

Housing Authority of Cook County 175 West Jackson Boulevard, Suite 350 Chicago, Illinois 60604 (312) 663-5447 www.thehacc.org

Housing Choice Voucher (HCV) Program Change of Ownership Packet

Please complete the attached Declaration of Ownership to show the current ownership and/or agent information.

Required forms and documents

Change of Ownership

- Declaration of Ownership
- W9 completed with <u>Payee</u> information
- Taxpayer Identification Number (TIN) for <u>Payee</u>
 - Social Security Card (SSN) for an individual
 - Employer Identification Number (EIN) Notice from IRS for a company
- Proof of ownership
 - 🗌 Deed

Title Insurance

- Management Agreement, if party other than owner will receive payment
- Trust Agreement and Beneficiary information, if property is held in trust
- Direct Deposit form

Change of Payee

- Declaration of Ownership
- W9 completed with <u>Payee</u> information
 - Taxpayer Identification Number (TIN) for Payee
 - Social Security Card (SSN) for an individual
 - Employer Identification Number (EIN) Notice from IRS for a company
- Management Agreement, if party other than owner will receive payment
- Direct Deposit form

Change of Address for owner or agent

Declaration of Ownership showing new address

Change of Direct Deposit

- Declaration of Ownership
- Direct Deposit form



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Declaration of Ownership																	
Property Information																	
Tenant Name									Cl	ient	#						
Building Address																	
City, State, Zip		_				_				_				_			
Property Index Numbe	r (PIN)		-		-				-				-				
Ownership Information																	
Legal Owner Name																	
Owner SSN	-	-			0	Owner TIN -											
Mailing Address																	
City, State, Zip																	
Contact Phone																	
Email																	
Payment Information																	
Make payments t	o:	Owner		Indicate SSN or TIN for payee below													
Payee SSN	-	-				or	TIN			-							
Agent Name																	
Mailing Address																	
City, State, Zip																	
Contact Phone																	
Email																	
Certification																	
I certify that I am the legal owner or the legally-designated agent for the above referenced unit.																	
I certify that the prospective tenant, including each family member, has no ownership interest in this dwelling unit whatsoever.																	
I certify that the owner, including a principal or other interested party) is not the parent, child, grandparent, grandchild, sister or brother of any member of the family, unless the HACC has determined (and has notified the owner and the family of such determination) that approving the leasing of the unit, notwithstanding such relationship, would provide reasonable accommodation for a family member with disabilities																	
Signature					-						D	ate					
Print Name					-						Prin	t Titl	le				

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