



THE HOUSING AUTHORITY OF GLOUCESTER COUNTY

LEASE IN PLACE HOUSING CHOICE VOUCHER PROGRAM

CERTIFICATION FOR PREFERENCE ELIGIBILITY

To be eligible for the Housing Authority of Gloucester County's Lease In Place Preference for the Housing Choice Voucher Program, an applicant must:

- Be a tenant in good standing, renting a non-relative owned, HQS/NSPIRE (National Standards for the Physical Inspection of Real Estate) compliant unit, located in HAGC's Operating Jurisdiction.
- Commit to remain in the unit for at least one (1) year upon lease execution.

Head of Household Name: _____ Last 4 digits of SS#: _____

I (the head of household) understand that this preference requires complying with all Program requirements noted above. I understand that if my circumstances change or I am not able to lease the unit noted below for any reason, the preference will be voided, and I will no longer be eligible for this Program.

Head of Household's Signature

Date

To be Completed by the current Landlord Certifying Eligibility:

I, _____, certify that the applicant, _____, is currently a tenant in good standing, renting a non-relative owned, HQS/NSPIRE (National Standards for the Physical Inspection of Real Estate) compliant unit, owned and/or managed by me, or the organization which I represent. The unit address is _____. I will execute a 1-year Lease In Place lease with the applicant and sign the HAP Contract upon issuance of a Housing Choice Voucher and successful unit inspection.

Landlord Name/ Organization: _____

Landlord's Signature: _____ Date: _____

Telephone: _____

Email: _____

