

Instructions: This is a model that PHAs may, but are not required to, use in producing a form to meet the PHA's obligation to obtain written consent under PIH Notice 2019-5 Appendix A, Paragraph (B) (Written Consent). The PHA completes section 1 prior to transmission to the family; the family completes section 2. This form does not replace the PHA's obligation for significant resident participation in the development of the Streamlined Voluntary Conversion (SVC) plan under 24 CFR § 972.227 or the PHA's obligation to provide families a 90-day written notice under 24 CFR § 972.230(g)(4)(i). This form does not alter the PHA's obligation to comply with all PBV requirements with respect to project-basing in connection with an SVC.

Language Access Reminder: This form must be provided in an accessible format for persons with disabilities (see 24 CFR § 8.6) and should be translated into the appropriate language for persons with Limited English Proficiency (LEP). PHAs should provide [language cards](#) or similar, which the family can use to alert the PHA they cannot read this form.

Consent Form for Project-Based Voucher Assistance

1. Information for Family

Purpose of This Form	To show whether you, an impacted family, are (1) voluntarily consenting to be housed in a unit at the project that is assisted under a Project-Based Voucher (PBV) Housing Assistance Payment (HAP) contract, including a lease with the required PBV tenancy addendum, as part of the Public Housing Agency's (PHA) Streamlined Voluntary Conversion (SVC) of the project; and (2) voluntarily relinquishing your right to tenant-based Housing Choice Voucher (HCV) assistance.
Your Rights	<p>You, as head of household, have the right to:</p> <ul style="list-style-type: none"> • A tenant-based HCV that your family can use in your current unit or in a unit your family finds in the community (with the PHA paying your family's moving expenses). You may relinquish this right in order to choose PBV assistance. • An in-person briefing where the PHA explains your family's right to remain in your current unit using a tenant-based HCV and the differences between PBV and tenant-based HCV. At the briefing, the PHA provides you an opportunity to ask questions, written material about HCV and PBV, information about the SVC timing, and this form. This briefing is called the "Family Briefing" in this form. • Take 30 days after the Family Briefing to decide if you will relinquish your tenant-based HCV and accept PBV. The PHA may choose to provide you with additional time to make your decision. You may ask the PHA any follow-up questions during this time. If you choose PBV, you must turn in this form. If you choose tenant-based assistance, you are not required to turn in this form. If you do not respond, inform the PHA that you wish to retain your tenant-based HCV, or affirmatively withhold consent, the PHA shall not include your current unit under a PBV HAP contract.
PBV Unit Information (PHA Use Only)	<p>If you consent to PBV assistance, based on your current family composition, your family:</p> <p><input type="checkbox"/> Will remain in your current unit.</p> <p><input type="checkbox"/> Will move to another unit in the project (with the PHA paying your family's moving expenses).</p>
Family Briefing Date (PHA Use Only)	____/____/____ (MM/DD/YYYY)
PHA Contact (PHA Use Only)	<p>If you have questions or need additional information, please contact:</p> <p>_____</p> <p>(Name and phone number of PHA contact)</p>

2. Head of Household Consent	
Head of Household Choice	<p>Head of Household, please choose one of the two options below:</p> <p><input type="checkbox"/> I DO NOT CONSENT to relinquish my tenant-based Housing Choice Voucher to accept Project-Based Voucher assistance at the project. I choose a tenant-based Housing Choice Voucher. And I am providing additional clarifying information by checking one of the following boxes about my preference:</p> <p><input type="checkbox"/> I am interested in moving off-site with my tenant-based Housing Choice Voucher (with the PHA paying my moving expenses).</p> <p><input type="checkbox"/> I am interested in remaining in my unit with my tenant-based Housing Choice Voucher.</p> <p><input type="checkbox"/> I voluntarily provide my INFORMED CONSENT to accept Project-Based Voucher assistance at the project and to relinquish my right to a tenant-based Housing Choice Voucher. I choose to accept Project-Based Voucher assistance.</p> <p>*Note that the above options assume the family and unit qualify for the PBV or tenant-based HCV under program rules. For example, the PHA will verify the family's income prior to conversion to confirm family eligibility. If the family or unit does not qualify, the PHA will offer the family another form of comparable housing prior to the conversion.</p>
Head of Household Signature	
Print Name	
Date	____/____/____ (MM/DD/YYYY)

Note: If the Head of Household fails to return the form to the PHA, by default the family will be issued a tenant-based Housing Choice Voucher.