

CITY OF GARDEN GROVE HOUSING AUTHORITY

12966 Euclid Street, Suite 150, Garden Grove, CA 92840 P.O. Box 3070, Garden Grove, CA 92841 P: (714) 741-5150 | F: (714) 741-5197

DECLARATION OF OWNERSHIP AND AUTHORIZATION FORM

Prope	erty Being Leased (Address):		
City:		State:	Zip Code:
BEHA			T AUTHORIZED TO SIGN AND ACT D LEASE AND THAT I DO NOT AND W
Com	plete for the Legal Owner(s) of the	property:	
Prope	erty Owner/Principal Name:		
	ess:		
			Zip Code:
-	2:		_
corre	esignate a Payee and a Mailing address for the Housing Assistance Payment (HAP) checks and rrespondence. HAP will be reported to the IRS on form 1099 at the end of the year with the informat ted below:		
Payee	e Name:		
Attent	tion or C/O (If Applicable):		
	ng Address:		
Mailii	0		Zin Code:
City: _	e Payee Name is <u>different</u> from th	ne Legal Owner(s), please	explain below, and provide support
Infor	e Payee Name is different from the ments: rmation appearing on IRS Form Wayer Name(s) (Must match W-9):ayer Identification Number (Must match	-9, for this account with G	explain below, and provide support
Infor	e Payee Name is different from the ments: rmation appearing on IRS Form Wayer Name(s) (Must match W-9):ayer Identification Number (Must match Social Security Number:	-9, for this account with G	explain below, and provide support
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Warning: Section 1001 of Title 18 of the U.S. code makes it a criminal offense to make willful false statements or misrepresentations to any Department or Agency of the United States as to any matter within its Jurisdictions.