

**Request for Tenancy Approval Instructions for the Owner  
(HUD-52517)**

1. A Request for Tenancy Approval form (green cover sheet) will be given to the family only after they have been determined eligible for assistance under the Voucher program.
2. The family applies for your unit. The landlord processes their application and approves this family for your unit.
3. Complete green cover sheet. Check the box(es) if they apply.
  - If you own multiply complexes, you should list the name of the complex so that payment is made under the correct tax identification number.
4. Complete the RFTA form with the family.
  - Box 1: Sioux Falls Housing and Redevelopment Commission (SFHRC)
  - Box 2: Complete with the full address that the family will be renting.
  - Box 3: The date you anticipate the lease to start.
  - Box 4: The number of legal bedrooms at that address
  - Box 5: The year that building was constructed
  - Box 6: What you are requesting for Contract Rent
  - Box 7: What you are asking for security deposit? This amount cannot be more than you would charge a person who isn't on housing.
  - Box 8: The date when you anticipate all repairs, cleaning, etc. will be completed
  - Box 9: Check which structure type applies to this unit. This information is needed so that SFHRC can determine if the rent and utility costs are within the family's range.
  - Box 10: Check only if one of the choices applies to this unit
  - Box 11: See table below

<b>Item</b>	<b>Fuel Type / Notes</b>	<b>Who Pays? (O = owner, T = Tenant)</b>
Heat	Check box for fuel type used	O or T?
Cooking	Check box for fuel type used	O or T?
Water Heat	Check box for fuel type used	O or T?
Other Electric	Who pays for the lights, tv, fans, etc.?	O or T?
Water	Who pays for the water bill?	O or T?
Sewer	Who pays for the sewer bill?	O or T?
Trash	Who pays for trash pickup?	O or T?
Air Conditioning	Not a deduction in SD	
Refrigerator	Who <b>owns</b> the refrigerator?	O or T?
Stove	Who <b>owns</b> the stove?	O or T?

Box 12a: If you own more than 4 units, you **must** complete this section. The units you report need to be for the same area of town if possible, and for a similar unit (Square feet, number of bedroom, apartment, vs townhome)

Box 12b: By signing this form, you are verifying that you as the owner, principal, or other interested party, are not the parent, child, grandparent, grandchild, sister, or brother of any member of the assisted family.

Box 12c: Check which of the 3 choices apply. If you check the 3<sup>rd</sup> box, you and the family must complete the attached Disclosure of Information on lead-based paint and/or lead-based paint hazards.

5. The Owner/manager must sign at the bottom of page 2.
6. The family must sign at the bottom of page 2. If the family or the Owner do not sign, SFHRC cannot honor the request.
7. The completed form should be returned to SFHRC by:
  - a. Putting in our drop box located in the front entryway; or
  - b. Faxing it to (605) 339-9305; or
  - c. Mailing it to 630 S Minnesota Ave, Sioux Falls, SD 57104; or
  - d. Emailing it to the family's housing specialist
8. Incomplete forms will be returned to you and will delay processing.
9. You will be notified as soon as possible if this unit does not qualify.
10. Housing assistance can start on the day of or after the date the unit passes inspection.
11. The Owner must provide SFHRC with a copy of their lease as soon as possible.
12. Once SFHRC receives the signed lease, the housing specialist will prepare the Housing Assistance Payment Contract for signatures and send it to the Owner/Manager.
13. Payment will be sent to the Owner on the first of the month after all paperwork has been completed.