



# BERKSHIRE HOUSING

1 Fenn Street, 3rd Fl, Pittsfield  
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Tel. 413-499-1630 Fax. 413-496-9831  
www.berkshirehousing.com

## ADDENDUM TO VOUCHER PAYMENT CONTRACT: CHANGE OF OWNERSHIP OF PROPERTY Owner Certification

### Ownership Information:

Owner(s) Name: \_\_\_\_\_  
Mailing Address: \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Phone (    ) \_\_\_\_\_

### Tax Information:

I (we) understand the Housing Assistance Payments (HAP) will be submitted to the IRS under the Name and Tax Identification on the attached (W9) and listed below:

Name \_\_\_\_\_ Tax ID  
Number: \_\_\_\_\_  
(Print clearly)

### Check Information

Please make all checks payable to:             Owner     Agent /Management Company  
(Please check one)

Name \_\_\_\_\_  
Address 1 \_\_\_\_\_  
Address 2 \_\_\_\_\_  
City/Town, \_\_\_\_\_ State, \_\_\_\_\_ Zip  
\_\_\_\_\_

I/We, \_\_\_\_\_, new owner(s) of the unit  
leased to \_\_\_\_\_ at \_\_\_\_\_,

\_\_\_\_\_ under a Rental Assistance Program administered by Metro  
Housing Boston hereby agree to honor the terms and conditions of the Voucher Payment  
Contract and Lease for the above-named tenant and unit. Signed under the pains and penalties of  
perjury.

By:

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Title