

**Annual Recertification  
First Reminder Notice**

Date: \_\_\_\_\_  
Unit #: \_\_\_\_\_  
Annual Recertification. Date: \_\_\_\_\_

RE: Annual Recertification

Dear \_\_\_\_\_:

It will soon be time for your annual recertification. You were provided a notice of your upcoming annual recertification on \_\_\_\_\_.

The Department of Housing and Urban Development (HUD) requires that we review your income and household composition every year to determine if you are still eligible to receive assistance paying your rent.

To complete our review of your income and household composition, you must meet with \_\_\_\_\_ who will be available for recertification interviews on \_\_\_\_\_. Please call us \_\_\_\_\_ as possible to schedule an appointment for an interview.

To help us process your recertification interview, please bring the following information with you to your appointment. Bring only those records that apply to your household:

1. Receipts or stubs for employment, unemployment, self-employment, social security, supplemental security income, welfare, pension funds, alimony/child support payments, educational status, etc. (Name(s), address(es) and telephone number(s) is/are required.)
2. Information regarding savings and checking accounts, money market funds, trusts, certificates of deposit, stocks/bonds, IRA/Keogh or other Retirement/Investment accounts, etc. (Financial institution name(s), address(es), telephone number(s) and account number(s) is/are required.)
3. Bills for medical insurance payments, health care professionals and facilities, eye doctors, dentists, hearing aids, prescription drugs, medical assistance, monthly payments on accumulated medical bills, etc. (Applies to elderly/disabled households. Name(s), address(es) and telephone number(s) of medical care provider(s) is required.)
4. Child care. (Name, address and telephone number of child care provider is required. Days/hours of care and cost to be provided.)

Cooperation with the recertification requirement is a condition of continued program participation. If you respond to this notice after the 10<sup>th</sup> of \_\_\_\_\_ your lease gives us the right to implement any increases in tenant rent, resulting from the recertification, without providing you a written notice of the increase.

If you do not respond before \_\_\_\_\_ your lease gives us the right to terminate your assistance and charge you the market rate rent of \$\_\_\_\_\_ effective \_\_\_\_\_.

Sincerely,

\_\_\_\_\_  
Management Signature