

**CHILDREN ADVANTAGE AND FIXED INCOME ADVANTAGE PROGRAM**  
**PARTICIPANT STATEMENT OF UNDERSTANDING**

**Case Name:** \_\_\_\_\_

**SSN:** \_\_\_\_\_

**PA Case Number (if applicable):** \_\_\_\_\_

Under the Children Advantage/Fixed Income Advantage Program, the Department of Homeless Services (DHS) will issue a monthly rent supplement to eligible clients enrolled in the program. I agree to actively seek and to accept appropriate housing for the program in accordance with DHS Client Responsibility Standards.

- I understand that my rent supplement is based on my family's size and composition (including gender and age), which determines the number of bedrooms for which I qualify.
- I understand that I will sign a one-year lease with my landlord and rental payments will be paid directly to my landlord for up to one year.
- I understand that a completed New York City Housing Authority ("NYCHA") Section 8 Housing Program ("Section 8 Program") priority application will be forwarded to NYCHA on my behalf as soon as practicable after I move into my Children Advantage/Fixed Income Advantage Program apartment.
- I agree to comply with all NYCHA requirements for Section 8 Program applicants including, but not limited to, providing all required documentation and attending all required appointments.
- I understand that I am required to accept a Section 8 Program voucher if offered, and to comply with all requirements of that program, including but not limited to paying 30% of my income directly to my landlord.
- I agree to notify the Department of Homeless Services' ("DHS") Office of Prevention Services if I am accepted into the Section 8 Program, or if I have an address change, change in income, or change in family composition.
- I understand that I will receive keys to my unit from my landlord at lease-signing and that if asked by my landlord for additional monies above the scheduled rental amount for my household composition or above the amount on my lease, I am under no obligation to pay these additional monies.
- I understand that I am not guaranteed a Section 8 Program voucher (due to Section 8 Program qualification requirements).
- I further understand that when the one-year period of eligibility for the rent supplement ends, if I have not been accepted into the Section 8 Program, I will become responsible for paying the full rent to the landlord if I renew my lease.
- I understand that if my lease indicates that I am responsible for some or all utilities, I will pay these utilities directly to the utility company in question. My Landlord will be responsible for heat and hot water.
- I understand that if my lease indicates that I am responsible for some or all utilities, I will pay these utilities directly to the utility companies in question. My landlord will be responsible for heat and hot water.
- I understand that the Children Advantage/Fixed Income Advantage Program monthly rent supplement will also terminate earlier than one year under any of the following circumstances:

— If I vacate my approved apartment, unless the administering agency finds that I am moving with good cause into another acceptable Children Advantage/Fixed Income Advantage Program apartment.

— If my apartment is converted into a Section 8 Program unit and NYCHA begins paying rent to my landlord.

- I understand that aftercare services may be offered to me by the administering agency or an authorized community-base organization. Aftercare services may include help with my benefits and entitlements, landlord-tenant mediation, anti-eviction services, employment and education services, health, mental health, and substance abuse services and child care.
- I understand that DHS may request that I repay some or the entire monthly rent supplement in accordance with State and City regulations and policies that permit recovery or recoupment of public assistance grants that are overpaid or paid in error or as a result of inaccurate, misleading or incomplete information submitted by a public assistance applicant or recipient.
- I understand that if the Apartment is subject to Rent Stabilization that the rent provided in the Lease must be at or below the lawful stabilized rent. I understand that the City will verify that fact. I agree that in the event the rent is greater than the lawful stabilized rent, the Lease shall be amended to reflect the lawful stabilized rent without further action by me or the landlord and the City shall lower the Work Advantage supplement to the lawful stabilized rent.
- I also understand that after signing a Children Advantage/Fixed Income Advantage Program lease that I may be required to repay the security deposit and any rent pre-paid by the City of New York to the landlord for that apartment, if I fail, without good cause, to move into the leased unit or have such amounts recouped from my public assistance grant, if applicable.
- I will cooperate fully with DHS and the New York City Human Resources Administration (HRA), if applicable, in the administration of the Children Advantage/Fixed Income Advantage.

***Required Signatures***

**I have read and understand my obligations under this Statement of Commitment.**

<b>Date:</b> _____	_____	_____
	<b>Head of Household Signature</b>	<b>SS#</b>

<b>Date:</b> _____	_____	_____
	<b>Adult Case Member Signature</b>	<b>SS#</b>

<b>Date:</b> _____	_____	_____
	<b>Adult Case Member Signature</b>	<b>SS#</b>

<b>Date:</b> _____	_____	_____
	<b>Adult Case Member Signature</b>	<b>SS#</b>

**I confirm that all present household adult members have verbalized their understanding to the agreements outlined in this document, and that all adult household members have signed and received a copy of this agreement.**

<b>Date:</b> _____	_____
	<b>Facility Case Manager or Housing Specialist</b>