EXHIBIT W – SAVE VERIFICATION PROCEDURES

These procedures implement the requirements of 24 CFR § 5.508 (Verification of Eligible Immigration Status)

OVERVIEW & GOVERNING REQUIREMENTS

These SAVE Verification Procedures implement the requirements of Section 214 of the Housing and Community Development Act of 1980 (42 U.S.C. § 1436a) and HUD regulations at 24 CFR part 5, subpart E (§§ 5.500–5.528), including verification procedures under 24 CFR § 5.508. The Systematic Alien Verification for Entitlements ("SAVE") Program, operated by the U.S. Department of Homeland Security (DHS), is used to verify immigration status for certain non-citizen applicants for HUD-assisted housing benefits.

SAVE verification is required **only when all three conditions are met**:

1. A household member **indicates they are a non-citizen**;
2. The household member **claims eligible immigration status**; and
3. The assistance being provided is under a **HUD program covered by Section 214**.

HUD programs subject to Section 214 include, but are not limited to:

- Housing Opportunities for Persons With AIDS (HOPWA);
- Emergency Solutions Grants (ESG) — **only for housing benefits**, including rental assistance, housing stabilization, or housing relocation services;
- HOME Rental Assistance;
- Public Housing;
- Housing Choice Voucher (Section 8) and Project-Based Rental Assistance (PBRA).

SAVE **does not apply** to:

- U.S. citizens;
- Individuals who elect **not** to contend eligible immigration status;
- Programs or activities **not governed by Section 214** of the Housing and Community Development Act and 24 CFR part 5.508, subpart E, **including but not limited to**:
    - Case management
    - Street outreach
    - Housing navigation and placement assistance
    - Behavioral health or supportive services
    - Emergency shelter operations (when not providing rental assistance or housing subsidies)
    - Essential services or non-housing services provided under ESG
    - Any activity that does **not** provide a housing benefit or financial assistance tied to tenancy

Under 24 CFR § 5.508, the **Contractor** is responsible for collecting all required participant documentation, and the **City**, as the responsible entity, must conduct SAVE verification and secondary verification when required. These procedures establish applicability, roles and responsibilities, required documentation, the SAVE workflow, and required forms.

I. PURPOSE

The purpose of this Exhibit is to describe the procedures for verifying immigration status using the Systematic Alien Verification for Entitlements ("SAVE") Program, pursuant to Section 214 of the Housing and Community Development Act of 1980 and HUD regulations at 24 CFR 5.500–5.520.

II. ROLES AND RESPONSIBILITIES

A. CITY (RESPONSIBLE ENTITY)

1. Serves as the SAVE Program user for all applicable HUD-funded activities.
2. Reviews immigration documentation submitted by the Contractor for completeness.
3. Conducts primary SAVE verification.
4. Initiates secondary verification when directed by SAVE.
5. Issues written SAVE verification results to the Contractor.
6. Maintains all SAVE records confidentially and securely.

B. CONTRACTOR

1. Collects all required Section 214 documentation from participants.
2. Submits complete SAVE verification packets (including supporting documents) to the City.
3. Complies with City instructions following receipt of SAVE results.
4. Does not access or use the SAVE system.

III. REQUIRED DOCUMENTATION

The Contractor shall collect and submit the following documentation, as applicable:

1. HUD Declaration of Section 214 Status (Attachment A).
2. Evidence of eligible immigration status.
3. Verification Consent Form.
4. Non-Contending Family Member Form.
5. Proof of age where required under 24 CFR 5.508(b)(3)(ii).
6. SAVE Verification Request Cover Sheet.

IV. WORKFLOW

1. Contractor collects all required documentation from the household.
2. Contractor submits a SAVE verification packet to the City.
3. City conducts primary SAVE verification.
4. If SAVE instructs “Institute Secondary Verification,” City submits the request and required documents to DHS/USCIS.
5. City receives and records final SAVE results.
6. City issues a written determination to the Contractor.
7. Contractor applies eligibility, continued assistance, or proration requirements under 24 CFR 5.516–5.520.

V. EXTENSIONS

Households may receive a thirty (30) day extension to submit acceptable documentation of immigration status, consistent with 24 CFR 5.508(h).

VI. CONFIDENTIALITY

All immigration documentation and SAVE verification results shall be maintained confidentially and used solely for the purpose of determining eligibility for HUD-funded assistance, in accordance with 24 CFR 5.508(d)(3). Documents must be stored securely and protected from unauthorized access.

VII. RECORDKEEPING

Records shall be retained for a minimum of three (3) years after final expenditure or longer if required due to litigation, audit, or unresolved monitoring findings. SAVE-related documents must be stored separately or in restricted-access systems.

VIII. NONCOMPLIANCE

Failure to comply with these procedures may result in corrective action, disallowed costs, suspension of payments, or termination of this Contract.

EXHIBIT W-1 – SAVE VERIFICATION FORMS

FORM 1 – NON-CONTENDING FAMILY MEMBER DECLARATION

Instructions: If one or more members of a family elect not to contend that he or she has eligible immigration status, and the other members of the family establish their citizenship or eligible immigration status, the family may be considered for assistance despite the fact no declaration or documentation of eligible immigration status is submitted by one or more members of the family. The family, however, must identify to the HA the family member(s) who will elect not to contend that he or she has eligible immigration status. In the space(s) provided below, type or print names of the family members who elect not to contend that he or she has eligible immigration status. Listed members of the family do not sign above. However, the Head of Household or Spouse must sign and date form in the space provided.

Head of Household: I, _____ certify, under penalty of perjury, that the persons below are members of my household. Each person listed below has elected not to contend that he or she has eligible immigration status.

List individuals electing NOT to contend eligible immigration status:

_____
(First Name, Middle Initial(s), Last Name)

_____
(First Name, Middle Initial(s), Last Name)

_____
(First Name, Middle Initial(s), Last Name)

_____
(First Name, Middle Initial(s), Last Name)

_____
(First Name, Middle Initial(s), Last Name)

_____ _____
(Signature of Head of Household or Spouse) (Date)

1/**Warning**: 18 U.S.C. 1001 provides, among other things, that whoever knowingly and willfully makes or uses a document or writing containing any false, fictitious, or fraudulent statement or entry, in any matter within the jurisdiction of any department or agency of the United States, shall be fined not more than $10,000, imprisoned for not more than five years, or both.

FORM 2 – VERIFICATION CONSENT FORM

CONSENT: I consent to allow the City and County of Honolulu (the "City")to request and obtain information from the Department of Homeland Security (DHS) U.S. Citizen and Immigration Services (USCIS) for the purpose of verifying my eligibility and level of benefits under HUD's assisted housing programs. I understand that the City cannot use it to delay, deny or terminate housing assistance because of immigration status of family member, except as provided in HUD regulations. In addition, I understand I must be given an opportunity to contest the determination with the DHS or the City, or both.

This consent for expires 15 months after signed.

SIGNATURES:

Head of Household (Print)	A_____ Alien Number	Date	Signature
Spouse (Print)	A_____ Alien Number	Date	Signature
Family Member Age 18 or Over	A_____ Alien Number	Date	Signature
Family Member Age 18 or Over	A_____ Alien Number	Date	Signature
Family Member Age 18 or Over	A_____ Alien Number	Date	Signature

CHILD:

Family Member under Age 18	A_____ Alien Number	Signature of Adult Residing in Unit Responsible for child	A_____ Alien Number 1/	Date
Family Member under Age 18	A_____ Alien Number	Signature of Adult Residing in Unit Responsible for child	A_____ Alien Number 1/	Date
Family Member under Age 18	A_____ Alien Number	Signature of Adult Residing in Unit Responsible for child	A_____ Alien Number 1/	Date
Family Member under Age 18	A_____ Alien Number	Signature of Adult Residing in Unit Responsible for child	A_____ Alien Number 1/	Date
Family Member under Age 18	A_____ Alien Number	Signature of Adult Residing in Unit Responsible for child	A_____ Alien Number 1/	Date

1/If citizenship is declared by Adult Leave Blank

Who Must Sign: In order to be eligible to receive housing assistance, each non-citizen adult or child applying for, or currently receiving housing assistance must be lawfully within the U.S. Please read the Verification of Consent form carefully and sign and return to the Housing Authority's Admissions Office. Please feel free to consult with an immigration lawyer other immigration expert of your choosing.

_____

Privacy Act Statement:
This information on this form is being collected by the _____to determine the applicant's or tenant's eligibility for housing assistance. The HA may release information, without responsibility for the further use or transmission of the evidence by the entity receiving it to: (1) the Department of Housing and Urban Development (HUD), as required by HUD; and (2) to the U.S. Citizen and Immigration Services (USCIS) for the purpose of verification of the immigration status of each individual and not for any other purpose.

Penalties for Missing this Consent:
HUD, the HA and any owner (or any employee of HUD, the HA or the owner) may be subject to penalties for unauthorized disclosures or improper uses of information collected based on the consent form.

Use of the information collected on the consent form is restricted to the purposes cited on the form. Any person who knowingly or willfully requests, obtains or discloses any information under false pretenses concerning an applicant or participant may be subject to a misdemeanor and fined not more than $5,000. Any applicant or participant affected by negligent disclosure of information may bring civil action for damages and seek other relief, as may be appropriate, against the officer or employee of HUD, the HA or owner responsible for the unauthorized disclosure or improper use.

FORM 3 – SAVE VERIFICATION REQUEST COVER SHEET

Contractor Agency: _____

Staff Contact: _____ Phone: _____

Program: _____

Head of Household: _____

Household Member Requiring Verification: _____

Included in Packet (check all that apply):
[ ] HUD 214 Declaration
[ ] Evidence of immigration status
[ ] Verification Consent Form
[ ] Non-Contending Family Member Form
[ ] Proof of age (if applicable)
[ ] SAVE Verification Request Cover Sheet
[ ] Other: _____

FORM 4 – DOCUMENTATION CHECKLIST

[ ] HUD 214 Declaration

[ ] Evidence of eligible immigration status

[ ] Verification Consent Form

[ ] Non-Contending Family Member Form

[ ] SAVE Verification Request Cover Sheet

[ ] Proof of age (if required)

FORM 5 – CITY DETERMINATION NOTICE

To (Contractor): _____
From (City Staff): _____ Date: _____

Head of Household: _____
Household Member Verified: _____

SAVE Result (check one):
[ ] Verified – Eligible
[ ] Secondary Verification Pending
[ ] Not Verified
[ ] Non-Contending

Comments / Instructions:

ATTACHMENT A – HUD DECLARATION OF SECTION 214 STATUS

This is the standard HUD-issued form required under 24 CFR § 5.508. The City and Contractor shall use this form **without modification**.

The HUD form shall be appended in its original PDF format.