



PROCESSING TIME: Approximately 3 weeks (If all documentation is submitted completely and legibly)

TENANT INFO PAGE: KEEP FOR REFERENCE

Tenants Must Read the Following Information before filling out the Paperwork: **TENANTS MUST PROVIDE A WRITTEN NOTICE OF INTENT TO MOVE (AT LEAST 30-DAYS, BUT LEASES DIFFER) AS WELL AS PROOF OF ALL CURRENT HOUSEHOLD INCOME IN ORDER TOMOVE

Processing time is based upon all documentation being submitted and no repairs required on the unit. If there are missing documents, fields not filled out, or the unit is not ready, the processing time could be significantly delayed.

- Step 1: Rent Determination within 3-4 business days of receipt of RFLA (Landlord not contacted if we can approve asking rent)
- Step 2: Inspection: Unit is assigned to an inspector within 1-2 business days of rent approval (or negotiation, if needed)
- Step 3: Landlord contacted for inspection 1-2 business days after RFLA assigned to inspector
- Step 4: Inspection completed- dependent upon readiness of unit
- Step 5: Confirm Move-in Date within 2-3 business days of passed inspection

NOTE: Rent and security deposit (if applicable) will be mailed to the owner within 6-8 business days after rent and move in date is confirmed. Subsequent payments will be deposited (**direct deposit required**) by the 1st of the month. If you have not received EDEN's portion of the rent, contact **EDEN** immediately.

OVERVIEW OF TENANT'S RESPONSIBILITIES

- RFLA must be received by EDEN no later than the 10th of the month. EDEN cannot guarantee moves by the 1st of
- the following month for RFLA's submitted after the 10th of the month.
- Asking rent must be comparable to other units in area; security deposit cannot exceed the monthly rent amount.
- EDEN does not always pay for a security deposit (only for new tenants in most programs and for special moves).
- EDEN does not pay for fees (i.e., application, background check, keys).
- RFLA cannot be processed for current tenants (moving from one unit to another) until all paperwork is completed, signed, and submitted.
- Unit must be vacant and in move-in condition.
- The owner must have the utilities on in the owner's name at time of inspection. Prospective tenants cannot put utilities in their name until the unit has passed inspection.
- Tenant cannot move into unit before the unit passes inspection and rent is approved by EDEN.
- Tenant cannot move into a new unit while EDEN is paying rent on another unit.

Questions? Please contact our Housing Specialists at (216) 961-9690.

HOUSING RESOURCE & DEVELOPMENT AGENCY 7812 Madison Avenue, Cleveland, OH 44102 | (216)961-9690 | FAX (216)651-4066 Shelter Plus Care FAX (216) 651-6692 | www.EDENcle.org | EDENinfo@EDENcle.org TDD/TTY: 1-800-545-1833, ext. 873







Date: Effective November 1, 2013; Amended May 1, 2017,

To: Landlords/ Property Owners

From: EDEN Manager of Housing Programs

Enclosed: Documents required with RFLA submission

Please reference the list below when submitting an RFLA for your property. There are additional mandatory documents that must be submitted <u>with your RFLA</u>. Failure to submit documents with RFLA **will cause us to stop processing this RFLA**.

RFLA CHECKLIST

Completed W-9 for all new rent recipients Important Note:

- TIN or SSN must match name specified on W-9
- All correspondence will be sent to address on W-9
- If property management company should receive payment, please provide property management remittance information on page 1 of RFLA

Certification of Occupancy or Rental Registration (This will also be due annually)

- Each city has its own occupancy requirements so depending on the city (i.e. Cleveland) we will also accept a receipt that confirms that you paid the registration fee.
- Residential rental property owners (or their agents) are required to obtain a Certificate of Occupancy every year from the city where the property is located. The completed Certificate of Occupancy application must list all occupants, provide contact information for the owner and tenants, and be accompanied by an application fee which varies by property type. See your city's website for more details.

Documentation that your taxes are current.

• Tax bill stamped paid.

OR

- In Cuyahoga County, go to <u>https://myplace.cuyahogacounty.us/</u>.
- Click on the blue [Address] button and enter the address. Enter or click the search button.
- A photo of parcels will appear with your parcel marked with an orange dot.
- Click on the orange dot and then click on the blue [Property Data] button.
- On the right-side column, click on [Tax Summary by Year].
- Click on the blue [Download this Report] button and save it to your computer. Include this with your completed RFLA form.

OR

• If you owe taxes, a payback agreement.

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PD, RRH - Minimum Inspection Requirements

Minimum Inspection Requirements

HQS INSPECTION CHECKLIST: Listed below you will find a list of the most common reasons found for a unit to fail **Housing Quality Standards** (HQS). Please look your unit over carefully before the inspector comes out. We will be unable to enter into contract with any unit that fails HQS inspection. If you have additional questions, you may contact EDEN, Inc. at (216) 961-9690. Thank you for your anticipated cooperation.

- □ All utilities: electric, gas and water **MUST BE ON** in order for unit to pass inspection for any type of HQS inspection. Inspectors must be able to verify that all utilities are in working order.
- □ If Landlord is supplying appliances, these appliances must be present, installed and working to receive credit for usage.
- □ All ceilings, walls and floors must be strong, sturdy and in their permanent positions.
- □ All floors must be free of tripping hazards and transition strips are needed between floor types.
- A working smoke detector with a live battery **must be installed on every level of the unit** including the basement and outside of sleeping rooms. If any members of the family are hearing impaired, a detector with a visual signal must be installed.
- □ The entire unit, both inside and outside, including window frames, must be free of cracking, scaling, peeling, chipping and loose paint. This prevents exposure to possible lead-based paint hazards with or without children 6 years old and younger.
- □ Where there are three or more consecutive steps and a landing, handrails must be securely attached. This applies to both the interior and exterior of the unit. All heights, inside or outside, must have a handrail on both sides to protect fall hazards.
- □ The unit must be free of roaches, rodents, or any other infestations.
- □ The entire unit, interior and exterior, including garages, must be free from electrical hazards. There may be no loose, hanging or exposed wires. All three-prong outlets must be wired correctly. A three-prong GFI circuit tester will be used at the time of inspection to assure safety.
- □ GFI's must be installed in existing outlets, inside and outside including garages and exterior outlets, but all within five feet of water sources. These must be properly grounded and will be tested with a GFI tester as well.
- □ Every room used for living must have either three working outlets or two working outlets and a permanently installed light fixture. At a minimum, each bathroom must have a permanently installed light fixture.
- □ All light switches and outlets must have undamaged and secured covers installed.
- □ All windows and doors must be secure when closed and must be weather tight. No broken or cracked windows allowed.
- □ All windows and doors that are accessible from the outside must have working, sturdy locks and be weather tight.
- □ All operable windows must have a mechanism to secure them in place when opened, with ropes or window controls. Window hardware must be operable.

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- Every room must have at least one operable window for ventilation and safe egress, if the windows are designed to open.
- □ If the unit has third floor sleeping room (s) or living space and the family is eligible to use this space, the owner must provide a safe method of escape in the case of fire. Example: Fire ladder or existing and accessible fire escape(s).
- □ If there is a bathroom with a toilet that is not hooked up to water and sewer lines, it must be repaired/removed. If it is removed, the drain must be sealed to prevent rodents and/or sewer gases from escaping into the unit.
- □ All sinks must have traps except for the laundry tub with flowing and open drains.
- □ The bathroom must have either an openable window or an exhaust fan for ventilation to the outside.
- □ The hot water tank's temperature pressure relief valve must have a threaded discharge line extending down to six inches from the floor.
- □ The flue pipe leading from the furnace and hot water tank must be sealed where they enter the chimney. Also, check to ensure that the flue pipes connecting to the furnace and hot water tank are installed correctly. (At no less than 90 angle)
- Every room used for living must have an adequate heat source. If the source is a separate gas heater, it must be vented to
- □ the outside. If the source is electric, it must be permanently installed and controlled by a separate thermostat and be connected to its own breaker or fuse. (No space heaters)
- If the downspouts or gutters are damaged and/or missing, causing interior damage to the unit, they must be replaced or repaired. Any damage to the interior of the unit due to the missing or damaged downspouts or gutters must be repaired.
- □ The unit must be free from any accumulation of garbage or debris, both inside and outside.
- □ The owner must provide adequate "refuse disposals" to all dwellings. These facilities include trash cans with covers, garbage chutes, and dumpsters with lids approved by the local Health and Sanitation Department.
- □ If the unit has a clothes dryer, the dryer must be vented.
- □ No key-in/key-out deadbolts are allowed. Use thumb-turn locks only.
- □ All units must have a CO Detector on each level minimally w/in 4 sq.ft. of fuel burning appliances and fuel burning sources including but not limited to attached garages and fireplaces.



A Contract Agency of the Alcohol, Drug and Mental Health Services Board of Cuyahoga County





PD, PM - RFLA Instructions

EDEN, Inc. Request for Lease Approval Form (must be completed by owner)

PROGRAM NAME (please check <u>ONE BOX ONLY</u>):

- □ Shelter Plus Care (SPC)
- □ Shelter Plus Care/Sponsor-based Rental Assistance (SRA)
- □ Program/MHS, Inc. (SHP/MHS)
- □ Supportive Housing Program/Recovery Resources (SHP/RR)
- □ Supportive Housing Program/Task Force (SHP/TASK)
- □ Tenant Based Rental Assistance/Task (H-TBRA)

- □ Housing Assistance Program (HAP)
- □ Returning Home Ohio (RHO) Supportive Housing
- □ Home for Good (H4G)
- □ Mainstream Housing Choice Voucher Program

- □ Community Transition Program (CTP)
- □ Other (please specify):

TENANT NAME

TENANT ID (Date of Birth) _____

OWNER NAME & CHECKS MADE PAYABLE TO (1099 recipient) WILL BE THE NAME YOU LIST ON YOUR W-9

*Owner's name must be the name of person, company, etc. who the check is made out to and who is responsible for the IRS reporting—a 1099 is issued in this name at the end of each year. If the name of the person/company doesn't match the 1099 recipient Tax ID # below you may be subject to a fee that the IRS charges EDEN for inaccurate reporting.

The address on your W-9 will be where all Correspondence, 1099 and HAP contract will be sent. This address must be a physical address and not a P. O. Box.

TIN (Taxpayer Identification Number) LISTED ON W-9:

Parcel ID: ____

If you would like your payment sent somewhere other than the address listed on your W-9, please list address here or sign up for direct deposit:

Address:	
City, State Zip	
Contact Name:	Contact Phone Number
Contact Email Address:	
	HEIR POSITIONS IN ORDER TO DETERMINE POSSIBILITY OF d official in public office? (check one)

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EDEN, Inc. Request for Lease Approval Form

PD, PM, RRH - RFLA

Public reporting burden for this collection of information is estimated to average 0.08 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of its collection of information, including suggestions for reducing this burden, to the Reports Management Officer, Office of Information Polices and Systems, U.S. Department of Housing and Urban Development, Washington, D.C. 20410- 3600 and to the Office of Management and Budget, Paperwork Reduction Project (2577-0169), Washington D.C. 20503. Do not send this completed form to either of the above addresses 1. Name of Housing Agency (HA) 2. Address of Unit (street address, apartment number, City, State, Zip) 3. No. of Bedrooms 4. No. of Bathrooms Street Address: (include ½ baths) EDEN, INC. Apt. #: 7812 Madison Avenue City: Cleveland, Ohio 44102 State: Zip: 5. Type of property (check one) 6. Proposed Rent - per month (this amount is not guaranteed) 7. Security Deposit 8. Year Constructed [] Single Family Detached [] Walk-up [] Double/Duplex [] High-rise [

] Mai	nufactured Home		
	NOTE: If there	e are any changes to utility payments o	during tenancy, the Owner & Tenant <u>must</u> complete new RFLA
[Eligi	bility Specialist ONLY - circle, init	ial, date] Who pays security deposit?	EDEN TENANT Initials Date
9.1	Utilities	Please CIRCLE the party responsible for payment:	Indicate power source by checking the appropriate box
	Heating	Owner Tenant	[] Gas [] Electric [] Other:
	Water Heating	Owner Tenant	[]Gas []Electric []Other:
	Cooking	Owner Tenant	[]Gas []Electric []Other:
	Electric Lighting	Owner Tenant	
	Water/Sewer	Owner Tenant	
	Trash Collection	Owner Tenant	
	Heating Style	[] Baseboard [] Boiler	[] Furnace [] Radiator [] Other:
9.2	Appliances	Please CIRCLE the party	9.3 Amenities: Please indicate provided amenities
		responsible for providing:	
	Range provided by:	Owner Tenant	Air Conditioning Yes [] No [] Ceiling Fan Yes [] No []
	Refrigerator provided by:	Owner Tenant	Microwave Yes [] No [] Fenced Yard Yes [] No []
	Washer provided by:	Owner Tenant On Site	Others? Please list:
	Dryer provided by:	Owner Tenant On Site	

10. HA Determinations

a. The HA has not screened the family's behavior or suitability for tenancy; screening is the owner's own responsibility.

b. The HA will arrange for inspection of the unit and will notify the owner and family as to whether or not the lease and unit will be approved.

11. By signing this RFLA...

a. The owner affirms that the unit is not in foreclosure and is not due to be sold at this time.

b. The owner affirms that they are the legal owner and the tenant has no ownership interest in this dwelling.

c. The owner attests that the only individuals that will reside in unit must be listed on both the lease and HAP contract.

d. The owner understands that the unit must comply at all times with Housing Quality Standards (HQS) as deemed by HUD.

e. The owner understands that it is illegal to charge the tenant any amount exceeding the rent amount listed on the approved lease agreement/HAP contract.

f. The owner understands that should the assisted unit become vacant, transferred or sold, they are responsible to notify EDEN immediately in writing.

g. The owner understands that knowingly falsifying material facts is a violation of State and Federal criminal law Rapid Rehousing Programs Only.

RAPID REHOUSING PROGRAMS ONLY:

h. The owner understands that failure to comply with the terms and responsibilities of this program is grounds for termination of participation on EDEN subsidy.

i. The owner understands that this is a time limited program and the tenant's portion of the rent may change without a 30-day notice.

j. The owner understands that the amount of the security deposit may not be in excess of private market practice, or in excess of amounts charged to unassisted tenants.

k. The owner understands that EDEN does not always pay a security deposit; however, for this program if it is paid it is on behalf of the tenant and should be returned to them according to Ohio Tenant Landlord Law upon termination of tenancy. EDEN, Inc. is not responsible for any damages or charges to this unit.

Print Name of Owner or Other Party Authorized to Execute Lease	Print Name of Tenant
Signature of Owner or Other Party Authorized to Execute Lease	Signature of Tenant Date
Phone Number	Phone Number
Alternate Number	Alternate Number
Owner Email Address	Tenant Email Address

Warning: Title 18 US Code Section 1001 states that a person is guilty of felony for knowingly and willing making a false or fraudulent statement to any Department or Agency of the United States. State Law may also provide penalties for false or fraudulent statement.





PD, RRH - Lead-Based Paint (Attachment G SS)

Disclosure of Information on Lead-Based Paint and/or Lead-Based Paint Hazard Lead Warning Statement

Lead Warning Statement

Housing built before 1978 may contain lead-based paint. Lead from paint, paint chips, and dust can pose health hazards if not managed properly. Lead exposure is especially harmful to young children and pregnant women. Before renting pre-1978 housing, lessors must disclose the presence of known lead-based paint and/or lead-based paint hazards in the dwelling. Lessees must also receive a federally approved pamphlet on lead poisoning prevention.

Lessor's Disclosure

- (a) Presence of lead-based paint and/or lead-based paint hazards (check (i) or (ii) below):
 - (i) _____Known lead-based paint and/or lead-based paint hazards are present in the housing. (Explain) _____
 - (ii) _____Lessor has no knowledge of lead-based paint and/or lead-based paint hazards in the housing.
- (b) Records and reports available to the lessor (check (i) or (ii) below):
 - (i) Lessor has provided the lessee with all available records and reports pertaining to lead-based paint and/or lead-based paint hazards in the housing (list documents below)
 - (ii) _____Lessor has no reports or records pertaining to lead-based paint and/or lead-based paint hazards in the housing.

Lessee's Acknowledgement (initial)

- (c) _____ Lessee has received copies of all information listed above.
- (d) _____ Lessee has received the pamphlet Protect Your Family from Lead in Your Home.

Agent's Acknowledgement (initial)

(e) _____ Agent has informed the lessor of the lessor's obligations under 42 U.S.C. 4852(d) and is aware of his/her responsibility to ensure compliance.

Certification of Accuracy

The following parties have reviewed the information above and certify, to the best of their knowledge, that the information they have provided is true and accurate.

Lessor	Date	Lessee	Date
Lessor	Date	Lessee	Date
Agent	Date	Agent	Date





What Are You Waiting For?!!

Sign Up for Direct Deposit Today

Advantages with EDEN Direct Deposit:

- 1) Rent payments will be posted to your bank account on the first banking day of the month.
- 2) No more lost checks and fees to have them reissued.
- 3) Make a public declaration that you are going green.

Sign up today! Complete the enclosed form and return it to EDEN with a voided check. Forms can be:

Emailed to:landlordinfo@edencle.orgFaxed to:216-651-4066Mailed to:EDEN, Inc., 7812 Madison Ave, Cleveland OH 44102

We would like all of our landlords to participate in the Direct Deposit program in order to better serve you. For those landlords that will still require paper checks, EDEN has no choice but to implement a fee schedule for replacement checks:

Check Reissue Fee \$5.00 per check Stop Payment Fee \$35.00 per check

Questions? Contact EDEN at landlordinfo@edencle.org or 216-961-9690 x319.





AUTHORIZATION AGREEMENT FOR AUTOMATIC DEPOSIT (ACH CREDITS)

COMPANY NAME: EDEN, Inc.

I (we) hereby authorize **EDEN, Inc.**, hereafter called COMPANY, to initiate credit entries and to initiate, if necessary, debit entries and adjustments for any credit entries in error to my (our) **Checking** or **Savings account** (select one) indicated below and the depository name below, hereafter called BANK, to credit and/or debit the same to such account.

Bank Name:		Branch:
City:		State: Zip:
TRANSIT ABA#		ACCOUNT #
_	(Routing Number)	

This authority is to remain in full force and effect until **EDEN**, **Inc.**, has received written notification from me (or either of us) of its termination in such time and in such manner as to afford COMPANY and DEPOSITORY a reasonable opportunity to act on it.

Name:	
	(Please print name <u>as it current is</u> on checks from EDEN, Inc.)
SSN:	Or EIN:
	(Please use the <u>same number</u> you put on the W-9 on file with EDEN, Inc.
Date:	Signed:
Date:	Signed:
	(On a joint account, both parties must sign)
Email ad	ldress:
	(Optional)

IMPORTANT: please be sure to include a voided check with this form. (We cannot process without this.)

Received at EDEN	Initials	Does # match? Y N
Vendor Code	Entered	Initials

Land	lord Phone:	Landlord Email:		Tenant Name: _			
Depart	W-9 October 2018) ment of the Treasury Revenue Service	Request for Taxpay Identification Number and C Go to www.irs.gov/FormW9 for instructions and	ertificatest i			Give Form to the requester. Do not send to the IRS.	
ю.	2 Business name/c	n on your income tax return). Name is required on this line; do not leave this li disregarded entity name, if different from above		only one of the	4 Example	one (codes apply only to	
Print or type. Specific Instructions on page	following seven boxes. □ Individual/sole proprietor or single-member LLC □ C Corporation □ S Corporation □ Partnership □ Trust/estate Exe □ Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Partnership) ▶ Exe					Exemptions (codes apply only to ertain entities, not individuals; see hstructions on page 3): Exempt payee code (if any)	
Print of Specific Inst	LLC if the LLC another LLC t is disregarded Other (see ins	LLC if the LLC is classified as a single-member LLC that is disregarded from the owner unless the owner of the LLC is another LLC that is not disregarded from the owner for U.S. federal tax purposes. Otherwise, a single-member LLC that is disregarded from the owner should check the appropriate box for the tax classification of its owner.			code (if an (Applies to acc	y)	
See	6 City, state, and Z7 List account num	ZIP code nber(s) here (optional)					
Par	tl Taxpay	yer Identification Number (TIN)					
backu reside	p withholding. For nt alien, sole prop s, it is your employ	propriate box. The TIN provided must match the name given on line r individuals, this is generally your social security number (SSN). Ho prietor, or disregarded entity, see the instructions for Part I, later. Fo over identification number (EIN). If you do not have a number, see He	owever, for a or other		urity numb	er	

Note: If the account is in more than one name, see the instructions for line 1. Also see *What Name and Number To Give the Requester* for guidelines on whose number to enter.

Part II Certification

Under penalties of perjury, I certify that:

- 1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and
- I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and
- 3. I am a U.S. citizen or other U.S. person (defined below); and
- 4. The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions for Part II, later.

Sign	Signature of		
Here	U.S. person ►		

General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

Future developments. For the latest information about developments related to Form W-9 and its instructions, such as legislation enacted after they were published, go to www.irs.gov/FormW9.

Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) which may be your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN), to report on an information return the amount paid to you, or other amount reportable on an information return. Examples of information returns include, but are not limited to, the following.

• Form 1099-INT (interest earned or paid)

 Form 1099-DIV (dividends, including those from stocks or mutual funds)

Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)

Employer identification number

• Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)

Form 1099-S (proceeds from real estate transactions)

Date 🕨

• Form 1099-K (merchant card and third party network transactions)

 Form 1098 (home mortgage interest), 1098-E (student loan interest), 1098-T (tuition)

• Form 1099-C (canceled debt)

• Form 1099-A (acquisition or abandonment of secured property)

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.

If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See What is backup withholding, later.