



TEXAS DEPARTMENT OF HOUSING AND COMMUNITY AFFAIRS

**Texas Section 811 Project Rental Assistance Program
Request for Barrier Busting Fund Payment**

After a Property-level rejection, use this form to request a Barrier Busting Fund payment from the Department within 10 days. This request process may occur alongside an appeal and/or reasonable accommodation request to the Property.

Section 811 PRA Applicant Name: _____

Referral Agent Name (if applicable): _____

Property Name: _____

Property/Community Manager Name: _____

Property Application Date: _____ Unit Size: 1BR 2BR 3BR 4BR

Application Rejection Notice Date*: _____ Contract Rent: \$ _____

**This request must be submitted to TDHCA within 10 days of this date.*

Property Application rejection reason as stated on rejection notice:

- Criminal Credit Rental History Other: _____
- Copy of rejection notice has been submitted with this form

Referral Agent/Applicant Use Only

As a Referral Agent/Applicant, by signing and submitting this form I certify the above has been discussed with the applicant (if applicable) and the listed applicant requests this Barrier Busting Fund payment to appeal this property-level rejection and wishes to move in to the property.

Referral Agent/Applicant Signature: _____ **Date:** _____

TDHCA Use Only

- Request Approved. Payment in the amount of the contract rent listed above will be made to the Property via Direct Deposit after tenant move-in.
- Request Denied. Reason: _____

TDHCA Staff Signature: _____ **Date:** _____

Property Use Only

- Request Approved. Applicant is approved for move in. Property understands payment in the amount of the contract rent listed above will be made via Direct Deposit after tenant move in.
- Request Denied. Applicant remains rejected. Property does not accept Barrier Busting Fund payment.

Property Staff Signature: _____ **Date:** _____

