell

Circle one: Home Work Cell

Payee Address: _____ City _____ State _____ Zip Code _____

If Payee will be receiving payment on Owner's behalf, enter Payee Taxpayer Identification Number (TIN) issued by the IRS in the below box.

TIN must match the name given on the "Payee Name" line. For individuals, enter the social security number (SSN). The Housing Authority may request a copy of the TIN letter or Social Security card, if necessary.

TIN: -

SSN: - -

C. Agent or Manager Information

Is there a Manager or Agent for this property that is not the Owner or Payee that may act on the Owner's behalf? YES NO

If Yes, please follow the instructions on the back of this form.

Owner and Agent Certification:

I certify that I am the legal owner for the unit referenced on this form and all the information on this form is true and correct. I understand that if I name a Payee other than myself, the Payee will receive in their name all Housing Assistance Payments and owner correspondence and will act on my behalf regarding all housing matters for the rental property. If Payee is a real estate agent, the agent must use Form 1099-MISC to report the rent paid to the property owner per IRS regulation section 1.6041-1(e)(5)]. I understand that naming a Payee other than myself does not relieve me of any contractual requirements and responsibilities under the HUD-52641 HAP Contract. I understand that SCCHA will issue IRS Form-1099 to the Payee.

Owner Signature: _____

Date: _____

Payee Signature: _____

Date: _____

AGENT AUTHORIZATION

If there is an Agent/Manager for this property that is not the Owner or Payee that may act on the Owner's behalf provide the following information:

Agent/Company Name: _____

Agent Phone Number: _____

Agent Email: _____

A copy of the agent or management agreement between the Owner and the Agent must be provided to SCCHA. If the Owner has provided the management agreement to SCCHA previously, it does not need to be resubmitted.

If an Agent or Management Agreement is not available. The legal Owner must complete the form below:

I, _____ (owner name)

hereby authorize _____ (agent name),
known hereafter as my Agent, to conduct business and enter into contractual agreements with the Santa Clara County Housing Authority on my behalf as is required for the leasing of my property.

Legal Owner Signature: _____

Date: _____

LEGAL OWNER & PAYMENT INFORMATION

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Legal Owner Name: _____

Payee Name: _____
 (Leave blank if Owner is Payee)

List all units receiving HAP payment from SCCHA for which you want to update the owner and payment information. Provide the complete property address for each unit below or you may provide a separate document which lists all the requested information.

	Unit/Property Address (Street Address, City, and Zip)
1	
2	
3	
4	
5	
6	
7	
8	
9	
10	
11	
12	

Request for Taxpayer Identification Number and Certification

**Give Form to the
 requester. Do not
 send to the IRS.**

Print or type See Specific Instructions on page 2.	1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank.	
	2 Business name/disregarded entity name, if different from above	
	3 Check appropriate box for federal tax classification; check only one of the following seven boxes: <input type="checkbox"/> Individual/sole proprietor or single-member LLC <input type="checkbox"/> C Corporation <input type="checkbox"/> S Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Trust/estate <input type="checkbox"/> Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=partnership) ▶ _____ Note. For a single-member LLC that is disregarded, do not check LLC; check the appropriate box in the line above for the tax classification of the single-member owner. <input type="checkbox"/> Other (see instructions) ▶ _____	4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3): Exempt payee code (if any) _____ Exemption from FATCA reporting code (if any) _____ <i>(Applies to accounts maintained outside the U.S.)</i>
	5 Address (number, street, and apt. or suite no.)	Requester's name and address (optional)
	6 City, state, and ZIP code	
	7 List account number(s) here (optional)	

Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the Part I instructions on page 3. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN* on page 3.

Social security number									
				-			-		
or									
Employer identification number									
				-					

Note. If the account is in more than one name, see the instructions for line 1 and the chart on page 4 for guidelines on whose number to enter.

Part II Certification

Under penalties of perjury, I certify that:

1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and
2. I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and
3. I am a U.S. citizen or other U.S. person (defined below); and
4. The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions on page 3.

Sign Here	Signature of U.S. person ▶	Date ▶
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General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

Future developments. Information about developments affecting Form W-9 (such as legislation enacted after we release it) is at www.irs.gov/fw9.

Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) which may be your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN), to report on an information return the amount paid to you, or other amount reportable on an information return. Examples of information returns include, but are not limited to, the following:

- Form 1099-INT (interest earned or paid)
- Form 1099-DIV (dividends, including those from stocks or mutual funds)
- Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)
- Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)
- Form 1099-S (proceeds from real estate transactions)
- Form 1099-K (merchant card and third party network transactions)

- Form 1098 (home mortgage interest), 1098-E (student loan interest), 1098-T (tuition)
- Form 1099-C (canceled debt)
- Form 1099-A (acquisition or abandonment of secured property)

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.

If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See What is backup withholding? on page 2.

By signing the filled-out form, you:

1. Certify that the TIN you are giving is correct (or you are waiting for a number to be issued),
2. Certify that you are not subject to backup withholding, or
3. Claim exemption from backup withholding if you are a U.S. exempt payee. If applicable, you are also certifying that as a U.S. person, your allocable share of any partnership income from a U.S. trade or business is not subject to the withholding tax on foreign partners' share of effectively connected income, and
4. Certify that FATCA code(s) entered on this form (if any) indicating that you are exempt from the FATCA reporting, is correct. See *What is FATCA reporting?* on page 2 for further information.