



HOUSING AUTHORITIES CITY OF EUREKA & COUNTY OF HUMBOLDT



735 WEST EVERDING STREET, EUREKA CA 95503
PHONE: (707) 443-4583 FAX: (707) 443-4762 TTY: (800) 651-5111

LANDLORD INCENTIVE APPLICATION

Attention Landlord: To qualify for the County of Humboldt Housing Authority's landlord incentive program, please fill out the requested information below and return with your Request for Tenancy Approval (RFTA) form. For any questions pertaining to this application, please contact Nicole Marie at 707-443-4583 x223.

Date of Application: _____

Owner Name: _____

Owner Address: _____

Rental Unit Address: _____

Tenant Name: _____

Please select the appropriate choice below:

- I am a new landlord to the Housing Choice Voucher (HCV) program or am a returning landlord that has not participated in the HCV program in the last 12 months.
- I am an existing landlord to the HCV program, and I am leasing a unit that has not been an HCV assisted unit previously or in the last 12 months.

I certify, to the best of my knowledge and belief, that the statements provided here are true and correct.

Landlord Signature: _____

BELOW SECTION TO BE COMPLETED BY PHA ONLY

I certify that the above landlord qualifies for the following payment amount:

- \$1,000** – This is a new landlord or a returning landlord that has not participated in the HCV program in the last 12 months.
- \$500** – This is an existing landlord to the HCV program that is leasing a unit that has not been an HCV assisted unit previously or in the last 12 months.

PHA Signature: _____



The Housing Authorities are Equal Housing Opportunity Organizations

