

SECTION 8 PROGRAM OWNER INFORMATION FORM

An owner who wishes to participate in the Section 8 Program MUST complete and sign this form. A post office box cannot be used instead of a home mailing address. However, you may supply a post office box in addition to your street address. If you are an agent on behalf of an owner, a management agreement and your photo ID must be submitted along with this form.

Owner Name

Owner Home Address

Owner Mailing Address

City, State, Zip

City, State, Zip

Home Telephone Number

Work/Business Telephone Number

Social Security Number

Date

Owner/Agent Signature

Email address for Direct Deposit
Notifications (Limit 35 characters)

If this is the first time this property is being registered with DHA, please provide the following information?

- Photo identification
- Social Security card or Tax ID/EIN number
- Proof of home address
- Recorded copy of the recorded Warranty Deed or Quit Claim Deed (If the deed is not recorded, a letter from the closing attorney stating that the Deed has been filed with DeKalb County is also required)
- IRS Form W-9 (included in this packet)
- Blank voided check for Direct Deposits