

Certification As a Victim of Domestic Violence, Dating Violence, Stalking or Sexual Assault

Purpose of Form:

The Violence Against Women Reauthorization Act of 2013 (“VAWA”) protects qualified tenants, participants, and applicants, and affiliated individuals, who are victims of domestic violence, dating violence, sexual assault, or stalking from being denied housing assistance, evicted, or terminated from housing assistance based on acts of such violence against them.

Use of Form:

This is an optional form. An owner or manager presented with a claim for continued or initial tenancy or assistance based on status as a victim of domestic violence, dating violence, sexual assault, or stalking (herein referred to as “victim”) has the option to request that the victim document or provide written evidence to demonstrate that the violence occurred. The victim has the option of either submitting this form or submitting third-party documentation, such as:

- (1) A record of a Federal, State, tribal, territorial, or local law enforcement agency (e.g. police), court, or administrative agency; or
- (2) Documentation signed by the victim and signed by an employee, agent or volunteer of a victim service provider, an attorney, a medical professional, or a mental health professional from whom the victim has sought assistance relating to domestic violence, dating violence, sexual assault, or stalking, or the effects of abuse, in which the professional attests under penalty of perjury (28 U.S.C. 1746) that he or she believes that the incident of domestic violence, dating violence, sexual assault, or stalking is grounds for protection under 24 Code of Federal Regulations (CFR) § 5.2005 or 24 CFR § 5.2009.

Submission of Documentation Deadline:

If this form is used by the victim, the victim must complete and submit it within 14 business days of receiving it from the owner or manager. This form must be returned to the person and address specified in the written request for the certification. If the victim does not complete and return this form (or provide third-party verification) by the 14th business day or by an extension of the date provided by the manager or owner, the victim cannot be assured s/he will receive VAWA protections.

If the Victim submits this form or 3rd party documentation as listed above, management cannot require any additional evidence from the Victim.

Confidentiality:

All information provided to an owner or manager concerning the incident(s) of domestic violence, dating violence, sexual assault, or stalking relating to the victim (including the fact that an individual is a victim of domestic violence, dating violence, sexual assault, or stalking) shall be kept confidential by the owner or manager, and such information shall not be entered into any shared database. Employees of the owner, or manager are not to have access to these details unless to afford or reject VAWA protections to the victim; and may not disclose this information to any other entity or individual, except to the extent that disclosure is: (i) requested or consented to by the victim in writing; (ii) required for use in an eviction proceeding; or (iii) otherwise required by applicable law.

Today's Date:	Victim's Name:	Name of Person Completing This Form:
	Current Address of Victim:	
Names of Person(s) Living with the Victim:		

We do not discriminate on the basis of disability status in the admission or access to, or treatment or employment in, our federally assisted programs and activities. If you are disabled and would like to request an accommodation or if you have difficulty understanding English, please request our assistance and we will ensure that you are provided with meaningful access based on your individual needs. Federal civil rights laws addressing fair housing prohibit discrimination against applicants or tenants based on one or more of the following classifications: race, color, national origin, sexual orientation, gender identification, disability, religion, and familial status.



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Phone Number of Victim:	<input type="checkbox"/> Home ()	-	<input type="checkbox"/> Cell ()	-	<input type="checkbox"/> Work ()	-
Email address of Victim:						

TO BE COMPLETED BY OR ON BEHALF OF THE VAWA VICTIM:

Name of the Perpetrator: <i>(Note: The Victim is required to provide the name of the perpetrator only if the name of the perpetrator is safe to provide, and is known to the victim).</i>		
Perpetrator's Relationship to Victim (if any):	Does the Victim currently live with the Perpetrator? Y N <i>(please circle one)</i>	
Description of Incident 1 <i>The Victim may provide a description of each incident on a separate sheet if more space is needed.</i>		
Date of Incident 1:	Location of Incident 1:	
Description of Incident 1: <i>This description may be used by the owner or manager for purposes of evicting the perpetrator. Be as descriptive as possible.</i>		
Description of Incident 2 <i>(If Applicable)</i>		
Date of Incident 2:	Location of Incident 2:	
Description of Incident 2: <i>This description may be used by the owner or manager for purposes of evicting the perpetrator. Be as descriptive as possible.</i>		
<small>Title 18, Section 1001 of the U.S. Code states that a person is guilty of a felony for knowingly and willingly making false or fraudulent statements to any department of the United States Government, HUD, the PHA and any owner (or any employee of HUD, the PHA or the owner) may be subject to penalties for unauthorized disclosures or improper uses of information collected based on the consent form. Use of the information collected based on this verification form is restricted to the purposes cited above. Any person who knowingly or willfully requests, obtains or discloses any information under false pretenses concerning an applicant or participant may be subject to a misdemeanor and fined not more than \$5,000. Any applicant or participant affected by negligent disclosure of information may bring civil action for damages, and seek other relief, as may be appropriate, against the officer or employee of HUD, the PHA or the owner responsible for the unauthorized disclosure or improper use. Penalty provisions for misusing the social security number are contained in the "Social Security Act at 208 (a) (6), (7) and (8). Violation of these provisions are cited as violations of 42 U.S.C. 408 (a) (6), (7) and (8).</small>		

Public Reporting Burden: The public reporting burden for this collection of information is estimated to average 1 hour per response. This includes the time for collecting, reviewing, and reporting the data. The information provided is to be used by the housing provider to request certification that the applicant or tenant is a victim of domestic violence, dating violence, sexual assault, or stalking. The information is subject to the confidentiality requirements of VAWA. This agency may not collect this information, and you are not required to complete this form, unless it displays a currently valid Office of Management and Budget control number.

This is to certify that the information provided on this form is true and correct to the best of my knowledge and recollection, and that the individual named above in Item 2 is or has been a victim of domestic violence, dating violence, sexual assault, or stalking. I acknowledge that submission of false information could jeopardize program eligibility and could be the basis for denial of admission, termination of assistance, or eviction. **In addition, providing false information may prompt management to notify HUD and pursue civil action related to fraud based on HUD requirements.**

Please Print Name: _____

Signature: _____ Executed on (Date): _____

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