

Government Data Practices Act Disclosure Statement

Print name(s) of Household Members signing this form:	

The City or County that provided the federal or local affordable housing funding for the development of the property listed below is asking you to supply information that relates to your application to occupy, or continue to occupy, a unit in the following property ("Property"):

Some of the information you are being asked to provide may be considered private or confidential under the Minnesota Government Data Practices Act (MGDPA), Minnesota Statutes Chapter 13. Section 13.04(2) of this law requires that you be notified of the matters included in this Disclosure Statement before you are asked to provide that information to the City or County. The Owner of the Property may also ask you to supply information that relates to your application. The Owner's request for information is not governed by the Minnesota Government Data Practices Act.

1. The City or County is asking for information necessary for the administration and management of a federal or local program to provide housing for low and moderate income families. Some of the information may be used to establish your eligibility to initially occupy, or to continue to occupy, a unit in the Property and/or to receive either Federal, State, or Local rent assistance. Other information may be used to assist the City or County in the evaluation and management of some of the programs it operates.
2. As part of your application, you are asked to supply the information contained in the enclosed attachment. The attachment has two parts: Part A and Part B.
3. The information asked for under Part A of the attachment may be used by the City or County to establish your eligibility to occupy a unit in the Property or to receive Federal, State, or Local rent assistance. If you refuse to supply any portion of the information asked for under Part A, you may not qualify for initial or continued occupancy of a unit in the Property or for receipt of Federal, State, or Local rent assistance.
4. The information asked for under Part B will help the City or County in the evaluation and management of some of the programs it operates and your supplying of this information will be helpful to the City or County. Failure to provide any of the information asked for under Part B will NOT affect whether or not you qualify for initial or continued occupancy of a unit in the Property or for Federal, State, or Local rent assistance.
5. The Owner may also ask for information to determine whether or not it will rent a unit in the Property to you. If you supply or refuse to supply any information requested by the Owner, it will NOT affect a decision by the City or County, but could affect the Owner's decision to rent a unit to you. The determination by the Owner is separate from the City or County's determination and the City or County does not participate, in any way, in the Owner's decision.

6. All of the information that you supply will be accessible to City or County staff (and its agents) and may be made available to staff of the Office of the Minnesota Attorney General, the United States Department of Housing and Urban Development (HUD), the United States Internal Revenue Service (IRS) and other persons and/or governmental entities who have statutory authority to review the information, investigate specific conduct, and/or take appropriate legal action including but not limited to law enforcement agencies, courts and other regulatory agencies. The information may also be provided by the City or County to the Owner's management agents of the Property.

7. This Disclosure Statement remains in effect for as long as you occupy a unit in the Property and are a participant in the program(s) identified in the enclosed Attachment 1.

I was (We were) supplied with a copy of and have read this Government Data Practices Act Disclosure Statement and the Attachments identified in #2 above.

Head of Household, Spouse, Co-Head and all household members age 18 or older must sign and date:

Applicant / Tenant Signature	Date
Applicant / Tenant Signature	Date
Applicant / Tenant Signature	Date
Applicant / Tenant Signature	Date
Applicant / Tenant Signature	Date

Attachment 1

For Units Assisted with HOME, HOME-ARP, NSP, ARPA, or other Local Affordable Housing Programs

Part A

1. Information regarding the household composition including the name(s) and age(s) of all members in the household.
2. Student status.
3. The amount and source of all earned and unearned income of all household members.
4. The type, value and income derived from all household assets.
5. The type, value and income derived from all household assets disposed of for less than fair market value within the past 2 years.
6. Current and/or previous housing history (for program eligibility, if applicable).

Part B

1. Race
2. Ethnicity
3. Gender of head of household
4. Receipt of Public Assistance and Type of Assistance (i.e. Rural Development, Section 8, etc.)
5. Homeless Household
6. Disabled Status
7. Household Type (i.e. single, elderly, etc., and related single parent)