



How to Submit an Owner Agent Payee (OAP) Change Request

An OAP change request is the SHRA process to report an ownership change; to change the authorized agent; or to change the payee information for the subsidized unit receiving Housing Assistance Payments (HAP).

Documents Required for Submission for Ownership Change:

- OAP form completed
- Copy of the RECORDED GRANT DEED or copy of CERTIFIED SETTLEMENT STATEMENT
- Notice of change announcement to tenants or new lease
- Completed W-9 (tax ID on OAP form and W-9 must match)
 - If Payee and Owner are different, provide W-9 forms for Payee *and* Owner
- If new Owner will use a Management Company, provide Management Agreement

Documents Required for Submission for Payee or Authorized Agent Change:

- OAP form completed
- Notice of change announcement to tenants or new lease
- Completed W-9 (tax ID on OAP form and W-9 must match)
- Management Agreement

FAQs:

- **When should the OAP be submitted?**
It is advised to submit at least 30 days prior to the effective date of the ownership or payee change.
- **When do payments stop for the previous owner?**
Payments stop on the first (1st) of the month following submission. If the next month's HAP has already been disbursed, payments will stop the following month.
- **Why is the notice to tenants or a new lease required to be submitted?**
This requirement is to ensure the tenants have been notified about the change so both the tenant rent and the HAP go to the same entity.
- **Why is a W-9 required for ownership or payee change?**
This helps maintain accurate records and ensures compliance with tax regulations. See California Civil Code §1962 for what is required to be provided on the notice of change.
- **What is the process if the HAP is paid to prior owner?**
HAP paid prior to prior owner must be arranged between the two parties, the prior and new owner. SHRA is not responsible for these prior payments.
- **What will be the effective date for the change?**
The change is effective on the first day of the month following OAP receipt, except when the next month's HAP payment has already been disbursed. In this situation, Then the change will take effect the following month and payments will start to the new owner.
- **Do I need to submit an OAP to change my email, phone number, address, or direct deposit information?**
No, contact information can be changed by logging into the [landlord portal](#) or calling SHRA. Once a vendor code is issued, you can log into the landlord portal to set-up direct deposit for HAP.
- **How do the terms of the HAP contract continue?**
The HAP contract continues until the original expiration if the tenant is in the first year. After the first year, the contract continues month to month. A copy of the existing HAP contact will be included with the documents sent once the process is completed.





Owner Agent Payee (OAP) Form

Property Address: _____

Subsidized Unit Number(s): _____

Request to change (Check all applicable boxes): Ownership Agent Payee

Date of Property Transfer/Ownership: _____

Please send all SHRA correspondence to: (check only one box):

Legal Owner Payee Authorized Agent

CERTIFICATIONS:

1. Is the Legal Owner, Payee or Authorized Agent for this property address listed above an employee or related to an employee of the Sacramento Housing & Redevelopment Agency? Yes No

If "Yes" provide the employee's name _____

2. Is the Legal Owner, Payee or Authorized Agent for this property address listed above related to any member of the rental family? Yes No

If "Yes" provide the family member's name _____
and describe the relationship to the family member(s) _____

LEGAL OWNER:

Legal Owner's Name as Listed on Grant Deed: _____

Individual Corporation Limited Liability Company Other _____

Contact Name _____

Mailing Address: _____

Phone Number: _____ Fax Phone Number: _____

Email Address: _____

Federal Tax I.D.: _____



AUTHORIZED AGENT OR A PROPERTY MANAGEMENT COMPANY:

Is there an authorized agent or property management company? No Yes, please complete this section

Authorized Agent Name or Company Name: _____

Individual Corporation Limited Liability Company Other _____

Contact Name _____

Mailing Address: _____

Phone Number: _____ Fax Phone Number: _____

Email Address: _____

Federal Tax I.D.: _____

PAYEE:

Make the check* payable to Payee Name: _____

Mailing Address: _____

Phone Number: _____ Fax Phone Number: _____

Email Address: _____

Federal Tax I.D.: _____

*Please set up direct deposit once you have a vendor code by going to the [landlord portal](#).

I certify, under penalty of perjury, that information provided on this form is correct and that I am the LEGAL OWNER of the above property. If at any time a question arises as to the validity of this information, or if there is a dispute among interested parties, I understand that a hold will be placed on future HAP until proper legal documentation is provided and/or the signatures of all parties claiming legal interest is provided. I agree to be bound by and comply with the existing HAP contract.

Legal Owner Signature: _____ Print name: _____

Title: _____ Date: _____

If there is an Authorized Agent or Property Management Company, signature is required.

I agree to comply with the existing HAP contract.

Signature: _____ Print name: _____

Title: _____ Date: _____

