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| **A picture containing text  Description automatically generated**STATE OF WASHINGTONDEPARTMENT OF SOCIAL AND HEALTH SERVICESDevelopmental Disabilities Administration (DDA)**Subleased Housing Memorandum of UnderstandingRenter Attestation**Per [42 CFR 441.301](https://www.federalregister.gov/documents/2014/01/16/2014-00487/medicaid-program-state-plan-home-and-community-based-services-5-year-period-for-waivers-provider), home and community-based settings must have certain qualities based on the needs of the HCBS participant as indicated in their person-centered service plan. This Subleased Housing Memorandum of Understanding must be signed by each tenant and/or legal representative, which notifies them about their rights while living in a subleased home and receiving residential supports from that provider. Under this attestation, a sublease is a legal agreement in which the supported living provider who is renting a home, rents it to someone else. This person is a subtenant. The supported living provider is responsible for the terms of the original lease with the landlord and the subtenant pays the provider under the terms of the sublease.Agency: ­­­­­­­­­­­­­­­ Home Address: I, or my legal representative if I have one, have been told and understand that I have the following rights when moving into or currently living in a subleased home and receiving supported living services from the same provider:* To live in a home of my choice in Washington State.
* To choose to move at any time.
* To sign and receive a copy of my sublease or other legally enforceable agreement with the provider which guarantees, at a minimum, the same responsibilities and protections from eviction that tenants have under the [Washington State Residential Landlord-Tenant Act](https://apps.leg.wa.gov/rcw/default.aspx?cite=59.18) and other applicable county or city tenant protections.

Further, I, or my legal representative if I have one, and my supported living provider acknowledge and understand the following:* It is my choice to rent a home that is subleased by the supported living provider.
* I am not required to live in the subleased home in order to receive services with the supported living provider.
* DDA requires that this home must meet the conditions for home and community-based settings listed in 42 CFR 441.301.
* If I choose to move from the subleased home, the provider must inform me of the expenses I may be responsible to pay and the operational concerns I should consider when moving.
* If I choose to no longer receive services from the supported living provider, I may be responsible for entering into a new lease or arrangement with the landlord if I want to stay in the home.
* Any eviction considered must follow landlord-tenant laws.
* Any termination of supported living services must follow [DDA Policy 4.24](https://www.dshs.wa.gov/sites/default/files/DDA/dda/documents/policy/policy4.24.pdf) and [WAC 388-101D-0196 through 388-101D-0200](https://apps.leg.wa.gov/WAC/default.aspx?cite=388-101D&full=true).
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| Client’s Name | If applicable, Legal Representative’s Name |
| Client / Client’s Legal Representative’s Signature Date |