

Virgin Islands Housing Authority

St. Thomas
#402 Anna's Retreat
P.O Box 7668
St. Thomas, VI 00801
Telephone: 340-777-8442
Fax: 340-775-0832
TDD Line: 340-777-7725
Email: exec@vihousing.org
Website: www.vihousing.org



St. Croix
#5 Estate Bethlehem
P.O Box 1349, Kingshill
St. Croix, VI 00851
Telephone: 340-778-8442
Fax: 340-773-3054
TDD Line: 340-778-5245
Website: www.vihousing.org

OWNER OBLIGATIONS

Receipt of Information

- The owner certifies that a COMPLETE copy of the HUD Tenancy Addendum has been provided by the Virgin Islands Housing Authority (VIHA).

Owner Responsibilities

- The owner certifies that the contract unit, and its premises, will be maintained in accordance with the Housing Quality Standards (HQS). The owner understands that failure to maintain the contract unit in accordance with HQS can/should result in the abatement of Housing Assistance Payments.
- The owner certifies that the rent for the assisted unit DOES NOT exceed rents charged for comparable unassisted units in the area/on the premises. The owner understands that VIHA will perform a rent reasonableness test before approving any rent.
- The owner certifies that he/she (including a principal or other interested party) is not the parent, child, grandparent, grandchild, sister, brother of any member of the family, unless VIHA has determined (and approved in writing) that such a relationship would provide a reasonable accommodation for a family member who is a person with disabilities.
- The owner certifies that the family does not own or have any interest in the contract unit.
- The owner certifies that he/she will not discriminate against any person because of race, color, religion, sex, national origin, age, familial status, or disability in connection with the HAP contract.
- The owner understands that he/she is responsible for the screening of occupants of the assisted unit.
- The owner certifies that he/she understands that VIHA is not responsible for the actions/inactions of the members of the assisted family (i.e. damages, unpaid rent). The owner understands that the occupants of the unit are subject to the terms and conditions of the lease agreement and any consequences resulting from violations of the lease agreement.



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- The owner certifies that upon commencement of the HAP contract, he/she must ensure, to the best of his/her ability, that the members of the family are residing in the assisted unit and the unit is the family's only residence. The owner understands that any information indicating that the family is NOT residing in the assisted unit or is NOT using the assisted unit as their ONLY residence must, by obligation, be immediately reported to VIHA.
- The owner certifies that he/she will enforce the terms of the lease and the HUD Tenancy Addendum. The owner understands that VIHA is NOT responsible for the enforcement of the lease but, by obligation, the owner must advise VIHA of any lease violations incurred by members of the assisted family.

Owner Disapproval

- The owner must NOT engage in drug related criminal activity.
- The owner must NOT engage in violent criminal activity.
- The owner must NOT be subject to registration as a Sexual Offender or Sexual Predator.
- The owner must NOT have committed fraud, bribery or any other corrupt or criminal act in connection with any Federal Housing Assistance program.
- The owner must NOT violate ANY obligations under the Housing Assistance Payments Contract.

OWNER NAME: _____ COMPANY NAME: _____
(Please print legibly)

OWNER SIGNATURE: _____ DATE: _____

MANAGEMENT AGREEMENT ATTACHED: YES NO N/A

AGENT/MANAGEMENT FIRM NAME: _____
(Please print legibly)

AGENT/MANAGER FIRM REP. SIGNATURE _____

