

Form HUD-5383
Emergency Transfer Request
for Certain Victims of Domestic Violence, Dating Violence, Sexual Assault
or Stalking

BRIDGEWELL, INC. / MIDDLESEX NORTH RESOURCE CENTER (MNRC)

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Housing Programs Administered by Bridgewell: Mainstream Section 8 Housing Choice Voucher Program (HCV) – 24 CFR Part 982, and Mainstream Section 8 Project-Based Voucher Program (PBV) – 24 CFR Part 983

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Note: Text shown in blue has been added by Bridgewell, Inc. / Middlesex North Resource Center (MNRC) to customize this federal HUD form for Bridgewell participants and applicants in its Mainstream Section 8 Housing Choice Voucher (HCV) and Project-Based Voucher (PBV) programs. Bridgewell is a HUD-approved voucher administrator and is the covered housing provider for VAWA purposes for these programs. Bridgewell does not administer public housing. All other text is HUD's official form.

**EMERGENCY TRANSFER REQUEST FOR VICTIMS OF
DOMESTIC VIOLENCE, DATING VIOLENCE, SEXUAL ASSAULT, OR STALKING**

Confidentiality Note: Any personal information you share in this form will be maintained by your covered housing provider according to the confidentiality provisions below.

Purpose of Form: If you are a tenant of housing assisted under a covered housing program, or if you are receiving transitional housing or rental assistance under a covered housing program, you may use this form to request an emergency transfer and certify that you qualify for an emergency transfer under the Violence Against Women Act (“VAWA”). This form refers to domestic violence, dating violence, sexual assault, or stalking as “VAWA violence/abuse.”

VAWA protects individuals and families regardless of a victim’s age, sex, or marital status.

You may request an emergency transfer when:

1. You (or a household member) are a victim of VAWA violence/abuse;
2. You expressly request the emergency transfer; **AND**
3. **EITHER**
 - a. you reasonably believe that there is a threat of imminent harm from further violence, including trauma, if you (or a household member) stay in the same dwelling unit; **or**
 - b. if you (or a household member) are a victim of sexual assault, either you reasonably believe there is a threat of imminent harm from further violence, including trauma, if you (or a household member) stay in the unit, or the sexual assault occurred on the premises and you request an emergency transfer within 90 days (including holidays and weekend days) of when that assault occurred.

A covered housing provider, in response to an emergency transfer request, should not evaluate whether you are in good standing as part of the assessment or provision of an emergency transfer. Whether or not you are in good standing does not impact your ability to request an emergency transfer under VAWA.

However, submitting this form does not necessarily mean that you will receive an emergency transfer. See your covered housing provider's VAWA Emergency Transfer Plan for more information about VAWA emergency transfers and see "Notice of Occupancy Rights Under the Violence Against Women Act," Form HUD-5380, for additional housing rights you may be entitled to.

Am I required to submit any documentation to my covered housing provider? Your covered housing provider may request documentation proving that you, or a household member, are a victim of VAWA violence/abuse, in addition to completing this emergency transfer request form. The request can be met by completing and submitting the VAWA Self-certification Form (Form HUD-5382), unless the covered housing provider receives conflicting information about the VAWA violence/abuse. If you have third-party documentation that demonstrates why you are eligible for an emergency transfer, you may, instead, choose to submit that documentation to your covered housing provider. See "Notice of Occupancy Rights Under the Violence Against Women Act," Form HUD-5380, for more information.

Will my information be kept confidential? Whenever you ask for or about VAWA protections, your covered housing provider must keep any information you provide about the VAWA violence/abuse or the fact you (or a household member) are a victim, including the information on this form, strictly confidential. This information should be securely and separately kept from your other tenant files. This information can only be accessed by an employee/agent of your covered housing provider if (1) access is required for a specific reason, (2) your covered housing provider explicitly authorizes that person's access for that reason, **and** (3) the authorization complies with applicable law. This information will not be given to anyone else or put in a database shared with anyone else, unless your covered housing provider (1) gets your written permission to do so for a limited time, (2) is required to do so as part of an eviction or termination hearing, **or** (3) is required to do so by law.

In addition, your covered housing provider must keep your address strictly confidential to ensure that it is not disclosed to a person who committed or threatened to commit VAWA violence/abuse against you (or a household member).

What if I need this information in a language other than English? To read this in Spanish or another language, please contact **Bridgewell, Inc. / Middlesex North Resource Center (MNRC), 10 Dearborn Road, Peabody, MA 01960, Main: 339-883-2105, or Joanna Huntington, LICSW, Vice President of Recovery, Housing, and Community Supports, at 339-883-2105 (jhuntington@bridgewell.org)** or go to www.bridgewell.org. You can read translated VAWA forms at https://www.hud.gov/program_offices/administration/hudclips/forms/hud5a#4. If you speak or read in a language other than English, your covered housing provider must give you language assistance regarding your VAWA protections (for example, oral interpretation and/or written translation).

Can I request a reasonable accommodation? If you have a disability, your covered housing provider must provide reasonable accommodations to rules, policies, practices, or services that may be necessary to allow you to equally benefit from VAWA protections (for example, giving you more time to submit documents or assistance with filling out forms). You may request a reasonable accommodation at any time, even for the first time during an eviction. If a provider is denying a specific reasonable accommodation because it is not reasonable, your covered housing provider must first engage in the interactive process with you to identify possible alternative accommodations. Your covered housing provider must also ensure effective communication with individuals with disabilities.

Need further help? For additional information on VAWA and to find help in your area, visit <https://www.hud.gov/vawa>. To speak with a housing advocate, you may contact **Northeast Legal Aid (NLA) at 978-458-1465 (www.northeastlegalaid.org) or the Massachusetts Law Reform Institute (MLRI) at 617-357-0700 (www.mlri.org). For 24/7 survivor advocacy, call HAWC (Healing Abuse Working for Change) at 1-800-547-1649 or HAWC (Healing Abuse Working for Change) at 1-877-509-9922. See the local VAWA Resources list at the end of this form for additional hotlines and survivor services serving Lynn, MA and the North Shore / Essex County area.**

TO BE COMPLETED BY OR ON BEHALF OF THE TENANT REQUESTING AN EMERGENCY TRANSFER

1. Name(s) of victim(s): _____
2. Your name (if different from victim's): _____
3. Name(s) of other household member(s): _____

4. Name(s) of other household member(s) who would transfer with the victim: _____

5. Name of the perpetrator (if known and can be safely disclosed): _____

6. Address of location from which the victim seeks to transfer: _____

7. Current Unit Size (# of bedrooms): _____

8. What is the safest and most secure way to contact you? (You may choose more than one.)

If any contact information changes or is no longer a safe contact method, notify your covered housing provider.

Phone Phone Number: _____
Safe to receive a voicemail: Yes No

E-mail E-mail Address: _____
Safe to receive an email: Yes No

Mail Mailing Address: _____
Safe to receive mail from your housing provider: Yes No

Other Please List: _____

9. Anything else your housing provider should know to safely communicate with you?

10. What features are requested for a safe unit? You may list here any information that would facilitate a suitable transfer, such as accessibility needs, and a description of where it is safe or unsafe for you to live.

(Please note that the ability to provide an emergency transfer is based on unit availability.)

New Neighborhood New Building
 First Floor unit Second Floor unit (and above)
 Near an Exit Well-lit hallways/walkways
 24-hour Security Accessible unit
 Other: _____

11. To approve your request for an emergency transfer, your covered housing provider may require that you provide written documentation that you (or a household member) are a victim of VAWA violence/abuse. Your covered housing provider must make this request for documentation in writing. You can choose to submit **any one** of the following types of documentation:

- Form HUD-5382 *Certification of Domestic Violence, Dating Violence, Sexual Assault, or Stalking, and Alternate Documentation*, which asks your name and the perpetrator's name (if known and safe to provide);

- A document signed by a victim service provider, attorney, mental health professional, or medical professional who has helped you address the VAWA violence/abuse. The professional must state “under penalty of perjury” that he/she/they believe in the occurrence of the incident of VAWA violence/abuse and that it is covered by VAWA. Both you and the professional must sign the statement;
- A police, administrative, or court record (such as a protective order) that shows you (or a household member) are a victim of VAWA violence/abuse; OR
- If permitted by your covered housing provider, a statement or other evidence provided by you.

Certification of Tenant: By signing below, I am certifying that the information provided on this form is true and correct to the best of my knowledge and recollection, and that I meet the conditions described on this form to qualify for an emergency transfer.

Signature _____

Date _____

LOCAL VAWA RESOURCES – LYNN, MA AND SURROUNDING AREA (NORTH SHORE / ESSEX COUNTY)

If you are in immediate danger, call 911.

Crisis Hotlines (24/7):

- **HAWC (Healing Abuse Working for Change)** (serves Lynn and the North Shore — 23 cities/towns) – 24/7 Hotline: 1-800-547-1649 • Lynn Office: 781-592-9900 • Salem Main: 978-744-8552 • www.hawcdv.org
- **SafeLink – Massachusetts Statewide Domestic Violence Hotline** – 1-877-785-2020 (TTY 1-877-521-2601)
- **Boston Area Rape Crisis Center (BARCC)** – Sexual Assault 24/7 Hotline: 1-800-841-8371 • www.barcc.org
- **National Domestic Violence Hotline** – 1-800-799-7233 (SAFE) • Text “START” to 88788 • www.thehotline.org
- **National Sexual Assault Hotline (RAINN)** – 1-800-656-4673 (HOPE) • www.rainn.org

Shelter, Counseling & Survivor Services:

- **YWCA Northeastern Massachusetts** (Lynn / North Shore Rape Crisis Center) – Sexual assault crisis services, advocacy, counseling, and court support; serves Lynn and surrounding North Shore communities • 50 Olympia Avenue, Lynn, MA 01904 • 781-477-2313 (business) • 1-877-509-9922 (24/7 hotline) • www.ywcanema.org
- **Jeanne Geiger Crisis Center** (Newburyport) – Shelter, advocacy, counseling, legal assistance, and support groups for survivors; serves Northeast MA including Lynn • 978-388-1888 • www.jeannegeigercrisiscenter.org
- **Casa Myrna** (Boston) – Shelter and bilingual advocacy • 1-800-992-2600 (SafeLink) • www.casamyrna.org

• **Center for Hope and Healing (Lowell)** – Sexual assault crisis services, advocacy, counseling, and support groups for the Greater Lowell/Merrimack Valley area including Lynn • 1-800-542-5212 (24/7 hotline) • www.chhinc.org

Legal Aid (free/low-cost civil legal help for survivors):

- **Northeast Legal Aid (NLA)** (Lawrence/Lowell/Lynn offices) – Free civil legal services in Essex County including housing, domestic violence, and family-law assistance for survivors • 50 Island Street #203A, Lawrence, MA 01840 • 978-458-1465 • www.northeastlegalaid.org
- **Massachusetts Law Reform Institute (MLRI)** – Statewide housing-law advocacy • 617-357-0700 • www.mlri.org
- **Volunteer Lawyers Project (VLP)** – Free civil legal aid referrals for Massachusetts residents • 617-603-1700 • www.vlpnet.org

Law Enforcement & District Attorney:

- **Lynn Police Department** – 300 Washington Street, Lynn, MA 01902 • Emergency: 911 • Main: 781-595-2000 • TDD: 781-595-1400 • www.lynnpolice.org
- **Essex County District Attorney – Victim Witness Services** (advocates assigned to each Essex County district court including Lynn District Court, which serves Lynn) • Main Office: 10 Federal Street, 5th Floor, Salem, MA 01970 • 978-745-6610 • www.essexcountyda.com/victim-witness-services

HUD Fair Housing & VAWA Rights Violation Complaints:

- **HUD FHEO Region 1 – Boston Regional Office** – Federal Building, 10 Causeway St., Room 553, Boston, MA 02222 • 617-994-8300 • 1-800-827-5005 • TTY 1-800-877-8339 • www.hud.gov/VAWA

Massachusetts Protections (In Addition to VAWA):

Under Massachusetts law (M.G.L. c. 186, §§ 24–29), tenants who are victims of domestic violence, rape, sexual assault, or stalking have additional rights, including the right to terminate a lease early with written notice and the right to request a change of locks at their own expense. Ask Joanna Huntington, LICSW, Bridgewell’s VP of Recovery, Housing, and Community Supports, at 339-883-2105 or jhuntington@bridgewell.org, for more information.

Public reporting burden for this collection of information is estimated to average 20 minutes per response. This includes the time for collecting, reviewing, and reporting. Comments concerning the accuracy of this burden estimate and any suggestions for reducing this burden can be sent to the Reports Management Officer, QDAM, Department of Housing and Urban Development, 451 7th Street, SW, Washington, DC 20410. Covered housing providers in programs covered by VAWA may ask for a written request for an emergency transfer for a tenant who is a victim of domestic violence, dating violence, sexual assault, or stalking. Housing providers may distribute this form to tenants and tenants may use it to request an emergency transfer. The information is subject to the confidentiality requirements of VAWA. A Federal agency may not collect this information, and you are not required to complete this form, unless it displays a currently valid Office of Management and Budget control number.