

SHA CHECKLIST Project-based Program

Sender's Name (not agency name): _____ Phone or Email _____ Date: _____

Applicant Name: _____ Property Name: _____

Bedroom Size Requested: _____ Address & Unit Number: _____

APPLICATION	PART 2 (Move in)	Annual Review	Special Review	Transfers	Is this a Sound Families Unit? (circle one)	
					YES	NO
					<input type="checkbox"/>	Required
					<input type="checkbox"/>	Not Needed
					*	<i>Required ONLY for a change in household composition</i>
ASSEMBLE MATERIALS IN ORDER FROM TOP TO BOTTOM						
						1. SHA Checklist
						2. SHA Application
			*			3. Personal Declaration
						4. Change of Income or Household Conditions (SHA-385PL)
			*			5. Copy(s) of Social Security Card
			*			6. Proof of Identity for all Household Members (photo ID for adults, birth records for minors)
						7. Declaration of Citizenship
			*			8. Eligible Immigration Status Verification Consent Form
			*			9. Authorization for the Release of Information (HUD 9886)
			*			10. SHA Project-based Release of Information
			*			11. Criminal Background Check
INCOME						
						1. Income Verification (either WSHFC forms or SHA forms will be accepted)
						2. Self-Employment Verification include a signed copy of last year's tax return (WSHFC Self-Employment Verification can be substituted for this form)
						3. Zero Income Affidavit (WSHFC or SHA form)
ASSETS						
						1. Asset Verification (if assets in excess of \$5,000) (WSHFC forms or SHA forms)
ALLOWANCES & DEDUCTIONS (if applicable)						
						1. Professional Certification of Disability
						2. Out of Pocket Childcare/Daycare Expenses (include receipts)
						3. Out of Pocket Medical Deductions (include prescription printout or receipts)
PART 2: MOVE IN & TRANSFERS						
						1. Initial Inspection Self-Certification
						2. Copy of the Lease and Tenancy Addendum
						3. Change of Income or Household Conditions (SHA-385PL) (if applicable)
						4. Reporting Obligations and Drug form
						5. Lead Based Paint disclosure (if applicable)
						6. Statement of Family Responsibility (signed by Tenant & Owner)
⇒ TRANSFERS ONLY					Date of Transfer:	Old Unit #: New Unit #:

Seattle Housing Authority, PorchLight
907 NW Ballard Way, Ste 200
Seattle, WA 98107
(206) 239-1770 fax
<http://www.seattlehousing.org>

Andy Eide, Supervisor
(206) 239-1649 aeide@seattlehousing.org
Gerry Nelson, Contracts Coordinator
(206) 239-1531 gnelson@seattlehousing.org

CONTACT NUMBERS FOR THE PROJECT-BASED PROGRAM

- ▶ Applications, Move-Ins & Transfers:
 - projectbasedapplications@seattlehousing.org
 - Courtney Powell (206) 239-1784, cpowell@seattlehousing.org
 - Emma Meinig (206) 239-1782 emeinig@seattlehousing.org
- ▶ Annual Reviews, Special Reviews Move-Outs, Reconciliations, Vacancy Loss:
 - Lily Hong (206) 239-1648 lhong@seattlehousing.org
 - Katie Pierce (206) 239-1618 vpierce@seattlehousing.org
 - Linda Sorensen (206) 239-1630 lsorensen@seattlehousing.org