

Texas Department of Housing and Community Affairs
Special Needs Certification

Property Name: The Villages at Fiskville TDHCA File#: TX-16443

Household Name: _____ Unit #: _____

You have applied for a unit at the above referenced property, which has a priority to lease apartments to "Persons with Special Needs". A "Persons with Special Needs" include all of the following:

- has a developmental disability, as defined in the Developmental Disabilities Assistance and Bill of Rights Act (42 U.S.C. Section 15002); or
- a "person with disability," as defined in 24 CFR § 5.403:
 - Has a disability, as defined in 42 U.S.C. 423;
 - Is determined, pursuant to HUD regulations, to have a physical, mental, or emotional impairment that:
 - is expected to be of long-continued and indefinite duration;
 - substantially impedes his or her ability to live independently, and
 - is of such a nature that the ability to live independently could be improved by more suitable housing conditions; or
 - Has a developmental disability as defined in 42 U.S.C. 6001.
- a "person with disability," as defined in Texas Administrative Code, Title 10, Chapter 10 §10.003(a)(81):
 - a physical or mental impairment that substantially limits one or more major life activities of such individual;
 - a record of such an impairment; or
 - is regarded as having such an impairment, to include persons with severe mental illness and persons with substance abuse disorders.
- persons with alcohol and/or drug addictions,
- Colonia residents,
- Persons with Disabilities,
- victims of domestic violence,
- persons with HIV/AIDS,
- homeless populations, and
- migrant farm workers.

You are not being asked to disclose any details or specifics regarding the type or nature of the special need, but only to disclose that you, or someone in your household, meet this provision.

Based on the above, do you or anyone in your household have a "Special Need"? YES _____ NO _____

Under penalties of perjury, I/we certify that the information presented in this Certification is true and accurate to the best of my/our knowledge and belief. The undersigned further understands that providing false representations herein constitutes an act of fraud. False, misleading or incomplete information may result in the termination of the lease agreement.

Household Signature

Date

Household Signature

Date

Warning: Title 18, Section 1001 of the U.S. Code makes it a criminal offense to make willful false statements or misrepresentations to any Department or Agency in the United States as to any matter within its jurisdiction.