



**GARFIELD COUNTY HOUSING AUTHORITY**  
**1430 RAILROAD AVENUE, UNIT F**  
**RIFLE, CO 81650**  
**(970) 625-3589 or (888) 627-3589**  
**Fax (970) 625-0859 \* TTY (800) 659-2656**

**Certification of Applicant Briefing**

I, \_\_\_\_\_ acknowledge by signing this form that I have viewed  
 \_\_\_\_\_  
 Print Name  
 the HCV Briefing Video, received a copy of the Section-8 family Handbook and briefing packet which included the following:

1. A description of how the Housing Choice Voucher Program works.
2. How the Garfield County Housing Authority determines the amount of the housing assistance payment for a family including.
  - a. How GCHA determines the payment standard for the family.
  - b. How the GCHA determines the Total tenant payment for the family.
3. How the GCHA determines the maximum rent for an assisted unit.
4. Where the family may lease a unit and portability.
5. Facts I should consider before renting a unit.
6. A copy of the Housing Assistance Payment Contract including Tenancy Addendum.
7. Payment Standard/ Utility allowance schedule and GCHA Subsidy Standards.
8. The Request for Tenancy Approval form.
9. The policy on providing information about a family to prospective landlords.
10. GCHA subsidy standards, including when the PHA will consider granting exceptions.
11. HUD brochures on how to select a unit and The Hazards of Lead Paint.
12. Information on State of Colorado Fair housing laws and a copy of The Housing Discrimination Complaint Form.
13. A list of landlords and accessible units.
14. Family Obligations under the program including when and how families are required to report changes in income and family composition.( Statement of Understanding)
15. Termination of assistance and Informal Hearing procedures and policies.
16. Information concerning my rights according to VAWA ( Violence Against Women Act)
17. Information of my right to request a Reasonable Accommodation.

\_\_\_\_\_  
 Signature of Household Head

\_\_\_\_\_  
 Date

\_\_\_\_\_  
 Signature of other adult or Co-Head

\_\_\_\_\_  
 Date

**I certify that the above stated applicant has been fully briefed on the requirements of the Housing Choice Voucher Program.**

\_\_\_\_\_  
 Signature of Housing Specialist or Representative

\_\_\_\_\_  
 Date



**Warning: Section 1001 of Title 18 of the United States Code, states that a person who knowingly and willingly makes false or fraudulent statements to any department or agency of the United States is guilty of a felony.**

