

**Owner's Certification of Compliance
with HUD's Tenant Eligibility
and Rent Procedures**

**U. S. Department of Housing
And Urban Development**

NOT for submission to the Federal Government
Landlord's Official Record of Certification

Office of Housing
Federal Housing Commissioner

OMB Approval Number 2502-0204
(Exp. 04/30/2009)

Acknowledgements

Read this before you complete and sign this form HUD-50059 A

Public Reporting Burden. The reporting burden for this collection of information is estimated to average 55 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information including suggestions for reducing this burden, to the Office of Management and Budget, Paperwork Reduction Project (2502-0204), Washington, DC 20503. The information is being collected by HUD to determine an applicant's eligibility, the recommended unit size, and the amount the tenant(s) must pay toward rent and utilities. HUD uses this information to assist in managing certain HUD properties, to protect the Government's financial interest, and to verify the accuracy of the information furnished. HUD or a Public Housing Authority (PHA) may conduct a computer match to verify the information you provide. This information may be released to appropriate Federal, State, and local agencies, when relevant, and to civil, criminal, or regulatory investigators and prosecutors. However, the information will not be otherwise disclosed or released outside of HUD, except as permitted or required by law. You must provide all of the information requested, including the Social Security Numbers (SSNs) you, and all other household family members age six (6) years and older, have and use. Giving the SSNs of all family members age six (6) years and older is mandatory; not providing the SSNs will affect your eligibility. Failure to provide any information may result in a delay or rejection of your eligibility approval.

Privacy Act Statement. The Department of Housing and Urban Development (HUD) is authorized to collect this information by the U.S. Housing Act of 1937, as amended (42 U.S.C. 1437 et. seq.); the Housing and Urban-Rural Recovery Act of 1983 (P.L. 98-181); the Housing and Community Development Technical Amendments of 1984 (P.L. 98-479); and by the Housing and Community Development Act of 1987 (42 U.S.C. 3543).

Owner's Certification - I certify that this Tenant's eligibility, rent and assistance payments have been computed in accordance with HUD's regulations and administrative procedures and that all required verifications were obtained.

Warning to Owners and Tenants. By signing this form, you are indicating that you have read the above Privacy Act Statement and are agreeing with the applicable Certification.

False Claim Statement. Warning: U.S. Code, Title 31, Section 3729, False Claims, provides a civil penalty of not less than \$5,000 and not more than \$10,000, plus 3 times the amount of damages for any person who knowingly presents, or causes to be presented, a false or fraudulent claim; or who knowingly makes, or caused to be used, a false record or statement; or conspires to defraud the Government by getting a false or fraudulent claim allowed or paid.

Partial Certification

1. Name of Project	2. Project Number	3. Subsidy Type	4. Contract Number	5. Transaction Type
6. Head of Household (Last, First, Initial)		7. Unit Number	8. No. of Bedrooms	9. Effective Date
10. Head ID Code (SSN)	11. Head Birth Date	12. Building ID	13. Anticipated Voucher Date	

Move Outs

Gross Rent Changes and Unit Transfers

14. Move Out Code _____
15. Date of Death of Sole Member _____

18. Prev. Unit No. (UT's only) _____
19. Contract Rent _____
20. Utility Allowance _____
21. Gross Rent _____

Terminations

16. Termination Code _____
17. Description _____

22. Total Tenant Payment _____
23. Tenant Rent _____
24. Utility Reimbursement _____
25. Assistance Payment _____
26. Security Deposit _____

Signatures

Head of Household	Date	Owner/Agent	Date
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