| Adopted:       |  |
|----------------|--|
| Resolution No. |  |

# <u>LEASE RIDER</u> SECTION 8 MODERATE REHABILITATION PROGRAM

#### 1. LEASE TERM

The Lease term shall automatically renew for successive one (1) year terms.

#### 2. NET FAMILY ASSETS

If Tenant fails to comply with the restrictions on net family assets and property ownership imposed by 24 <u>C.F.R.</u> 5.618, the Authority may terminate Tenant's Lease for serious violation of a material term of the Lease in accordance with Section 8(B) of the Lease.

#### 3. LEASE REVISIONS

If Tenant fails to accept the Authority's offer of a revision to an existing lease, after written notice of the offer and a reasonable time limit for acceptance by Tenant, the Authority may terminate the Lease for other good cause in accordance with Section 8(C) of the Lease.

#### 4. REVISIONS TO SCHEDULE OF CHARGES / RULES AND REGULATIONS

The Authority shall provide Tenant with at least thirty (30) days' written notice of any changes to the Schedule of Charges or Rules and Regulations of the Authority.

### 5. DEATH OF SOLE TENANT

Tenant understands that the Premises are subsidized housing and that Tenant's leasehold interest may not pass upon death in a will or intestate court proceeding, as per Federal law. Upon the death of the sole tenant and only household member, the Lease will automatically terminate fourteen (14) days after Tenant's death.

| Housing Authority of the City of Long Branch    |
|---|
| Lease Rider (Section 8 Moderate Rehabilitation) |

| Adopted:       |  |
|----------------|--|
| Resolution No. |  |

## 6. SIGNATURE

By signing this Lease Rider, Tenant agrees that all the provisions of this Lease Rider have been read and are understood, and further agrees to be bound by its provisions and conditions as written.

|        | HOUSING AUTHORITY OF THE<br>CITY OF LONG BRANCH |
|--------|---|
| Dated: | , Property Manager                              |
|        | TENANT(S) AND ADULT HOUSEHOLD<br>MEMBERS        |
| Dated: | , Tenant  |
| Dated: | , Tenant  |
| Dated: | , Household Member                              |
| Dated: | , Household Member                              |
|        | WITNESS   |
| Dated: | Name:   |
|        | INAMIC.   |