



CITY OF EAST PROVIDENCE

*East Providence Housing Authority*

99 GOLDSMITH AVENUE  
EAST PROVIDENCE, RI 02914-2240

**HOUSING CHOICE VOUCHER (SECTION 8) DEPARTMENT**

Phone: 401-434-7645  
Fax: 401-435-3466

## Restrictions on Leasing to Relatives

According to 24 CFR Part 982.306 of the “Code of Federal Regulation”, The Housing Authority must not approve a unit if the owner is the parent, child, grandparent, grandchild, sister, or brother of any member of the family. The Housing Authority may approve a unit if it determines that such approval would provide reasonable accommodation for a family member who is a person with a verifiable disability. The term “Owner” includes principal or other interested party.

I hereby certify that as the owner of the property, I am **NOT** a parent, child, grandparent, grandchild, sister, or brother of any member of the family.

I understand that the term “Owner” also includes a principal or other interested party, husband, or wife of a child.

\_\_\_\_\_  
Owner’s Name

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

I hereby certify that I am **NOT** a parent, child, grandparent, grandchild, sister or brother of the owner or any principal or other interested party of the assisted unit.

\_\_\_\_\_  
Tenant’s Name

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date