

ATTACHMENT B

Office of Fair Housing and Equal Opportunity
And
Office of Multifamily Housing

Checklist for On-Site Limited Monitoring and Section 504 Reviews

Multifamily Housing (Housing) staff or Performance-Based Contract Administrators/Non-Performance Based Contract Administrators (CA) must complete this Checklist when conducting on-site Management and/or Portfolio Reviews. The questions on this Checklist cover topics that the Housing staff or CA can be expected to answer and is not intended to cover the full range of civil rights concerns.

As upgrades are made to Real Estate Management System (REMS) and Tenant Rental Assistance Characteristics System (TRACS), Housing staff will train FHEO staff to download the material which will be used in lieu of many items in these checklists (as noted).

The Checklist is divided into five parts.

- Part A: Preparation for Review
- Part B: Limited On-Site Monitoring Review
- Part C: On-Site Section 504 Review
- Part D: Documents Reviewer Should Bring Back

Please Note that a “No” response to any question does not necessarily mean there is a fair housing/civil rights/Section 504 violation

Project Name _____ Project/Application Number _____ 2
REMS Number _____

This page need only be completed once.

Name of the Owner/General Partner _____

Name of Management Agent _____

Type of Development: Rental _____ Coop _____

Elderly Only _____ Elderly/Disabled _____ Family _____ Other (Specify) _____

Type of Federal Financial Assistance _____ (236, 202, 811, 221(d)(3), BMIR, etc.)

Number of Units of Each Size: 1 BR _____ 2 BR _____ 3 BR _____ Other (Specify) _____

Date of First Occupancy: _____

Reviewed by: _____ Housing _____ PBCA _____ CA

Reviewer _____ Date _____ Phone: _____

Quality Control Reviewer _____ Date _____

Phone: _____

PART A

PREPARATION FOR THE REVIEW

Prior to going on the on-site Management Review, the reviewer must answer the following:

	YES	NO	COMMENTS
1. Does Housing have a copy of the approved Form HUD 935.2; Affirmative Fair Housing Marketing Plan (AFHMP)? (CA will contact HUD Office for response) If yes, take a copy on the review to be certain it matches the AFHMP on site.			
2. Has the owner/management agent been asked to update the last AFHMP seen by Housing? If Yes, when was the request made? (Please NOTE: AFHMPs should be reviewed for potential update every five years at a minimum)			Date: _____
3. FHEO requests:			
For Housing: After contacting FHEO, has FHEO asked that Housing observe items in addition to those on the Checklists? If yes, respond in “Comments” Section.			FHEO has asked me to review the following (observations only):
For CA: When HUD Housing contacted FHEO, did FHEO ask that the CA observe items in addition to those on the Checklists? If yes, respond in “Comments” Section.			FHEO asked HUD Housing to have me review the following (observations only):

PART B
On-Site Limited Monitoring Review

Authority: 24 CFR 5, 108-110

	YES	NO	COMMENTS
1. Was this project built or substantially rehabilitated after February 1972? (If NO, skip to Question 3.)			
2. Does the owner have an approved AFHMP on site?			
If YES: Has the AFHMP been reviewed for possible update within the past five (5) years to ensure continued compliance with Section 200.620 of HUD's Affirmative Fair Housing Marketing Regulations (See Question #8 on the AFHMP)? If NO: Note the date of anticipated review:			Date of Anticipated Review:
3. Date of last AFHMP Update:			Date:
4. Are there records at the project which show the composition of the occupants in the following categories (24 CFR 121):			
a. Race			
b. National Origin/Ethnicity			
c. Sex			
d. Disability			
e. Familial Status			
5. Have written tenant selection Procedures been established?			
6. Does the management agent maintain a waiting list of applicants by bedroom size including name, application date and time, request for accommodation and/or accessible unit and preferences, if any?			

	YES	NO	COMMENTS
7. Based on interviews with residents, resident managers, management agent and other staff, does it appear that the owner/agent takes applications, determines eligibility, or otherwise treats applicants the same regardless of race, color, religion, sex, familial status, disability, national origin, or age?			Unable to Observe _____*
8. When a tenant/applicant notifies the owner/agent that he/she has been subject to unlawful discrimination, does the owner/agent provide the applicant/tenant with information about how to file a complaint with HUD?			Unable to Observe _____*
9. Does the owner/agent maintain a record of fair housing complaints?			
10. Is there a local residency preference?			
If YES, Did HUD approve it?			

* "Unable to observe" does not indicate a civil rights problem.

**PART C:
 On-Site Section 504 Limited Monitoring Review**

Authority:

Section 504 of the Rehabilitation Act of 1973 (24CFR Part 8)

Fair Housing Act/Title VIII Regulations (24 CFR Part 103)

Uniform Federal Accessibility Standards (UFAS) (24 CFR Part 4)

Section I

Distribution of all wheelchair and other accessible units in the project.* [NOTE: Over time, this information will increasingly come from REMS (R), TRACS (T) and the Multifamily Housing Inventory Survey (S) as indicated]

Bedroom Size	1	2	3	4	Other	Total
1. All units (R)**						
2. Mobility <i>accessible</i> units						
3. Vision and/or Hearing <i>Accessible</i> Units						
4. (Total 2 & 3)(S)						
5. Number of Persons on waiting list for <i>accessible</i> units by size who requested unit features (S)						
6. Number of units occupied by elderly residents (T)						
7. Number of <i>accessible</i> units occupied by non-elderly residents with disabilities who require the features of the unit (T)						
8. Number of <i>accessible</i> units occupied by elderly residents with disabilities who require the features of the unit (T)						

Percentage of Total Units that are mobility accessible
 (Total line 2 divided by Total line 1 x 100) _____%

Percentage of Total Units that are vision and/or hearing accessible
 (Total line 3 divided by Total line 1 x 100) _____%

Sources of Information: _____ (e.g., Form Number, TRACS, etc.)

* A mobility accessible unit is one that is located on an accessible route, and when designed, constructed, altered, or adapted, can be approached, entered, and used by individuals with physical disabilities, including those who use wheelchairs.

** Items 1, 2, 3, and 4 need only be completed once.

Section II

If there is a Section 504 Self-Evaluation and Transition Plan (the Plan) for the project*, items incorporated into the Plan need not be reviewed separately. Housing staff should check the item in the Table of Contents or identify it in the Plan and submit the Plan to FHEO. Items not incorporated into the Plan need to be reviewed as noted below.

	YES	NO	COMMENTS
<p>1. Section 504 Coordinator [24 CFR 8.53 (a)] If the recipient** (as defined in 24 CFR 8.3) employs at least 15 employees, answer the following question.</p> <p>If less than 15 employees, write N/A under Comments” and skip to Question 2.</p> <p>a. Is at least one person designated to coordinate its Section 504 responsibilities?</p>			
<p>If YES, provide the person’s name and telephone number under “Comments.”</p>			
<p>2. Does the project have a formal, written grievance procedure that includes due process standards and that facilitate prompt resolution of complaints alleging discrimination based on disability, as required by Section 8.53(b)?</p>			
<p>If “YES ” Date procedures were adopted:</p>			Date:
<p>3. Is there a Telecommunications Device for the hearing impaired (TTY)?</p>			
<p>If NO: Is an alternative procedure used?</p> <p>Describe under “Comments,” if applicable:</p>			
<p>4. When necessary, are auxiliary aides used to communicate with persons with disabilities?</p>			

* Self-Evaluation and Transition Plans need only be submitted to FHEO once unless there are subsequent changes and/or updates to the information.

** Number of employees the owner and/or agent employs in **all** its activities, whether at this project or other projects they may own or manage.

Section III

Program Accessibility – Under Section 504, an Assisted Housing Development is required to maintain housing and non-housing facilities that are accessible (usable) by persons with disabilities. The extent to which facilities must be accessible depends on whether they are new, altered or existing.

If there is a Section 504 Self-Evaluation and Transition Plan for the project, * Items incorporated into the Plan need not be separately reviewed. Housing staff should check the item in the Table of Contents or identify it in the Plan and submit the Plan to FHEO. Items not incorporated into the Plan need be reviewed as noted below.

	YES	NO	COMMENTS
Has the owner/agent taken the following steps to reach persons with disabilities in order to inform them of the requirements/benefits of the program?			
a. Qualified sign language and oral interpreters;			
b. Readers;			
c. Use of tapes;			
d. Braille materials;			
e. Provided 504 training to owner/agent and project staff;			
f. Consulted with the disability rights advocacy community.			
g. Other (Describe):			

* Self-Evaluation and Transition Plans need only be submitted to FHEO once unless there are subsequent changes and/or updates to the information.

PART D:

DOCUMENTS TO BRING BACK FOR FHEO*

For the following information:	a. I have gathered the documents and have attached them to the Checklist	b. Owner/agent agrees to forward checked documents to FHEO within ten (10) business days	c.** Document is not available
For Part B:			
1. Affirmative Fair Housing Marketing Plan, unless the reviewer has the most recent one (within the past 5 years).			
2. Any of the following documents that are used for outreach as specifically stated in the project's AFHMP (or used as other affirmative fair housing marketing). Reviewer: Check all that are applicable.			
Newspapers/Publications			
Copy of Radio Ads and Announcements			
Copy of TV Ads and Announcements			
Photograph of billboards			
Letterhead			
Handouts			
Brochures and Leaflets			
Photograph of site signs			
Other (Specify):			
3. Project Profile showing occupancy data (See Part B, Question 4 and 24 CFR 121).			
4. Written tenant selection procedures (See Part B, Question 5).			

* Documents need only be brought back once unless they are changed and/or updated

** A checkmark in this box does not necessarily signify a Fair Housing violation.

The following information need only be collected if there is no Section 504 Self-Evaluation and Transition Plans and/or if the information requested is not included in the Plan.

For the following information: (Please Note: The information below only pertains to Section 504 Compliance)	a. I have gathered the documents and have attached them to the Checklist.	b. Owner/agent agrees to forward checked documents to FHEO within ten (10) business days	c. Information is not available *
For Part C:			
5. Employment policy (Part C, Section II, Question 1)			
6. Written Grievance Procedure (Part C, Section II, Question 2 and 24 CFR 8.53)			
7. Reasonable accommodation/ modification policy.			
8. Occupancy Application along with any written alternative formats			
9. Copy of Section 504 Self-Evaluation Form and Transition Plan			
10. If Part C, Section III, Question 2a is “yes,” justification if no provision for accommodation			

* Unavailable document does not necessarily mean there is a fair housing violation