



BOSTON HOUSING AUTHORITY
 Occupancy Department
 52 Chauncy Street, 3rd Floor
 Boston, Massachusetts 02111-2375

617-988-4200
 TDD 1-800-545-1833 Ext. 420
 www.BostonHousing.org

CERTIFICATE OF INVOLUNTARY DISPLACEMENT DUE TO HATE CRIMES

This form is available in alternative format upon request.

DEFINITION:

A member of the Household has been a victim of one or more hate crimes AND the Household has vacated a dwelling unit because of this crime OR the fear associated with the crime has destroyed the peaceful enjoyment of the dwelling unit.

DOCUMENTATION REQUIRED:

Failure to provide ALL required documentation will result in denial of priority request.

- ◆ Submission of a fully completed "*Certificate of Involuntary Displacement (due to) by Hate Crimes*" or documentation from a law enforcement agency that the Applicant and/or a Household Member was a victim of such crime(s); **and**
- ◆ Verification that the Applicant/Household has (A) vacated the dwelling because of such crime(s) or; (B) has experienced fear that is associated with the crime and which has destroyed the peaceful enjoyment of the dwelling unit; **and**
- ◆ Proof that the applicant is the tenant of record. (Examples include a copy of the lease or a statement from the owner verifying that the applicant is a tenant of record.)

TO BE COMPLETED BY THE APPLICANT:

I, _____, (SS#: _____ - _____ - _____), authorize the release of the above information to the Boston Housing Authority. I also hereby certify that I have not secured standard, permanent replacement housing to resolve the housing need which I have claimed as a priority status applicant for public housing. I agree that if my circumstances should change at any time, I will immediately notify the BHA's Occupancy Department ***in writing*** (electronic/fax messages are not acceptable).

I understand that any falsification, misrepresentation or concealment of information will be considered grounds for denying admission to BHA housing for a period of three (3) years.

Signature: _____ **Date:** _____

Name (Please Print): _____

TO BE COMPLETED BY AN OFFICIAL FROM A COURT OF LAW OR LAW ENFORCEMENT AGENCY:

The applicant listed above claims that s/he and/or a household member has been the victim of one or more hate crimes. "Hate crime" refers to actual or threatened physical violence or intimidation that is directed against a person or his or property and that violence or intimidation is based on the person's race, color, religion, sex, national origin, handicap, familial status or sexual orientation.

1. Has the applicant and/or a family member been the victim of one or more hate crimes? Please check one.

Yes If Yes, please indicate the date(s) of the incident(s) involving hate crime(s). No

2. Please check which of the following describes when the family's current housing situation:

- A. ____ Displacement has already occurred due to the hate crime(s).
Enter date of displacement: _____.
- B. ____ Displacement has already occurred, but is not related to the hate crime(s).
- C. ____ Displacement has not occurred, but the fear associated with such crime has destroyed the applicant's peaceful enjoyment of the current dwelling unit.
- D. ____ Displacement has not occurred and is not anticipated.

3. Has the alleged hate crime occurred recently or been of a continuing nature?

Yes Please specify: _____

No Please specify: _____

Signature: _____ Date: _____

Print Name: _____ Title: _____

Agency Name: _____

Daytime Phone: (_____) _____

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