GAINESVILLE Housing Authority
Where Housing Matters

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Request to Add Adult Household Member

All adult additions must be approved in writing by the landlord and by GainesvilleHousing Authority (GHA) before allowing anyone to move into the assisted unit. This policy only considers a spouse or significant other with whom the head share a child, or a person appointed by the court to provide care for an elderly or disabled person. If it is determined that the individual moved in before obtaining GHA and landlord approval, then the household may be subject to termination of housing assistance in accordance with GHA policies.

Head of Household _____ File Number _____

New Member's Name _____ **SSN** _____

Step 1: LANDLORD PERMISSION (Only for family members ages 18+)

I agree to add the adult named above to the current lease currently in-place with the above-named head-of-household.

Landlord Name _____ Phone Number _____

Landlord Signature _____ Date _____

Step 2: NEW FAMILY/HOUSEHOLD MEMBER'S INFORMATION

Relation to Head of Household _____ Date of Birth _____ ❑ Male ❑ Female

Race/Ethnicity _____ ❑ Hispanic ❑ Non Hispanic

List all income received and attach 60 days' worth of verification (for example, four paystubs, if paid biweekly):

Type _____ Source _____ Monthly amount $ _____

List all assets held or owned and attach last three consecutive verification (for example, bank or account statements):

Type _____ Financial institution _____ Current value $ _____

Are you a student? ❑ Yes ❑ No If yes, attach verification of **full-time** enrollment status, tuition, and financial aid.

Have you ever been convicted of a felony? ❑ Yes ❑ No If yes, please explain: _____

Step 3: ATTACH THE APPLICABLE SUPPORTING DOCUMENTATION & EMAIL EVERYTHING TO DOCS@GNVHA.ORG

All adults being considered must provide the following:

- ☐ Legal US ID (Such as valid driver's license, US passport, or Naturalization form)
- ☐ Birth Certificate
- ☐ Social Security Card
- ☐ Non-Citizens: Permanent Resident Card, I-94, I-551 form with annotations
- ☐ Income, Asset, and Full-Time Student (if applicable) verification

GHA Use Only:

- ☐ Authorization to Release of Information (9886 & 9887)
- ☐ Citizenship Form 214
- ☐ What You Should Know About EIV
- ☐ Debts Owed and Terminations (52675)
- ☐ Authorization for Backgound Check

I certify the above information is true and the additional household member will reside in the subsidized unit. I acknowledge that falsifying or manipulating information may result in denial or termination from the housing program.

Head of Household's Signature _____ Date _____

New Member's Signature _____ Date _____

For GHA Purposes Only	Recommend ❑ Yes ❑ No GHA Staff Initial/Date_____	Background Check ❑ Yes ❑ No Approval ❑ Yes ❑ No