PHA Plans

Streamlined 5-Year/Annual Version

U.S. Department of Housing and Urban Development
Office of Public and Indian Housing

OMB No. 2577-0226
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This information collection is authorized by Section 511 of the Quality Housing and Work Responsibility Act, which added a new section 5A to the U.S. Housing Act of 1937 that introduced 5-year and annual PHA Plans. The full PHA plan provides a ready source for interested parties to locate basic PHA policies, rules, and requirements concerning the PHA's operations, programs, and services, and informs HUD, families served by the PHA, and members of the public of the PHA's mission and strategies for serving the needs of low-income and very low-income families. This form allows eligible PHAs to make a streamlined annual Plan submission to HUD consistent with HUD's efforts to provide regulatory relief to certain PHAs. Public reporting burden for this information collection is estimated to average 11.7 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. HUD may not collect this information and respondents are not required to complete this form, unless it displays a currently valid OMB Control Number.

Privacy Act Notice. The United States Department of Housing and Urban Development, Federal Housing Administration, is authorized to solicit the information requested in this form by virtue of Title 12, U.S. Code, Section 1701 et seq., and regulations promulgated thereunder at Title 12, Code of Federal Regulations. Information in PHA plans is publicly available.

Streamlined 5-Year Plan for Fiscal Years 2005 - 2009
Streamlined Annual Plan for Fiscal Year 2005

NOTE: This PHA Plan template (HUD-50075-SA) is to be completed in accordance with instructions contained in previous Notices PIH 99-33 (HA), 99-51 (HA), 2000-22 (HA), 2000-36 (HA), 2000-43 (HA), 2001-4 (HA), 2001-26 (HA), 2003-7 (HA), and any related notices HUD may subsequently issue. Full reporting for each component listed in the streamlined Annual Plan submitted with the 5-year plan is required.

Streamlined Five-Year PHA Plan
Agency Identification

PHA Name: City of Cedar Rapids **PHA Number:** IA024

PHA Fiscal Year Beginning: (mm/yyyy) 07/2005

PHA Programs Administered:

☐ **Public Housing and Section 8** ☒ **Section 8 Only** ☐ **Public Housing Only**

Number of public housing units: Number of S8 units:1265 Number of public housing units:
Number of S8 units:

☐ PHA Consortia: (check box if submitting a joint PHA Plan and complete table)

Participating PHAs	PHA Code	Program(s) Included in the Consortium	Programs Not in the Consortium	# of Units Each Program
Participating PHA 1:				
Participating PHA 2:				
Participating PHA 3:				

Public Access to Information

Information regarding any activities outlined in this plan can be obtained by contacting: (select all that apply)

☒ Main administrative office of the PHA
☐ PHA development management offices
☐ PHA local offices

Display Locations For PHA Plans and Supporting Documents

The PHA Plans and attachments (if any) are available for public inspection at: (select all that apply)

☒ Main administrative office of the PHA
☐ PHA development management offices
☐ PHA local offices
☒ Main administrative office of the local government
☐ Main administrative office of the County government
☐ Main administrative office of the State government
☒ Public library
☐ PHA website
☐ Other (list below)

PHA Plan Supporting Documents are available for inspection at: (select all that apply)

☒ Main business office of the PHA
☐ PHA development management offices

☐ Other (list below)

Streamlined Five-Year PHA Plan

PHA FISCAL YEARS 2005- 2010

[24 CFR Part 903.12]

A. Mission

State the PHA's mission for serving the needs of low-income, very low income, and extremely low-income families in the PHA's jurisdiction. (select one of the choices below)

☒ The mission of the PHA is the same as that of the Department of Housing and Urban Development: To promote adequate and affordable housing, economic opportunity and a suitable living environment free from discrimination.

☐ The PHA's mission is: (state mission here)

B. Goals

The goals and objectives listed below are derived from HUD's strategic Goals and Objectives and those emphasized in recent legislation. PHAs may select any of these goals and objectives as their own, or identify other goals and/or objectives. Whether selecting the HUD-suggested objectives or their own, **PHAs ARE STRONGLY ENCOURAGED TO IDENTIFY QUANTIFIABLE MEASURES OF SUCCESS IN REACHING THEIR OBJECTIVES OVER THE COURSE OF THE 5 YEARS**. (Quantifiable measures would include targets such as: numbers of families served or PHAS scores achieved.) PHAs should identify these measures in the spaces to the right of or below the stated objectives.

HUD Strategic Goal: Increase the availability of decent, safe, and affordable housing.

☒ PHA Goal: Expand the supply of assisted housing
Objectives:
- ☐ Apply for additional rental vouchers:
- ☐ Reduce public housing vacancies:
- ☐ Leverage private or other public funds to create additional housing opportunities:
- ☐ Acquire or build units or developments
- ☒ Other (list below)

CRHS will utilize current funding and try to maintain 100% utilization

☒ PHA Goal: Improve the quality of assisted housing
Objectives:
- ☐ Improve public housing management: (PHAS score)
- ☒ Improve voucher management: (SEMAP score)
- ☒ Increase customer satisfaction:
- ☐ Concentrate on efforts to improve specific management functions: (list; e.g., public housing finance; voucher unit inspections)
- ☐ Renovate or modernize public housing units:
- ☐ Demolish or dispose of obsolete public housing:
- ☐ Provide replacement public housing:
- ☐ Provide replacement vouchers:

☐ Other: (list below)

☒ PHA Goal: Increase assisted housing choices
Objectives:
- ☐ Provide voucher mobility counseling:
- ☐ Conduct outreach efforts to potential voucher landlords
- ☐ Increase voucher payment standards
- ☐ Implement voucher homeownership program:
- ☐ Implement public housing or other homeownership programs:
- ☐ Implement public housing site-based waiting lists:
- ☐ Convert public housing to vouchers:
- ☒ Other: (list below)

Explore and implement a voucher homeownership program. Increase voucher payment standards if needed.

HUD Strategic Goal: Improve community quality of life and economic vitality

☐ PHA Goal: Provide an improved living environment
Objectives:
- ☐ Implement measures to deconcentrate poverty by bringing higher income public housing households into lower income developments:
- ☐ Implement measures to promote income mixing in public housing by assuring access for lower income families into higher income developments:
- ☐ Implement public housing security improvements:
- ☐ Designate developments or buildings for particular resident groups (elderly, persons with disabilities)
- ☐ Other: (list below)

HUD Strategic Goal: Promote self-sufficiency and asset development of families and individuals

☒ PHA Goal: Promote self-sufficiency and asset development of assisted households
Objectives:
- ☒ Increase the number and percentage of employed persons in assisted families:
- ☐ Provide or attract supportive services to improve assistance recipients' employability:
- ☐ Provide or attract supportive services to increase independence for the elderly or families with disabilities.
- ☐ Other: (list below)

HUD Strategic Goal: Ensure Equal Opportunity in Housing for all Americans

☒ PHA Goal: Ensure equal opportunity and affirmatively further fair housing
Objectives:

- ☒ Undertake affirmative measures to ensure access to assisted housing regardless of race, color, religion national origin, sex, familial status, and disability:
- ☐ Undertake affirmative measures to provide a suitable living environment for families living in assisted housing, regardless of race, color, religion national origin, sex, familial status, and disability:
- ☐ Undertake affirmative measures to ensure accessible housing to persons with all varieties of disabilities regardless of unit size required:
- ☐ Other: (list below)

Other PHA Goals and Objectives: (list below)

Research the possibility of providing project based vouchers for the chronically homelessness.

Streamlined Annual PHA Plan
PHA Fiscal Year 2005
[24 CFR Part 903.12(b)]

Table of Contents
Provide the following table of contents for the streamlined Annual Plan submitted with the Five-Year Plan, including all streamlined plan components, and additional requirements, together with the list of supporting documents available for public inspection.

A. ANNUAL STREAMLINED PHA PLAN COMPONENTS

☒ 1. Housing Needs
☒ 2. Financial Resources
☒ 3. Policies on Eligibility, Selection and Admissions
☒ 4. Rent Determination Policies
☐ 5. Capital Improvements Needs
☐ 6. Demolition and Disposition
☒ 7. Homeownership
☒ 8. Civil Rights Certifications (included with PHA Certifications of Compliance)
☒ 9. Additional Information
  a. PHA Progress on Meeting 5-Year Mission and Goals
  b. Criteria for Substantial Deviations and Significant Amendments
  c. Other Information Requested by HUD
    i. Resident Advisory Board Membership and Consultation Process
    ii. Resident Membership on the PHA Governing Board
    iii. PHA Statement of Consistency with Consolidated Plan
    iv. (Reserved)
☒ 10. Project-Based Voucher Program
☒ 11. Supporting Documents Available for Review
☐ 12. FY 20__ Capital Fund Program and Capital Fund Program Replacement Housing Factor, Annual Statement/Performance and Evaluation Report
☐ 13. Capital Fund Program 5-Year Action Plan
☐ 14. Other (List below, providing name for each item)

B. SEPARATE HARD COPY SUBMISSIONS TO LOCAL HUD FIELD OFFICE

Form HUD-50077, *PHA Certifications of Compliance with the PHA Plans and Related Regulations*: *Board Resolution to Accompany the Standard Annual, Standard Five-Year, and Streamlined Five-Year/Annual Plans*;
Certification by State or Local Official of PHA Plan Consistency with Consolidated Plan.
For PHAs APPLYING FOR CAPITAL FUND PROGRAM (CFP) GRANTS:
Form HUD-50070, *Certification for a Drug-Free Workplace*;
Form HUD-50071, *Certification of Payments to Influence Federal Transactions*;
Form SF-LLL & SF-LLLa, *Disclosure of Lobbying Activities.*

Executive Summary (optional)

[903.7(r)]. If desired, provide a brief overview of the contents of the streamlined 5-Year/Annual Plan.

1. Statement of Housing Needs [24 CFR Part 903.12 (b), 903.7(a)]

A. Housing Needs of Families on the Public Housing and Section 8 Tenant- Based Assistance Waiting Lists

State the housing needs of the families on the PHA's waiting list/s**. Complete one table for each type of PHA-wide waiting list administered by the PHA.** PHAs may provide separate tables for site-based or sub-jurisdictional public housing waiting lists at their option.

Housing Needs of Families on the PHA's Waiting Lists			
Waiting list type: (select one) ☒ Section 8 tenant-based assistance ☐ Public Housing ☐ Combined Section 8 and Public Housing ☐ Public Housing Site-Based or sub-jurisdictional waiting list (optional) If used, identify which development/subjurisdiction:			
	# of families	% of total families	Annual Turnover
Waiting list total	1823		345
Extremely low income <=30% AMI	1690	93%	
Very low income (>30% but <=50% AMI)	133	7.3%	
Low income (>50% but <80% AMI)	n/a	n/a	
Families with children	1039	57%	
Elderly families	42	2.3%	
Families with Disabilities	573	31%	
Race/ethnicity White	1132	62%	
Race/ethnicity Black	651	36%	
Race/ethnicity Asian	1	<1%	
Race/ethnicity Pacific Islander/Native Hawaiian American Indian	16 11	<1% <1%	
Characteristics by Bedroom Size (Public Housing Only)			
1BR			
2 BR			
3 BR			
4 BR			
5 BR			
5+ BR			

Housing Needs of Families on the PHA's Waiting Lists
Is the waiting list closed (select one)? ☒ No ☐ Yes If yes: How long has it been closed (# of months)? Does the PHA expect to reopen the list in the PHA Plan year? ☐ No ☐ Yes Does the PHA permit specific categories of families onto the waiting list, even if generally closed? ☐ No ☐ Yes

B. Strategy for Addressing Needs

Provide a brief description of the PHA's strategy for addressing the housing needs of families on the PHA's public housing and Section 8 waiting lists **IN THE UPCOMING YEAR**, and the Agency's reasons for choosing this strategy.

Due to limited Section 8 funding there may not be much reduction in the waiting list.

Strategies to monitor lease-up are done monthly to determine the number of applicants to issue a voucher.

Based on previous experience it will generally take two applicants to fill on opening.

Waiting list will be purged annually in order to keep the applicants information current and to maintain ones that are still interested in housing.

Length of time on voucher will be reduced from 120 days to 60 days in order to decrease the delay for someone finding housing for rental assistance. There is still a high vacancy rate in Cedar Rapids, so applicants are not experiencing problems in finding housing.

(1) Strategies

Need: Shortage of affordable housing for all eligible populations

Strategy 1. Maximize the number of affordable units available to the PHA within its current resources by:

Select all that apply

- ☐ Employ effective maintenance and management policies to minimize the number of public housing units off-line
- ☐ Reduce turnover time for vacated public housing units
- ☐ Reduce time to renovate public housing units
- ☐ Seek replacement of public housing units lost to the inventory through mixed finance development
- ☐ Seek replacement of public housing units lost to the inventory through section 8 replacement housing resources
- ☒ Maintain or increase section 8 lease-up rates by establishing payment standards that will enable families to rent throughout the jurisdiction
- ☒ Undertake measures to ensure access to affordable housing among families assisted by the PHA, regardless of unit size required
- ☒ Maintain or increase section 8 lease-up rates by marketing the program to owners, particularly those outside of areas of minority and poverty concentration
- ☒ Maintain or increase section 8 lease-up rates by effectively screening Section 8 applicants to increase owner acceptance of program

☒ Participate in the Consolidated Plan development process to ensure coordination with broader community strategies
☐ Other (list below)

Strategy 2: Increase the number of affordable housing units by:
Select all that apply

☒ Apply for additional section 8 units should they become available
☐ Leverage affordable housing resources in the community through the creation of mixed - finance housing
☐ Pursue housing resources other than public housing or Section 8 tenant-based assistance.
☐ Other: (list below)

Need: Specific Family Types: Families at or below 30% of median

Strategy 1: Target available assistance to families at or below 30 % of AMI
Select all that apply

☐ Exceed HUD federal targeting requirements for families at or below 30% of AMI in public housing
☒ Exceed HUD federal targeting requirements for families at or below 30% of AMI in tenant-based section 8 assistance
☐ Employ admissions preferences aimed at families with economic hardships
☐ Adopt rent policies to support and encourage work
☐ Other: (list below)

Need: Specific Family Types: Families at or below 50% of median

Strategy 1: Target available assistance to families at or below 50% of AMI
Select all that apply

☐ Employ admissions preferences aimed at families who are working
☐ Adopt rent policies to support and encourage work
☒ Other: (list below)

The CRHS waiting list is open to all applicants. Incomes are not verified until the applicant's name reaches the top of the waiting list.

Need: Specific Family Types: The Elderly

Strategy 1: Target available assistance to the elderly:
Select all that apply

☐ Seek designation of public housing for the elderly
☐ Apply for special-purpose vouchers targeted to the elderly, should they become available

☒ Other: (list below)

The CRHS waiting list is open to all applicants. Incomes are not verified until the applicant's name reaches the top of the waiting list.

Need: Specific Family Types: Families with Disabilities

Strategy 1: Target available assistance to Families with Disabilities:
Select all that apply

☐ Seek designation of public housing for families with disabilities
☐ Carry out the modifications needed in public housing based on the section 504 Needs Assessment for Public Housing
☐ Apply for special-purpose vouchers targeted to families with disabilities, should they become available
☐ Affirmatively market to local non-profit agencies that assist families with disabilities
☒ Other: (list below)

The CRHS works very closely with the County's program for the disabled and other organizations that work with disabled.

Need: Specific Family Types: Races or ethnicities with disproportionate housing needs

Strategy 1: Increase awareness of PHA resources among families of races and ethnicities with disproportionate needs:
Select if applicable

☐ Affirmatively market to races/ethnicities shown to have disproportionate housing needs
☐ Other: (list below)

Strategy 2: Conduct activities to affirmatively further fair housing
Select all that apply

☒ Counsel section 8 tenants as to location of units outside of areas of poverty or minority concentration and assist them to locate those units
☒ Market the section 8 program to owners outside of areas of poverty /minority concentrations
☐ Other: (list below)

Other Housing Needs & Strategies: (list needs and strategies below)

(2) Reasons for Selecting Strategies
Of the factors listed below, select all that influenced the PHA's selection of the strategies it will pursue:

☒ Funding constraints

- ☒ Staffing constraints
- ☐ Limited availability of sites for assisted housing
- ☒ Extent to which particular housing needs are met by other organizations in the community
- ☒ Evidence of housing needs as demonstrated in the Consolidated Plan and other information available to the PHA
- ☒ Influence of the housing market on PHA programs
- ☒ Community priorities regarding housing assistance
- ☐ Results of consultation with local or state government
- ☒ Results of consultation with residents and the Resident Advisory Board
- ☒ Results of consultation with advocacy groups
- ☐ Other: (list below)

2. Statement of Financial Resources

[24 CFR Part 903.12 (b), 903.7 (c)]

List on the following table the financial resources that are anticipated to be available to the PHA for the support of Federal public housing and tenant based Section 8 assistance programs administered by the PHA during the Plan year. Note: the table assumes that Federal public housing or tenant based Section 8 assistance grant funds are expended on eligible purposes; therefore, uses of these funds need not be stated. For other funds, indicate the use for those funds as one of the following categories: public housing operations, public housing capital improvements, public housing safety/security, public housing supportive services, Section 8 tenant-based assistance, Section 8 supportive services or other.

Financial Resources: Planned Sources and Uses		
Sources	**Planned $**	**Planned Uses**
1. **Federal Grants (FY 20__ grants)**		
a) Public Housing Operating Fund		
b) Public Housing Capital Fund		
c) HOPE VI Revitalization		
d) HOPE VI Demolition		
e) Annual Contributions for Section 8 Tenant-Based Assistance	$5,902,302.00	
f) Resident Opportunity and Self-Sufficiency Grants	$94,910	

Financial Resources: Planned Sources and Uses		
Sources	**Planned $**	**Planned Uses**
g) Community Development Block Grant	$1,475,859	
h) HOME	$517,201	
Other Federal Grants (list below)		
2. Prior Year Federal Grants (unobligated funds only) (list below)		
3. Public Housing Dwelling Rental Income		
4. Other income (list below)		
4. Non-federal sources (list below)		
Total resources	$7,990,272.00	

3. PHA Policies Governing Eligibility, Selection, and Admissions

[24 CFR Part 903.12 (b), 903.7 (b)]

A. Public Housing

Exemptions: PHAs that do not administer public housing are not required to complete subcomponent 3A.

(1) Eligibility

a. When does the PHA verify eligibility for admission to public housing? (select all that apply)

☐ When families are within a certain number of being offered a unit: (state number)
☐ When families are within a certain time of being offered a unit: (state time)
☐ Other: (describe)

b. Which non-income (screening) factors does the PHA use to establish eligibility for admission to public housing (select all that apply)?

☐ Criminal or Drug-related activity
☐ Rental history
☐ Housekeeping
☐ Other (describe)

c. ☐ Yes ☐ No: Does the PHA request criminal records from local law enforcement agencies for screening purposes?

d. ☐ Yes ☐ No: Does the PHA request criminal records from State law enforcement agencies for screening purposes?

e. ☐ Yes ☐ No: Does the PHA access FBI criminal records from the FBI for screening purposes? (either directly or through an NCIC-authorized source)

(2)Waiting List Organization

a. Which methods does the PHA plan to use to organize its public housing waiting list (select all that apply)

☐ Community-wide list
☐ Sub-jurisdictional lists
☐ Site-based waiting lists
☐ Other (describe)

b. Where may interested persons apply for admission to public housing?

☐ PHA main administrative office
☐ PHA development site management office
☐ Other (list below)

c. Site-Based Waiting Lists-Previous Year

1. Has the PHA operated one or more site-based waiting lists in the previous year? If yes, complete the following table; if not skip to d.

Site-Based Waiting Lists				
Development Information: (Name, number, location)	**Date Initiated**	**Initial mix of Racial, Ethnic or Disability Demographics**	**Current mix of Racial, Ethnic or Disability Demographics since Initiation of SBWL**	**Percent change between initial and current mix of Racial, Ethnic, or Disability demographics**

2. What is the number of site based waiting list developments to which families may apply at one time? ___

3. How many unit offers may an applicant turn down before being removed from the site-

based waiting list? ___

4. ☐ Yes ☐ No: Is the PHA the subject of any pending fair housing complaint by HUD or any court order or settlement agreement? If yes, describe the order, agreement or complaint and describe how use of a site-based waiting list will not violate or be inconsistent with the order, agreement or complaint below:

d. Site-Based Waiting Lists – Coming Year

If the PHA plans to operate one or more site-based waiting lists in the coming year, answer each of the following questions; if not, skip to subsection **(3) Assignment**

1. How many site-based waiting lists will the PHA operate in the coming year?

2. ☐ Yes ☐ No: Are any or all of the PHA's site-based waiting lists new for the upcoming year (that is, they are not part of a previously-HUD-approved site based waiting list plan)?
If yes, how many lists?

3. ☐ Yes ☐ No: May families be on more than one list simultaneously
If yes, how many lists?

4. Where can interested persons obtain more information about and sign up to be on the site-based waiting lists (select all that apply)?
☐ PHA main administrative office
☐ All PHA development management offices
☐ Management offices at developments with site-based waiting lists
☐ At the development to which they would like to apply
☐ Other (list below)

(3) Assignment

a. How many vacant unit choices are applicants ordinarily given before they fall to the bottom of or are removed from the waiting list? (select one)
☐ One
☐ Two
☐ Three or More

b. ☐ Yes ☐ No: Is this policy consistent across all waiting list types?

c. If answer to b is no, list variations for any other than the primary public housing waiting list/s for the PHA:

(4) Admissions Preferences

a. Income targeting:

☐ Yes ☐ No: Does the PHA plan to exceed the federal targeting requirements by targeting more than 40% of all new admissions to public housing to families at or below 30% of median area income?

b. Transfer policies:
In what circumstances will transfers take precedence over new admissions? (list below)
☐ Emergencies
☐ Over-housed
☐ Under-housed
☐ Medical justification
☐ Administrative reasons determined by the PHA (e.g., to permit modernization work)
☐ Resident choice: (state circumstances below)
☐ Other: (list below)

c. Preferences
1. ☐ Yes ☐ No: Has the PHA established preferences for admission to public housing (other than date and time of application)? (If "no" is selected, skip to subsection **(5) Occupancy**)

2. Which of the following admission preferences does the PHA plan to employ in the coming year? (select all that apply from either former Federal preferences or other preferences)

Former Federal preferences:
☐ Involuntary Displacement (Disaster, Government Action, Action of Housing Owner, Inaccessibility, Property Disposition)
☐ Victims of domestic violence
☐ Substandard housing
☐ Homelessness
☐ High rent burden (rent is > 50 percent of income)

Other preferences: (select below)
☐ Working families and those unable to work because of age or disability
☐ Veterans and veterans' families
☐ Residents who live and/or work in the jurisdiction
☐ Those enrolled currently in educational, training, or upward mobility programs
☐ Households that contribute to meeting income goals (broad range of incomes)
☐ Households that contribute to meeting income requirements (targeting)
☐ Those previously enrolled in educational, training, or upward mobility programs
☐ Victims of reprisals or hate crimes
☐ Other preference(s) (list below)

3. If the PHA will employ admissions preferences, please prioritize by placing a "1" in the space that represents your first priority, a "2" in the box representing your second priority, and so on. If you give equal weight to one or more of these choices (either through an absolute hierarchy or through a point system), place the same number next to each. That means you can use "1" more

than once, "2" more than once, etc.

☐ Date and Time

Former Federal preferences:
☐ Involuntary Displacement (Disaster, Government Action, Action of Housing Owner, Inaccessibility, Property Disposition)
☐ Victims of domestic violence
☐ Substandard housing
☐ Homelessness
☐ High rent burden

Other preferences (select all that apply)
☐ Working families and those unable to work because of age or disability
☐ Veterans and veterans' families
☐ Residents who live and/or work in the jurisdiction
☐ Those enrolled currently in educational, training, or upward mobility programs
☐ Households that contribute to meeting income goals (broad range of incomes)
☐ Households that contribute to meeting income requirements (targeting)
☐ Those previously enrolled in educational, training, or upward mobility programs
☐ Victims of reprisals or hate crimes
☐ Other preference(s) (list below)

4. Relationship of preferences to income targeting requirements:
☐ The PHA applies preferences within income tiers
☐ Not applicable: the pool of applicant families ensures that the PHA will meet income targeting requirements

(5) Occupancy

a. What reference materials can applicants and residents use to obtain information about the rules of occupancy of public housing (select all that apply)
☐ The PHA-resident lease
☐ The PHA's Admissions and (Continued) Occupancy policy
☐ PHA briefing seminars or written materials
☐ Other source (list)

b. How often must residents notify the PHA of changes in family composition? (select all that apply)
☐ At an annual reexamination and lease renewal
☐ Any time family composition changes
☐ At family request for revision
☐ Other (list)

(6) Deconcentration and Income Mixing

a. ☐ Yes ☐ No: Does the PHA have any general occupancy (family) public housing developments covered by the deconcentration rule? If no, this section is complete. If yes, continue to the next question.

b. ☐ Yes ☐ No: Do any of these covered developments have average incomes above or below 85% to 115% of the average incomes of all such developments? If no, this section is complete. If yes, list these developments on the following table:

Deconcentration Policy for Covered Developments			
Development Name	**Number of Units**	**Explanation (if any) [see step 4 at §903.2(c)(1)(iv)]**	**Deconcentration policy (if no explanation) [see step 5 at §903.2(c)(1)(v)]**

B. Section 8

Exemptions: PHAs that do not administer section 8 are not required to complete sub-component 3B.
Unless otherwise specified, all questions in this section apply only to the tenant-based section 8 assistance program (vouchers, and until completely merged into the voucher program, certificates).

(1) Eligibility

a. What is the extent of screening conducted by the PHA? (select all that apply)
☒ Criminal or drug-related activity only to the extent required by law or regulation
☐ Criminal and drug-related activity, more extensively than required by law or regulation
☐ More general screening than criminal and drug-related activity (list factors):
☒ Other (list below)

Computer generated list of tenants previously on Section 8 throughout the United States is checked.

b. ☒ Yes ☐ No: Does the PHA request criminal records from local law enforcement agencies for screening purposes?

c. ☐ Yes ☒ No: Does the PHA request criminal records from State law enforcement agencies for screening purposes?

d. ☐ Yes ☒ No: Does the PHA access FBI criminal records from the FBI for screening purposes? (either directly or through an NCIC-authorized source)

e. Indicate what kinds of information you share with prospective landlords? (select all that apply)

☒ Criminal or drug-related activity
☒ Other (describe below)

Rental history of previous Section 8 participants.

(2) Waiting List Organization

a. With which of the following program waiting lists is the section 8 tenant-based assistance waiting list merged? (select all that apply)
☒ None
☐ Federal public housing
☐ Federal moderate rehabilitation
☐ Federal project-based certificate program
☐ Other federal or local program (list below)

b. Where may interested persons apply for admission to section 8 tenant-based assistance? (select all that apply)
☒ PHA main administrative office
☒ Other (list below)

Applications are distributed to Dept. of Human Services, Homeless Shelters, and various other agencies, including faith based organizations. Interested persons may request an application be mailed to them or one can be downloaded from our website.

(3) Search Time

a. ☒ Yes ☐ No: Does the PHA give extensions on standard 60-day period to search for a unit?
If yes, state circumstances below:

Currently voucher holders are given 120 days to search for housing and extensions beyond this for extenuating circumstances. The 120 days may be reduced to 60 days in order for there to be a greater turnover of eligible families because an inactive voucher holder prevents other families from searching.

(4) Admissions Preferences

a. Income targeting

☐ Yes ☒ No: Does the PHA plan to exceed the federal targeting requirements by targeting more than 75% of all new admissions to the section 8 program to families at or below 30% of median area income?

b. Preferences
1. ☒ Yes ☐ No: Has the PHA established preferences for admission to section 8 tenant-based assistance? (other than date and time of application) (if no, skip to

subcomponent **(5) Special purpose section 8 assistance programs**)

2. Which of the following admission preferences does the PHA plan to employ in the coming year? (select all that apply from either former Federal preferences or other preferences)

Former Federal preferences
☒ Involuntary Displacement (Disaster, Government Action, Action of Housing Owner, Inaccessibility, Property Disposition)
☐ Victims of domestic violence
☐ Substandard housing
☐ Homelessness
☐ High rent burden (rent is > 50 percent of income)

Other preferences (select all that apply)
☐ Working families and those unable to work because of age or disability
☐ Veterans and veterans' families
☐ Residents who live and/or work in your jurisdiction
☐ Those enrolled currently in educational, training, or upward mobility programs
☐ Households that contribute to meeting income goals (broad range of incomes)
☐ Households that contribute to meeting income requirements (targeting)
☐ Those previously enrolled in educational, training, or upward mobility programs
☐ Victims of reprisals or hate crimes
☒ Other preference(s) (list below)

Certificate Project Based Program – 48 units at Edgewood Apartments or any other project based units approved by HUD and applicants with incomes below 30%.

3. If the PHA will employ admissions preferences, please prioritize by placing a "1" in the space that represents your first priority, a "2" in the box representing your second priority, and so on. If you give equal weight to one or more of these choices (either through an absolute hierarchy or through a point system), place the same number next to each. That means you can use "1" more than once, "2" more than once, etc.

1 Date and Time

Former Federal preferences:
1 Involuntary Displacement (Disaster, Government Action, Action of Housing Owner, Inaccessibility, Property Disposition)
☐ Victims of domestic violence
☐ Substandard housing
☐ Homelessness
☐ High rent burden

Other preferences (select all that apply)
☐ Working families and those unable to work because of age or disability

☐ Veterans and veterans' families
☐ Residents who live and/or work in your jurisdiction
☐ Those enrolled currently in educational, training, or upward mobility programs
☐ Households that contribute to meeting income goals (broad range of incomes)
☐ Households that contribute to meeting income requirements (targeting)
☐ Those previously enrolled in educational, training, or upward mobility programs
☐ Victims of reprisals or hate crimes
☒ Other preference(s) (list below)

Project Based and applicants with incomes below 30%.

4. Among applicants on the waiting list with equal preference status, how are applicants selected? (select one)
☒ Date and time of application
☐ Drawing (lottery) or other random choice technique

5. If the PHA plans to employ preferences for "residents who live and/or work in the jurisdiction" (select one)
☐ This preference has previously been reviewed and approved by HUD
☐ The PHA requests approval for this preference through this PHA Plan

6. Relationship of preferences to income targeting requirements: (select one)
☐ The PHA applies preferences within income tiers
☒ Not applicable: the pool of applicant families ensures that the PHA will meet income targeting requirements

(5) Special Purpose Section 8 Assistance Programs

a. In which documents or other reference materials are the policies governing eligibility, selection, and admissions to any special-purpose section 8 program administered by the PHA contained? (select all that apply)
☒ The Section 8 Administrative Plan
☐ Briefing sessions and written materials
☐ Other (list below)

b. How does the PHA announce the availability of any special-purpose section 8 programs to the public?
☒ Through published notices
☒ Other (list below)

Meetings with other interested parties.

4. PHA Rent Determination Policies

[24 CFR Part 903.12(b), 903.7(d)]

A. Public Housing

Exemptions: PHAs that do not administer public housing are not required to complete sub-component 4A.

(1) Income Based Rent Policies

Describe the PHA's income based rent setting policy/ies for public housing using, including discretionary (that is, not required by statute or regulation) income disregards and exclusions, in the appropriate spaces below.

a. Use of discretionary policies: (select one of the following two)

☐ The PHA will not employ any discretionary rent-setting policies for income-based rent in public housing. Income-based rents are set at the higher of 30% of adjusted monthly income, 10% of unadjusted monthly income, the welfare rent, or minimum rent (less HUD mandatory deductions and exclusions). (If selected, skip to sub-component (2))

☐ The PHA employs discretionary policies for determining income-based rent (If selected, continue to question b.)

b. Minimum Rent

1. What amount best reflects the PHA's minimum rent? (select one)

☐ $0
☐ $1-$25
☐ $26-$50

2. ☐ Yes ☐ No: Has the PHA adopted any discretionary minimum rent hardship exemption policies?

3. If yes to question 2, list these policies below**:**

c. Rents set at less than 30% of adjusted income

1. ☐ Yes ☐ No: Does the PHA plan to charge rents at a fixed amount or percentage less than 30% of adjusted income?

2. If yes to above, list the amounts or percentages charged and the circumstances under which these will be used below:

d. Which of the discretionary (optional) deductions and/or exclusions policies does the PHA plan to employ (select all that apply)

☐ For the earned income of a previously unemployed household member
☐ For increases in earned income
☐ Fixed amount (other than general rent-setting policy)
If yes, state amount/s and circumstances below:

☐ Fixed percentage (other than general rent-setting policy)
If yes, state percentage/s and circumstances below:

☐ For household heads
☐ For other family members
☐ For transportation expenses
☐ For the non-reimbursed medical expenses of non-disabled or non-elderly families
☐ Other (describe below)

e. Ceiling rents

1. Do you have ceiling rents? (rents set at a level lower than 30% of adjusted income) (select one)

☐ Yes for all developments
☐ Yes but only for some developments
☐ No

2. For which kinds of developments are ceiling rents in place? (select all that apply)

☐ For all developments
☐ For all general occupancy developments (not elderly or disabled or elderly only)
☐ For specified general occupancy developments
☐ For certain parts of developments; e.g., the high-rise portion
☐ For certain size units; e.g., larger bedroom sizes
☐ Other (list below)

3. Select the space or spaces that best describe how you arrive at ceiling rents (select all that apply)

☐ Market comparability study
☐ Fair market rents (FMR)
☐ 95th percentile rents
☐ 75 percent of operating costs
☐ 100 percent of operating costs for general occupancy (family) developments
☐ Operating costs plus debt service
☐ The “rental value” of the unit
☐ Other (list below)

f. Rent re-determinations:

1. Between income reexaminations, how often must tenants report changes in income or family composition to the PHA such that the changes result in an adjustment to rent? (select all that apply)

☐ Never
☐ At family option
☐ Any time the family experiences an income increase
☐ Any time a family experiences an income increase above a threshold amount or percentage: (if selected, specify threshold)_____
☐ Other (list below)

g. ☐ Yes ☐ No: Does the PHA plan to implement individual savings accounts for residents (ISAs) as an alternative to the required 12 month disallowance of earned income and phasing in of rent increases in the next year?

(2) Flat Rents

a. In setting the market-based flat rents, what sources of information did the PHA use to establish comparability? (select all that apply.)
☐ The section 8 rent reasonableness study of comparable housing
☐ Survey of rents listed in local newspaper
☐ Survey of similar unassisted units in the neighborhood
☐ Other (list/describe below)

B. Section 8 Tenant-Based Assistance

Exemptions: PHAs that do not administer Section 8 tenant-based assistance are not required to complete sub-component 4B. **Unless otherwise specified, all questions in this section apply only to the tenant-based section 8 assistance program (vouchers, and until completely merged into the voucher program, certificates).**

(1) Payment Standards

Describe the voucher payment standards and policies**.**

a. What is the PHA's payment standard? (select the category that best describes your standard)
☒ At or above 90% but below100% of FMR
☐ 100% of FMR
☐ Above 100% but at or below 110% of FMR
☐ Above 110% of FMR (if HUD approved; describe circumstances below)

b. If the payment standard is lower than FMR, why has the PHA selected this standard? (select all that apply)
☐ FMRs are adequate to ensure success among assisted families in the PHA's segment of the FMR area
☐ The PHA has chosen to serve additional families by lowering the payment standard
☐ Reflects market or submarket
☒ Other (list below)

To keep the per unit cost below HUD's allowable per unit cost. We review our payment standards annually and determine if they need adjusted or not based on the market, vacancy rate, and per unit cost.

c. If the payment standard is higher than FMR, why has the PHA chosen this level? (select all that apply)

☐ FMRs are not adequate to ensure success among assisted families in the PHA's segment of the FMR area
☐ Reflects market or submarket
☐ To increase housing options for families
☐ Other (list below)

d. How often are payment standards reevaluated for adequacy? (select one)

☒ Annually
☐ Other (list below)

e. What factors will the PHA consider in its assessment of the adequacy of its payment standard? (select all that apply)

☒ Success rates of assisted families
☐ Rent burdens of assisted families
☒ Other (list below)

Vacancy rate in community and per unit cost.

(2) Minimum Rent

a. What amount best reflects the PHA's minimum rent? (select one)

☐ $0
☐ $1-$25
☒ $26-$50

b. ☒ Yes ☐ No: Has the PHA adopted any discretionary minimum rent hardship exemption policies? (if yes, list below)

Any family unable to pay the Minimum Rent of $50.00 due to extenuating circumstances listed below may request in writing from the HA a waiver on this. Extenuating circumstances may include the following:

Hospitalization
Decrease of income
Extended illness
Other circumstances as determined by HA

Family must request waiver in writing and written verification must be obtained to determine circumstance. If HA determines waiver is justified, the HA will adjust the family's rent share and
pay the additional HAP amount to the landlord effective the month waiver was requested.

5. Capital Improvement Needs

[24 CFR Part 903.12(b), 903.7 (g)]

Exemptions from Component 5: Section 8 only PHAs are not required to complete this component and may skip to Component 6.

A. Capital Fund Activities

Exemptions from sub-component 5A: PHAs that will not participate in the Capital Fund Program may skip to component 5B. All other PHAs must complete 5A as instructed.

(1) Capital Fund Program

a. ☐ Yes ☐ No Does the PHA plan to participate in the Capital Fund Program in the upcoming year? If yes, complete items 12 and 13 of this template (Capital Fund Program tables). If no, skip to B.

b. ☐ Yes ☐ No: Does the PHA propose to use any portion of its CFP funds to repay debt incurred to finance capital improvements? If so, the PHA must identify in its annual and 5-year capital plans the development(s) where such improvements will be made and show both how the proceeds of the financing will be used and the amount of the annual payments required to service the debt. (Note that separate HUD approval is required for such financing activities.).

B. HOPE VI and Public Housing Development and Replacement Activities (Non-Capital Fund)

Applicability of sub-component 5B: All PHAs administering public housing. Identify any approved HOPE VI and/or public housing development or replacement activities not described in the Capital Fund Program Annual Statement.

(1) Hope VI Revitalization

a. ☐ Yes ☐ No: Has the PHA received a HOPE VI revitalization grant? (if no, skip to next component; if yes, provide responses to questions on chart below for each grant, copying and completing as many times as necessary)

b. Status of HOPE VI revitalization grant (complete one set of questions for each grant)
Development name:
Development (project) number:
Status of grant: (select the statement that best describes the current status)
☐ Revitalization Plan under development
☐ Revitalization Plan submitted, pending approval
☐ Revitalization Plan approved

☐ Activities pursuant to an approved Revitalization Plan underway

c. ☐ Yes ☐ No: Does the PHA plan to apply for a HOPE VI Revitalization grant in the Plan year? If yes, list development name/s below:

d. ☐ Yes ☐ No: Will the PHA be engaging in any mixed-finance development activities for public housing in the Plan year? If yes, list developments or activities below:

e. ☐ Yes ☐ No: Will the PHA be conducting any other public housing development or replacement activities not discussed in the Capital Fund Program Annual Statement? If yes, list developments or activities below:

6. Demolition and Disposition

[24 CFR Part 903.12(b), 903.7 (h)]

Applicability of component 6: Section 8 only PHAs are not required to complete this section.

a. ☐ Yes ☐ No: Does the PHA plan to conduct any demolition or disposition activities (pursuant to section 18 or 24 (Hope VI)of the U.S. Housing Act of 1937 (42 U.S.C. 1437p) or Section 202/Section 33 (Mandatory Conversion) in the plan Fiscal Year? (If "No", skip to component 7; if "yes", complete one activity description for each development on the following chart.)

Demolition/Disposition Activity Description
1a. Development name: 1b. Development (project) number:
2. Activity type: Demolition ☐ Disposition ☐
3. Application status (select one) Approved ☐ Submitted, pending approval ☐ Planned application ☐
4. Date application approved, submitted, or planned for submission: (DD/MM/YY)
5. Number of units affected: 6. Coverage of action (select one) ☐ Part of the development ☐ Total development
7. Timeline for activity: a. Actual or projected start date of activity: b. Projected end date of activity:

7. Section 8 Tenant Based Assistance--Section 8(y) Homeownership Program

[24 CFR Part 903.12(b), 903.7(k)(1)(i)]

(1) ☒ Yes ☐ No: Does the PHA plan to administer a Section 8 Homeownership program pursuant to Section 8(y) of the U.S.H.A. of 1937, as implemented by 24 CFR part 982 ? (If "No", skip to the next component; if "yes", complete each program description below (copy and complete questions for each program identified.)

(2) Program Description

a. Size of Program
☐ Yes ☒ No: Will the PHA limit the number of families participating in the Section 8 homeownership option?

b. PHA established eligibility criteria
☒ Yes ☐ No: Will the PHA's program have eligibility criteria for participation in its Section 8 Homeownership Option program in addition to HUD criteria? If yes, list criteria below:

Unknown at this time. Still in the process of writing administrative plan.

c. What actions will the PHA undertake to implement the program this year (list)?

The CRHS will develop a homeownership administrative plan, establish partnerships, and market program to eligible participants.

(3) Capacity of the PHA to Administer a Section 8 Homeownership Program

The PHA has demonstrated its capacity to administer the program by (select all that apply):
a. ☒ Establishing a minimum homeowner downpayment requirement of at least 3 percent of purchase price and requiring that at least 1 percent of the purchase price comes from the family's resources.
b. ☒ Requiring that financing for purchase of a home under its Section 8 homeownership will be provided, insured or guaranteed by the state or Federal government; comply with secondary mortgage market underwriting requirements; or comply with generally accepted private sector underwriting standards.
c. ☒ Partnering with a qualified agency or agencies to administer the program (list name(s) and years of experience below).

The CRHS has already partnered with MidAmerica Housing Partnership MAHP) in providing homeownership counseling to our participants seeking homeownership. MAHP also provides budget counseling for our participants. MAHP has been providing these services for several years to the public. Other potential partners will be lenders, consumer credit counseling agencies, realtors, Iowa Finance Authority, and Hawkeye Area Community Action Program.

d. ☒ Demonstrating that it has other relevant experience (list experience below).

CRHS has previously administered a first-time homebuyer down payment assistance program through Community Development Block Grant and HOME programs.

8. Civil Rights Certifications

[24 CFR Part 903.12 (b), 903.7 (o)]

Civil rights certifications are included in the *PHA Plan Certifications of Compliance with the PHA Plans and Related Regulations*: *Board Resolution to Accompany the Standard Annual, Standard Five-Year, and Streamlined Five-Year/Annual Plans*, which is submitted to the Field Office in hard copy—see Table of Contents.

9. Additional Information

[24 CFR Part 903.12 (b), 903.7 (r)]

A. PHA Progress in Meeting the Mission and Goals Described in the 5-Year Plan

(*Provide a statement of the PHA's progress against the goals and objectives established in the previous 5-Year Plan for the period FY 2000 - 2004*

1. The last two years we reached 98-99% utilizations.
2. We have been rated as a "High Performer" on our SEMAP score the last two years.
3. Landlord outreach has provided more housing opportunities to Section 8 families due to a higher than normal vacancy rate the last three years.
4. The Family Self-Sufficiency program exceeds the number of families required by HUD and escrow deposits have increased. Several families have participated in homeownership..

B. Criteria for Substantial Deviations and Significant Amendments

(1) Amendment and Deviation Definitions

24 CFR Part 903.7(r)

PHAs are required to define and adopt their own standards of substantial deviation from the 5-year Plan and Significant Amendment to the Annual Plan. The definition of significant amendment is important because it defines when the PHA will subject a change to the policies or activities described in the Annual Plan to full public hearing and HUD review before implementation.

a. Substantial Deviation from the 5-Year Plan

b. Significant Amendment or Modification to the Annual Plan

Definition of "Substantial Deviation" and "Significant Amendment or Modification":

A. Changes to rent or admission policies or organization of waiting list.
B. Any changes to Administrative Plan except ones mandated by HUD.

C. Other Information

[24 CFR Part 903.13, 903.15]

(1) Resident Advisory Board Recommendations

a. ☐ Yes ☒ No: Did the PHA receive any comments on the PHA Plan from the Resident Advisory Board/s?
If yes, provide the comments below:

There were no comments on the Plan, but at the end of the meeting general comments were made on funding cuts and paying more rent.

b. In what manner did the PHA address those comments? (select all that apply)
☐ Considered comments, but determined that no changes to the PHA Plan were necessary.
☐ The PHA changed portions of the PHA Plan in response to comments
List changes below:

☐ Other: (list below)

(2) Resident Membership on PHA Governing Board

The governing board of each PHA is required to have at least one member who is directly assisted by the PHA, unless the PHA meets certain exemption criteria. Regulations governing the resident board member are found at 24 CFR Part 964, Subpart E.

a. Does the PHA governing board include at least one member who is directly assisted by the PHA this year?

☒ Yes ☐ No:

If yes, complete the following:

Name of Resident Member of the PHA Governing Board: Brenda Butterfield and LaCrissha Whiteside

Method of Selection:
☒ Appointment
The term of appointment is (include the date term expires): 6/30/06
☒ Election by Residents (if checked, complete next section--Description of Resident Election Process)

Description of Resident Election Process

Nomination of candidates for place on the ballot: (select all that apply)

☐ Candidates were nominated by resident and assisted family organizations
☐ Candidates could be nominated by any adult recipient of PHA assistance
☐ Self-nomination: Candidates registered with the PHA and requested a place on ballot
☒ Other: (describe)

The above two residents volunteered to be on the Board and the members in attendance elected them to participate on the Board.

Eligible candidates: (select one)

☒ Any recipient of PHA assistance
☐ Any head of household receiving PHA assistance
☐ Any adult recipient of PHA assistance
☐ Any adult member of a resident or assisted family organization
☐ Other (list)

Eligible voters: (select all that apply)

☒ All adult recipients of PHA assistance (public housing and section 8 tenant-based assistance)
☐ Representatives of all PHA resident and assisted family organizations
☐ Other (list)

b. If the PHA governing board does not have at least one member who is directly assisted by the PHA, why not?

☐ The PHA is located in a State that requires the members of a governing board to be salaried and serve on a full time basis
☐ The PHA has less than 300 public housing units, has provided reasonable notice to the resident advisory board of the opportunity to serve on the governing board, and has not been notified by any resident of their interest to participate in the Board.
☐ Other (explain):

Date of next term expiration of a governing board member: 6/30/06

Name and title of appointing official(s) for governing board (indicate appointing official for the next available position): Paul Pate, Mayor of Cedar Rapids

(3) PHA Statement of Consistency with the Consolidated Plan

[24 CFR Part 903.15]

For each applicable Consolidated Plan, make the following statement (copy questions as many times as necessary).

Consolidated Plan jurisdiction: (provide name here) City of Cedar Rapids, Consolidated Plan, Five-year Strategy, July 1, 2000-June 30, 2005.

a. The PHA has taken the following steps to ensure consistency of this PHA Plan with the Consolidated Plan for the jurisdiction: (select all that apply):

☒ The PHA has based its statement of needs of families on its waiting list on the needs expressed in the Consolidated Plan/s.
☒ The PHA has participated in any consultation process organized and offered by the Consolidated Plan agency in the development of the Consolidated Plan.
☒ The PHA has consulted with the Consolidated Plan agency during the development of this PHA Plan.
☒ Activities to be undertaken by the PHA in the coming year are consistent with the initiatives contained in the Consolidated Plan. (list below)
☐ Other: (list below)

b. The Consolidated Plan of the jurisdiction supports the PHA Plan with the following actions and commitments: (describe below) The consolidated Plan finds that very low-income renter households are the largest single population among those with housing need. The Consolidated Plan also finds that the stock of housing in Cedar Rapids is adequate in size and quantity to meet the needs of the population. This means that the housing affordability problems of the community stem from the presence of poor households unable to afford housing at any price. In these market conditions, Section 8 rental assistance is the best means to resolve the housing affordability problems of the very low-income renter households.

(4) (Reserved)

Use this section to provide any additional information requested by HUD.

10. Project-Based Voucher Program

a. ☒ Yes ☐ No: Does the PHA plan to "project-base" any tenant-based Section 8 vouchers in the coming year? If yes, answer the following questions.

b. ☒ Yes ☐ No: Are there circumstances indicating that the project basing of the units, rather than tenant-basing of the same amount of assistance is an appropriate option?

If yes, check which circumstances apply:
☐ Low utilization rate for vouchers due to lack of suitable rental units
☐ Access to neighborhoods outside of high poverty areas
☒ Other (describe below:)

A Community Housing Organization has received HOME funding to provide permanent housing for the chronically homelessness. For the project to be feasible project base vouchers will be

necessary.

c. Indicate the number of units and general location of units (e.g. eligible census tracts or smaller areas within eligible census tracts):

Under 10 units for chronically homelessness. Location has not been determined – maybe new construction or acquisition/rehab.

11. List of Supporting Documents Available for Review for Streamlined Five-Year/ Annual PHA Plans

PHAs are to indicate which documents are available for public review by placing a mark in the "Applicable & On Display" column in the appropriate rows. All listed documents must be on display if applicable to the program activities conducted by the PHA.

List of Supporting Documents Available for Review		
Applicable & On Display	**Supporting Document**	**Related Plan Component**
X	*PHA Certifications of Compliance with the PHA Plans and Related Regulations and Board Resolution to Accompany the Standard Annual, Standard Five-Year, and Streamlined Five-Year/Annual Plans.*	Standard 5 Year and Annual Plans; streamlined 5 Year Plans
X	State/Local Government Certification of Consistency with the Consolidated Plan.	5 Year Plans
X	Fair Housing Documentation Supporting Fair Housing Certifications: Records reflecting that the PHA has examined its programs or proposed programs, identified any impediments to fair housing choice in those programs, addressed or is addressing those impediments in a reasonable fashion in view of the resources available, and worked or is working with local jurisdictions to implement any of the jurisdictions' initiatives to affirmatively further fair housing that require the PHA's involvement.	5 Year and Annual Plans
X	Housing Needs Statement of the Consolidated Plan for the jurisdiction(s) in which the PHA is located and any additional backup data to support statement of housing needs for families on the PHA's public housing and Section 8 tenant-based waiting lists.	Annual Plan: Housing Needs
	Most recent board-approved operating budget for the public housing program	Annual Plan:

List of Supporting Documents Available for Review		
Applicable & On Display	**Supporting Document**	**Related Plan Component**
		Financial Resources
	Public Housing Admissions and (Continued) Occupancy Policy (A&O/ACOP), which includes the Tenant Selection and Assignment Plan [TSAP] and the Site-Based Waiting List Procedure.	Annual Plan: Eligibility, Selection, and Admissions Policies
	Any policy governing occupancy of Police Officers and Over-Income Tenants in Public Housing. ☐ Check here if included in the public housing A&O Policy.	Annual Plan: Eligibility, Selection, and Admissions Policies
X	Section 8 Administrative Plan	Annual Plan: Eligibility, Selection, and Admissions Policies
	Public housing rent determination policies, including the method for setting public housing flat rents. ☐ Check here if included in the public housing A & O Policy.	Annual Plan: Rent Determination
	Schedule of flat rents offered at each public housing development. ☐ Check here if included in the public housing A & O Policy.	Annual Plan: Rent Determination
X	Section 8 rent determination (payment standard) policies (if included in plan, not necessary as a supporting document) and written analysis of Section 8 payment standard policies. ☐ Check here if included in Section 8 Administrative Plan.	Annual Plan: Rent Determination
	Public housing management and maintenance policy documents, including policies for the prevention or eradication of pest infestation (including cockroach infestation).	Annual Plan: Operations and Maintenance
	Results of latest Public Housing Assessment System (PHAS) Assessment (or other applicable assessment).	Annual Plan: Management and Operations
	Follow-up Plan to Results of the PHAS Resident Satisfaction Survey (if necessary)	Annual Plan: Operations and Maintenance and Community Service & Self-Sufficiency
X	Results of latest Section 8 Management Assessment System (SEMAP)	Annual Plan: Management and Operations
	Any policies governing any Section 8 special housing types ☐ check here if included in Section 8 Administrative Plan	Annual Plan: Operations and Maintenance
	Consortium agreement(s).	Annual Plan: Agency Identification and Operations/ Management
	Public housing grievance procedures ☐ Check here if included in the public housing A & O Policy.	Annual Plan: Grievance Procedures
X	Section 8 informal review and hearing procedures. ☐ Check here if included in Section 8 Administrative Plan.	Annual Plan: Grievance Procedures
	The Capital Fund/Comprehensive Grant Program Annual Statement /Performance and Evaluation Report for any active grant year.	Annual Plan: Capital Needs
	Most recent CIAP Budget/Progress Report (HUD 52825) for any active CIAP grants.	Annual Plan: Capital Needs
	Approved HOPE VI applications or, if more recent, approved or submitted HOPE VI Revitalization Plans, or any other approved proposal for development of public housing.	Annual Plan: Capital Needs
	Self-evaluation, Needs Assessment and Transition Plan required by regulations implementing Section 504 of the Rehabilitation Act and the Americans with Disabilities Act. See PIH Notice 99-52 (HA).	Annual Plan: Capital Needs
	Approved or submitted applications for demolition and/or disposition of public housing.	Annual Plan: Demolition and Disposition
	Approved or submitted applications for designation of public housing (Designated Housing Plans).	Annual Plan: Designation of Public Housing
	Approved or submitted assessments of reasonable revitalization of public housing and approved or submitted conversion plans prepared pursuant to section 202 of the 1996 HUD Appropriations Act, Section 22 of the US Housing Act of 1937, or	Annual Plan: Conversion of Public Housing

List of Supporting Documents Available for Review		
Applicable & On Display	**Supporting Document**	**Related Plan Component**
	Section 33 of the US Housing Act of 1937.	
	Documentation for required Initial Assessment and any additional information required by HUD for Voluntary Conversion.	Annual Plan: Voluntary Conversion of Public Housing
	Approved or submitted public housing homeownership programs/plans.	Annual Plan: Homeownership
	Policies governing any Section 8 Homeownership program (Section _____of the Section 8 Administrative Plan)	Annual Plan: Homeownership
	Public Housing Community Service Policy/Programs ☐ Check here if included in Public Housing A & O Policy	Annual Plan: Community Service & Self-Sufficiency
X	Cooperative agreement between the PHA and the TANF agency and between the PHA and local employment and training service agencies.	Annual Plan: Community Service & Self-Sufficiency
X	FSS Action Plan(s) for public housing and/or Section 8.	Annual Plan: Community Service & Self-Sufficiency
	Section 3 documentation required by 24 CFR Part 135, Subpart E for public housing.	Annual Plan: Community Service & Self-Sufficiency
	Most recent self-sufficiency (ED/SS, TOP or ROSS or other resident services grant) grant program reports for public housing.	Annual Plan: Community Service & Self-Sufficiency
	Policy on Ownership of Pets in Public Housing Family Developments (as required by regulation at 24 CFR Part 960, Subpart G). ☐ Check here if included in the public housing A & O Policy.	Pet Policy
X	The results of the most recent fiscal year audit of the PHA conducted under the Single Audit Act as implemented by OMB Circular A-133, the results of that audit and the PHA's response to any findings.	Annual Plan: Annual Audit
	Consortium agreement(s), if a consortium administers PHA programs.	Joint PHA Plan for Consortia
	Consortia Joint PHA Plans ONLY: Certification that consortium agreement is in compliance with 24 CFR Part 943 pursuant to an opinion of counsel on file and available for inspection	Joint PHA Plan for Consortia
	Other supporting documents (optional). List individually.	(Specify as needed)

12. Capital Fund Program and Capital Fund Program Replacement Housing Factor Annual Statement/Performance and Evaluation Report

Annual Statement/Performance and Evaluation Report
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part I: Summary

PHA Name:	**Grant Type and Number** Capital Fund Program Grant No: Replacement Housing Factor Grant No:	**Federal FY of Grant:**

☐**Original Annual Statement** ☐**Reserve for Disasters/ Emergencies** ☐**Revised Annual Statement (revision no:**)
☐**Performance and Evaluation Report for Period Ending:** ☐**Final Performance and Evaluation Report**

Line	**Summary by Development Account**	**Total Estimated Cost**		**Total Actual Cost**	
		Original	**Revised**	**Obligated**	**Expended**
1	Total non-CFP Funds				
2	1406 Operations				
3	1408 Management Improvements				
4	1410 Administration				
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs				
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures				
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Nondwelling Structures				
13	1475 Nondwelling Equipment				
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs				
18	1499 Development Activities				
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22	Amount of line 21 Related to LBP Activities				
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12. Capital Fund Program and Capital Fund Program Replacement Housing Factor Annual Statement/Performance and Evaluation Report

Annual Statement/Performance and Evaluation Report
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)
Part II: Supporting Pages

PHA Name:		**Grant Type and Number** Capital Fund Program Grant No: Replacement Housing Factor Grant No:				**Federal FY of Grant:**		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised	Funds Obligated	Funds Expended	

13. Capital Fund Program Five-Year Action Plan

Annual Statement/Performance and Evaluation Report
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)
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PHA Name:	**Grant Type and Number** Capital Fund Program No: Replacement Housing Factor No:	**Federal FY of Grant:**

Development Number Name/HA-Wide Activities	All Fund Obligated (Quarter Ending Date)			All Funds Expended (Quarter Ending Date)			Reasons for Revised Target Dates
	Original	Revised	Actual	Original	Revised	Actual	

13. Capital Fund Program Five-Year Action Plan

Capital Fund Program Five-Year Action Plan **Part I: Summary**					
PHA Name				☐**Original 5-Year Plan** ☐**Revision No:**	
Development Number/Name/HA-Wide	Year 1	Work Statement for Year 2 FFY Grant: PHA FY:	Work Statement for Year 3 FFY Grant: PHA FY:	Work Statement for Year 4 FFY Grant: PHA FY:	Work Statement for Year 5 FFY Grant: PHA FY:
	Annual Statement				
CFP Funds Listed for 5-year planning					
Replacement Housing Factor Funds					

13. Capital Fund Program Five-Year Action Plan

Capital Fund Program Five-Year Action Plan Part II: Supporting Pages—Work Activities						
Activities for Year 1	Activities for Year :____ FFY Grant: PHA FY:			Activities for Year: ___ FFY Grant: PHA FY:		
	Development Name/Number	**Major Work Categories**	**Estimated Cost**	**Development Name/Number**	**Major Work Categories**	**Estimated Cost**
See						
Annual						
Statement						
Total CFP Estimated Cost			$			$

13. Capital Fund Program Five-Year Action Plan

Capital Fund Program Five-Year Action Plan Part II: Supporting Pages—Work Activities					
Activities for Year :____ FFY Grant: PHA FY:			Activities for Year: ___ FFY Grant: PHA FY:		
Development Name/Number	**Major Work Categories**	**Estimated Cost**	**Development Name/Number**	**Major Work Categories**	**Estimated Cost**
Total CFP Estimated Cost		$			$

Section 8 Housing Choice Voucher

Administrative Plan

The City of Cedar Rapids

April 5, 2005

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INTRODUCTION

The purpose of this Administrative Plan is to:

- Establish policies for issues not covered under Federal regulations for all Section 8 Housing Choice Voucher programs, including the Family Self-Sufficiency program, and Project-Based programs administered by the Cedar Rapids Housing Authority.

- Establish fair and equitable policies for selecting applicants to participate in Section 8 Programs administered by the Cedar Rapids Housing Authority (HA);

- Provide fair, equitable and reasonable procedures to govern Section 8 Program participation in accordance with regulations of the U.S. Department of Housing and Urban Development (HUD);

- Permit each applicant and participant the greatest opportunity for the exercise of individual rights.

This plan conforms to all current HUD regulations. The Authority will comply with any subsequent changes in HUD regulations pertaining to program administration. If such changes conflict with the provisions of this policy, HUD regulations will have precedence.

The HA administers the Section 8 Housing Choice Voucher program in Cedar Rapids, Iowa and surrounding communities in Linn County and Benton County. The primary objective of these programs is to provide decent, safe, sanitary and affordable rental housing for low income households and to provide these households with housing choices and the opportunity to move outside areas with a concentration of low income households.

SECTION I

NONDISCRIMINATION AND PRIVACY POLICY

The HA will not discriminate against any applicant or resident because of race, color, creed, national or ethnic origin or ancestry, religion, sex, age, disability, military status, source of income, marital status or presence of children in a household; nor will any criteria be applied, nor information be considered, pertaining to attributes or behavior that may be imputed by some to a particular group or category. All criteria applied and information considered in administering this plan shall relate to the attributes and behavior of the individual members of the household.

The HA shall not, on account of race, creed, color, sex, age, class, disability, religion, military status, source of income, marital status or the presence of children deny to any family the opportunity to apply for assistance or deny any eligible applicant the opportunity to lease a housing unit suitable to its needs.

The Cedar Rapids Housing Authority is fully committed to providing reasonable accommodations to its applicants and participants with disabilities.

The HA provides and Voucher holders information on Federal/State/local laws regarding housing discrimination and any recourse available. Such information will be made available as part of the briefing session, and all applicable Fair Housing Information and Discrimination complaint forms will be made part of the Certificate and Voucher holders' packet. The HA will provide referrals and information to applicants and participants about local organizations which provide assistance in filing discrimination complaints.

SECTION II

PROGRAM ELIGIBILITY GUIDELINES

A. Eligibility Criteria

To be eligible for admission, an applicant must meet the following criteria:

1. The applicant must qualify as a family. A family is defined as:

   a. Two or more persons sharing residency whose income and resources are available to meet the family's needs, where the person to be designated head of household meets the HA's definition of adult and who are either related by blood, marriage or operation of law, or who have evidenced a stable family relationship over a period of time which shall not be less than one year; and have legal capacity, or

   b. An Elderly Household whose head or spouse or sole member is elderly or disabled. The household may include one or more elderly or disabled persons living together or one or more such persons living with one another who is determined to be essential to their care or well being.

   c. A single adult person, with no other children, who is pregnant or in the process of securing legal physical custody of any individual under the age of 18 years; or who shares joint custody of any individual under the age of 18 years at least 50% or more of the time and is the primary care giver. Custody issues will need to defined in writing and any other variations will be reviewed by HA and a determination will be made if acceptable; or

   d. The remaining adult member of a resident family; or

   e. Any other single person.

   f. Verification of stable family relationship will request documentation of: lease agreement; bank accounts; Department of Human Services reports; church membership; joint credit cards; rent-to-own agreements; and other documentation as requested by the HA.

   g. Verification of primary care giver will require documentation of: court documents; school records; tax returns; and other documentation as requested by HA.

2. The applicant must be income eligible. The applicant's total family income must not exceed the Very Low Income Limit (50% of area median income) published in the Federal Register for the Cedar Rapids Metropolitan Statistical Area. 75% of all applicants must have income below 30% of the area median income. Income limits will, at all times, be posted in the HA Office. Income limits are generally revised annually by

HUD and changes in income limits are incorporated into this policy by reference.

HUD rules allow admission of Low Income families (80% of area median income) in limited circumstances, including:

a. when a family qualifies as continuously assisted under the 1937 Housing Act. Families are considered to be continuously assisted if they were previously assisted in subsidized housing under the 1937 Housing Act within 90 days prior to issuance of a Certificate or Voucher;

b. when a family is physically displaced by rental rehabilitation activity under 24 CFR Part 511;

c. when a nonpurchasing household resides in a HOPE 1 (public and Indian homeownership) or HOPE 2 (multifamily homeownership) project;

d. when a non-purchasing household resides in a HUD assisted multifamily project subject to a resident homeownership program under the Code of Federal Regulations Title 24 part 248.173; or

e. when a family is displaced as a result of the prepayment of a mortgage or voluntary termination of a mortgage insurance contract under 24 CFR 248.165.

f. for the certificate program only, a low-income family residing in a HUD-owned multifamily rental housing project when HUD sells, forecloses or demolishes the project.

3. Need for Assistance. Families must demonstrate the need for assistance, specified as follows:

   a. *Vouchers.* Thirty percent of the family's monthly adjusted income must not equal or exceed the Payment Standard for the unit size the family has been assigned based on subsidy standards.

4. The applicant and all family members must disclose their SSNs by providing a copy of their Social Security card or other Social Security issued documents. These numbers must be verified. If a SSN has not been assigned, certification to that effect must be executed for all family members.

5. The applicant, or any adult family member, must not have committed fraud in connection with any federal housing assistance program. Intentionally providing misleading information on the application form is considered fraud.

6. The applicant and each family member must be a U.S. citizen or noncitizens who have eligible immigration status.

7. The applicant family must not maintain another residence in addition to the HA unit.

8. Prior housing history. Neither the applicant nor any member of the applicant family has been evicted from Public Housing, Indian Housing, Section 23, or any Section 8 Program because of drug-related criminal activity within the last three years beginning on the date of the eviction.

9. Outstanding Debts. The family must have paid any outstanding debt owed to the HA or another the HA on any previous tenancy in public housing or Section 8.

B. Ineligibility Because of Prior Eviction for Drug-Related Activity

1. Drug-related criminal activity is the illegal manufacture, sale, distribution, use or possession with intent to manufacture, sell, distribute or use of a controlled substance. Pursuant to federal law, persons evicted from public housing, Indian housing, Section 23, or any Section 8 program because of drug-related criminal activity are ineligible for participation in any Section 8 program at HA for a five year period beginning on the date of such eviction.

2. The HA will waive this restriction if the applicant can demonstrate to the satisfaction of the HA that:

   a. the person successfully completed a rehabilitation program approved by HA, or

   b. the circumstance (s) leading to the eviction no longer exists. For example, the person involved in drugs and responsible for the eviction is no longer part of the household.

C. Screening Out Illegal Drug Users, Alcohol Abusers, and Sex Offenders

1. The HA will prohibit the admission to Section 8 programs of any person who has been charged for illegally using or possessing a controlled substance or drug paraphernalia, and for offenses that are alcohol related, charges for domestic abuse, sexual offenses and charges for assault within the last 12 months from date application was pulled from the waiting list for a period up to five years.

   The HA will also prohibit admitting any person to Section 8 programs in cases where the HA determines that there is reasonable cause to believe that the person abuses alcohol in a way that may interfere with the health, safety, or right to peaceful enjoyment of the premises by other residents. Persons charged with two or more alcohol related incidences may be denied or terminated from the Section 8 program within the past 24 months.

   The HA will prohibit admitting any person to Section 8 programs in cases where the HA determines that there is reasonable cause to believe that the person's pattern of illegal use of a controlled substance or pattern of abuse of alcohol may interfere with the health, safety, or right

to peaceful enjoyment of the premises by other residents. Charges for drug paraphernalia would qualify as a charge that would deny or terminate the applicant/participant from the Section 8 program.

2. The HA will waive the policies prohibiting admission in these circumstances if the person demonstrates to the HA's satisfaction through written documentation from a physician, medical-social caseworker or a drug rehabilitation counselor that:

   a. Has successfully completed a supervised drug or alcohol rehabilitation program;

   b. Has completed an anger management class or batterer's education class.

   c. Or has completed a comparable program.

3. The HA will prohibit the admission to Section 8 programs of any person who the HA determines is or will be required to register as a sex offender or has been placed on the Iowa Sex Offender Registry or any other state Sex Offender Registry.

4. Applicant's criminal history prior to the date their application is removed from the waiting list may be reviewed to determine if there is a pattern of criminal history and if HA determines there are a number of criminal charges the applicant may be denied housing up to five years.

5. Families where any of the family members have engaged in Assault or Domestic Abuse within the last 12 months from date their application is removed from the waiting list may be denied admission up to five (5) years from the occurrence.

D. Additional Ineligibility Factors

1. Families where any of the family members have committed fraud, bribery or other corrupt or criminal act in connection with any federal housing program <u>will be denied admission for five (5) years from the occurrence.</u>

2. Families where any of the family members engaged in violent criminal activity or illegal drug activity resulting in an eviction and/or termination of Section 8 or Public Housing benefits will be denied admission for five (5) years from the occurrence.

3. Families where any of the family members engaged in disturbance of the peaceful enjoyment of others resulting in a court approved eviction and termination of Section 8 or Public Housing benefits will be denied admission for five (5) years from occurrence and removed from the waiting list after verification of factors, provided in a written notice of the grounds for denial and of the opportunity for an informal review.

4. Families where any of the family members have engaged in criminal activity toward any HA staff member, owner, property management staff,

subcontractor or agent will be denied admission for five (5) years from the occurrence.

The HA may at its discretion review the nature and severity of the offense and the length of time since it occurred and may offer the applicant the opportunity to provide evidence to demonstrate that the situation has not and is not likely to be repeated.

E. Eligibility Restrictions Regarding Non-citizens

1. As required by HUD, eligibility for assistance or continued assistance under a Section 214 program, such as Section 8, is contingent upon a family's submission of documentation either declaring U.S. citizenship or eligible immigration status. The HA requires both current tenants and applicants to submit the required citizenship or eligible immigration documentation for every household member in order to receive or continue to receive housing assistance. Documentation is required of all new admissions at the time an application is processed by the Housing Authority. Any current tenant who has not already provided documentation will be required to document citizenship or immigration status at the next re-examination. It is necessary to provide this information only one time for each family member during continued occupancy at the HA. Whenever a new family member is added, documentation must be provided before the new member can be added to the lease.

2. *Proof of citizenship will take the following form*:

   a. For families claiming U.S. citizenship, each applicant or participant family member will sign the citizenship declaration form and present appropriate documentation (such as U.S. passport, resident alien card, social security card or other appropriate documentation), which will become a permanent part of the tenant file. Adults will be required to sign on behalf of all children under the age of eighteen years.

   b. Noncitizens age 62 years or older who are current participants or applicants will be required to sign a declaration of eligible immigration status and submit proof of age.

   c. Participants and applicants who are noncitizens declaring eligible immigration status must:

      i. Sign a declaration of eligible immigration status;

      ii. Provide the required U.S. Immigration and Naturalization Service documents, such as Alien Registration Receipt Card, Arrival/Departure Record, Temporary Resident Card, Immigration and Naturalization Service (INS) receipt in the event of any lost or missing cards listed above; and

      iii. Sign a verification consent form.

The HA has the right to deny, terminate or adjust housing assistance if members of any household are found to be noncitizens with ineligible immigration status; however, this determination will not take place until all appeal rights requested have been exercised by the household. The HA may grant time extensions to provide appropriate information, provided that the household shows a diligent effort in obtaining immigration status documents.

3. The HA may not make assistance available to a family applying for assistance until at least the eligibility of one family member has been established, and assistance must be prorated based on the number of individuals in the family for whom eligibility has been affirmatively established.

4. The HA may not delay, deny, reduce or terminate eligibility of an individual for assistance on the basis of the immigration status of the individual. The family will not be penalized for delays on the part of those entities which must verify eligible immigration status.

5. Continued assistance provided to an eligible mixed family after November 29, 1996 will be prorated based on the percentage of family members that are eligible for assistance.

6. The HA is required to suspend assistance to a family for a period of at least 24 months upon determining that the family has knowingly permitted an ineligible individual to reside on a permanent basis in the family's unit. This provision does not apply if the ineligible individual has already been considered in calculating any proration of assistance for the family.

7. If the HA discovers that citizenship information provided is expired, fraudulent, or otherwise invalid, it will notify the family or individual of the results of these findings. The family or individual will then have 30 days from the date of the notification to file an appeal with the INS to correct the problem. The family or individual must provide the Housing Authority a copy of the appeal request to the INS, which will become a permanent item in the tenant file. The HA can extend this 30 day appeal period at its sole discretion if good cause is found.

8. Any applicant or participant family affected by these provisions has the right to an informal hearing provided the family notifies the HA within 30 days of the action or decision the family wishes to appeal. All appeals will be conducted in accordance with the provisions of the HA's Informal Hearing Procedures.

9. In accordance with Federal rules, mixed families who were participants in the HA's Section 8 program on June 19, 1995, are permitted to receive continued assistance provided that either the head of household or spouse have eligible immigration status and any ineligible family members are either the head, spouse, parents, or children of the head or spouse.

10. Families who were participants in the HA's Section 8 program on June 19, 1995 but became ineligible for housing assistance because there are no family members with eligible immigration status may be given a temporary deferral of assistance to transfer to other housing at the discretion of the Housing Authority. If the temporary assistance is provided, it will be offered in six month increments and never for longer than a total of 18 months. The maximum period for deferrals granted prior to November 29, 1996 will be three years.

11. Families that no longer qualify for housing assistance due to their citizenship status may apply for prorated assistance to decrease the level of housing assistance provided to the household based on the ratio of eligible and ineligible persons in the household.

12. Rental housing assistance is prohibited to noncitizen students and their families. None of the provisions of the rules related to prorated assistance, continued assistance, or temporary deferral of termination of assistance applies to noncitizen students. This prohibition does not include citizen spouses and their children.

F. Special Eligibility Provisions Relating to Applicants Requiring a Live-In Aide

1. Some applicants and participants who would not otherwise be able to fully discharge the responsibilities of tenancy may be able to do so with the assistance of a live-in aide residing in the unit. The live-in aide must provide the HA their Social Security number and card and birth date so the HA can check criminal records using the same procedure used for applicants.

   A Family may include a live-in aide who:

   a. Has been verified by the HA and a medical doctor or rehabilitation agency to be essential to the care and well being of the elderly or disabled family member; and

   b. Is not obligated for the support of the elderly or disabled member; and

   c. Would not be living in the unit except to provide care of the elderly or disabled member; and

   d. Whose income will not be counted for purposes of determining eligibility or rent; and

   e. Who may not be considered the remaining member of the Tenant family.

   f. A live-in aide's family members may also reside in the unit provided it does not increase the subsidy by the cost of an additional bedroom and provided that the presence of the live-in's family members do not overcrowd the unit.

g. A live-in aide should be available 24 hours a day to assist the disabled or elderly family member. Live-in aides whose activities or outside job have them coming and going from the unit during the day or night shall not be considered as an aide, but a helper/employee.
h. Doctor's statement or rehabilitation agency must state the type of care family member requires and if the person designated to be the live-in aide is qualifed to perform this type of service.
i. HA will limit household to one live-in aide at a time.

G. Additional Ineligibility Factors For Re-Admission

Applicants and participants terminated from the Section 8 program will be denied assistance for a period of five (5) years by HA for the following reasons:

1. If any family member has ever been evicted from public housing.

2. If an HA has ever terminated assistance under the certificate or voucher program for any member of the family.

3. If the family has engaged in or threatened abusive or violent behavior toward HA personnel.

4. If any family member refuses to sign and submit mandatory consent forms.

5. If evidence of citizenship and eligible immigration status is not submitted by a specified date, or by the expiration of any extension granted.

6. If INS primary and secondary verification does not verify eligible immigration status of at least one family member.

7. If the family has not reimbursed any housing authority for amounts paid to an owner under a HAP Contract for rent, damages to the unit, or other amounts owed by the family under the lease.

The HA may, at its discretion, review the nature and severity of the offense and the length of time since it occurred and may offer the applicant the opportunity to provide evidence to demonstrate that the situation has not and is not likely to be repeated.

SECTION III

APPLICATION FOR ADMISSION

A. Introduction

The HA will accept pre-applications for the Section 8 Program, submitted by mail or in person, at the office located at 1211 6th Street SW, Cedar Rapids, Iowa. Anyone may apply; the HA will not deny anyone the right to submit a pre-application when the waiting list is open. All pre-applications will be time and date stamped upon receipt and all pre-applicants will receive acknowledgment by the HA at the time they apply.

Accommodations will be made for interested, disabled applicants. All applicant households will be offered the opportunity to apply for housing, if the waiting list is open.

An updated application will be taken prior to certification or issuance of a new voucher to record any changes in the family situation since the date of the original. It shall be the applicant's responsibility to complete the required "change of status" form. Failure to do so will result in an application being withdrawn. Similarly, the HA's inability to contact the family will result in the application being withdrawn.

B. Program Outreach

1. Outreach to Families.

The HA reserves the right to open or close the waiting list based on the supply of applicants. The waiting list will be closed when there are not enough Section 8 subsidies to assist all the applicants in a reasonable period of time. When the HA determines that additional applicants are needed, the waiting list will be reopened. The Authority will publicly advertise the closing and reopening of application intake periods in local newspapers.

When the waiting list is to be reopened, the Housing Authority will clearly state in the public announcement the procedure used to determine the position of each applicant on the waiting list.

To reach possible applicants from all backgrounds, the HA will advertise through a wide variety of sources including local and State newspapers, minority media, minority civic clubs, service agencies, Linn County Landlord Association and broadcast media. An effort will also be made to notify agencies which specifically address the needs of individuals with disabilities. The HA will continuously monitor and evaluate outreach activities to ensure that the widest possible audience is reached.

Affirmative Marketing

Minority Organizations and organizations and agencies which specifically address the needs of individuals with disability will be mailed annually information and brochures on all housing programs. The HA will continuously monitor and evaluate outreach activities to ensure that the widest possible audience is reached.

All notices and advertising announcing the opening of the waiting list will include:

a. The dates the list will be open;

b. The office hours and location where applications are available and will be accepted;

c. The availability of Vouchers;

d. Eligibility guidelines;

e. Preferences for the selection of applicants; and

f. Any limitations which may apply.

2. Outreach to Property Owners.

Landlord briefings will be held on an ongoing basis to increase the number of available units and specifically units outside of the poverty and minority concentrated areas. The HA will notify and provide program information to local realtors, agents, apartment associations and any interested landlords. HA staff will be available to make presentations about the Section 8 Program to these groups. In addition, printed materials which describe the program requirements and opportunities for property owners will be made available upon request as well as annually direct mailed using the membership mailing lists for these organizations. The HA maintains a list of interested property owners and units available for the Section 8 Program. As inquiries from prospective new property owners are received, staff record the necessary information about units and make it available to prospective tenants upon request.

The HA will make a concerted effort to contact and encourage local property owners with units specially designed or adapted for persons with disabilities, and those who may be willing to adapt units, to participate in the program. Notices shall be sent to landlords presently participating, landlords that have participated in the past, local real estate agencies, and to local social service agencies that specifically address the needs of disabled clientele.

Whenever the HA is informed by a local property owner of a unit available for the program, the HA shall inquire as to whether the unit is accessible and the extent of accessibility.

The HA is a member of the Linn County Landlord Association and participates in their regular meetings.

C. Pre-Applications

1. Receipt of Pre-Applications.

Completed pre-applications must be submitted in person or by mail at the office located at 1211 6th Street SW, Cedar Rapids, Iowa.

The date and time of application will determine the applicant's position on the waiting list. The HA will utilize the date and time of application as preference until further notification by HUD that federal preferences have been re-instated. Exception for preferences will be:

a. Displaced by local government code enforcement action that has determined the residence to be unfit for human habitation due to violation of the building and housing codes.
b. Project-based applicants, or
c. 30 percent of income below area median income.

j. Processing of Pre-Applications.

a. *Completion of Pre-application:* It is the responsibility of the applicant to accurately and completely fill out the pre-application. If an incomplete pre-application is received, HA staff will make reasonable efforts to contact the applicant and inform him/her of the additional information required. If those efforts fail, the pre-application will be withdrawn. Reasonable efforts shall not exceed one letter or, if no address is provided, two telephone calls. A record of those efforts shall be maintained with the pre-application.

b. *Notification of Status:* Information provided by the applicant on the pre-application will be reviewed to determine if the applicant appears to be eligible. If the applicant household appears to meet the income limits as established by HUD for the Cedar Rapids, (IA) area, the pre-application will be approved provisionally based on the information provided by the family and the family will be placed on the waiting list.

(i) Waiting list information will be limited to verification of applicants being listed on the waiting list or not; date and time of the application; family income; and their current address. If the current address is different, the applicant will be directed to complete the change address form.

Applicants requesting updates must provide their social security number. Under no circumstances, are HA staff allowed to accept, update, or change information over the telephone. All changes including addresses, income,

households members, etc., must be reported in writing and on the form prescribed by the HA.

(ii) Each applicant determined ineligible for Section 8 and denied placement on the waiting list, shall be notified in writing of the reason for his/her ineligibility and of his/her right to request, within 10 days, an Informal Review to discuss the Section 8 ineligibility determination. The review is to be held by an impartial hearing officer who is the Assisted Housing Manager. Any applicant determined eligible after the submission of additional information or through an Informal Review shall be placed on the waiting list according to the date and time of the original application.

c. *Waiting List Update*: In the interest of maintaining an accurate waiting list of apparently eligible households, the HA will periodically mail requests to each applicant for updated household information. Each applicant will be required to respond within a special time frame which shall be no less than ten (10) days from the date the request was mailed to the applicant by the HA. The application of any household which fails to respond to the update request by the specified deadline date will be withdrawn. To be considered for admission, the applicant will be required to reapply.

An applicant may withdraw his/her application at any time. An applicant who has withdrawn an application will be required to reapply.

D. Verification of Preference

Each applicant will be provided with a description of all the HA preferences and will be required to certify at the time of pre-application whether the household qualifies for a preference unless preferences have been suspended by the HA. Placement on and selection from the waiting list will be based on applicant certification. However, before an applicant can receive a Voucher, the HA must have verified the preferences claimed. If the claimed preference(s) cannot be verified, the applicant will be returned to the waiting list based on the date and time of application but without the preference claimed.

E. Final Eligibility Determination

1. Formal Application. When staff estimate that a Section 8 Voucher will be available within the next several months, applicants will be notified in writing to submit a formal application, after which program eligibility will be determined and preference will be verified.

2. Verification of Eligibility and Preference Status. Each applicant household shall provide all information and authorizations necessary to enable Section 8 staff to determine program eligibility and to verify the applicant's qualification for preference status. Verification shall be from

third party sources whenever possible. All verifications must be completed before the family is issued a Voucher.

a. Each applicant household shall have an interview with a member of the Section 8 staff. If the applicant fails to attend the scheduled interview appointment, the applicant's file may be withdrawn and the applicant will be required to reapply.

b. The applicant is required to make available all pertinent information at his/her disposal to assist the Authority staff in verifying eligibility information and to authorize the release of information to the Authority when necessary. However, the applicant shall not be penalized either by denial or unreasonable delay of assistance solely because third party sources have failed to respond to requests for information. When the applicant and the Authority have made all reasonable efforts to obtain information and the third party source has failed to respond, the Authority shall proceed with the processing of the application using the best available information.

c. All information relative to income for eligibility, assets, family composition, preference and non-citizen status will be verified and current for applicants within 60 days prior to issuance of a certificate or voucher and verified and current for participants within 120 days for participants being re-certified; all verified findings will be recorded in the applicant/tenant file as necessary.

To determine family composition, bedroom size required and eligibility for allowances, applicants will be required to submit acceptable documents as defined by HA in determining verifying legal identity and familial relationships.

F. Informal Review

Any applicant determined ineligible for Section 8 program participation as a result of the verification process will be informed in writing of the reason for the determination. The notice will provide the applicant the opportunity to request an Informal Review to discuss the determination. The applicant must submit in writing, within 10 days of date of the ineligible notification, a request for an Informal Review.

Upon receipt of a written request from an ineligible applicant for an Informal Review, the Authority shall notify the ineligible applicant of the time and date of the review. The review is to be conducted by the Assisted Housing Manager who is impartial and has no part in the ineligibility determination. The Review Officer will make a determination on the merits of the evidence presented. Within 30 days, a written decision will be mailed to the applicant and one copy will be retained in the applicant's file. If the ineligibility determination is overturned, and the family otherwise meets eligibility criteria, the family will be issued a voucher at the next scheduled briefing session. If the decision is upheld the family will be denied assistance and withdrawn from the waiting list.

SECTION IV

APPLICANT SELECTION

A. Order Of Selection from the Waiting List

All eligible applicants will be assigned to the waiting list according to date and time of application, with exception, however, to those pre-applicants who have a preference. Preference will be given to the following applicants by referral:

a. Displaced by local government code enforcement action that has determined the residence to be unfit for human habitation due to violation of the building and housing codes.
b. Project based applicants.
c. 30% of income below area median income.

B. Special Admissions

1. Some family applicants will be admitted to the HA's Section 8 Program without ever being on the waiting list or without considering the applicant's place on the waiting list. This may occur when HUD has awarded funding to the HA for a targeted group of households living in specified units. This HUD-targeted funding may include (but is not limited to):

   a. Families displaced because of demolition or disposition of a public or Indian housing project;

   b. Families residing in a multifamily rental housing project when HUD sells, forecloses or demolishes the project;

   c. Housing covered by the Low Income Preservation and Resident Homeownership Act of 1990;

   d. Non-purchasing families residing in a project subject to a homeownership program;

   e. Families displaced because of a mortgage prepayment or voluntary termination of a mortgage insurance contract;

   f. Families residing in a project covered by a project-based Section 8 HAP contract at or near the end of the HAP contract term; and,

   g. Non-purchasing families residing in a HOPE 1 or HOPE 2 project, and,

   h. Families being referred to the Family Unification, Mainstream Disability, and Project-Based Programs.

SECTION V

INCOME, ASSETS, AND ALLOWANCES

A. Income

Annual income is the gross income anticipated to be received by the family during the 12 months following the effective date of admission or re-examination Annual Income will be used to determine an applicant's initial eligibility. It will also be used to calculate the participant's Total Tenant Payment for initial and continued program participation.

1. Computation of Annual Income.

   a. Use current family circumstances to anticipate income, unless the verification indicates an imminent change.

   b. Annualized all income, including income that may not last the full 12 months (such as unemployment benefits). When circumstances change, an interim re-examination may be processed. Converting income to an annual figure may be achieved by (i) annualizing current income or (ii) averaging known sources of income that vary to compute an annual income.

2. Calculation Examples.

   a. *Regular Employment:*

      (i) Hourly wages times number of hours worked per year. (2080 hours for full-time employment with a 40 hour week and no overtime.)

      (ii) Weekly wages times 52.

      (iii) Bi-weekly wages times 26.

      (iv) Semi-monthly wages times 24.

      (v) Monthly wages times 12.

      (vi) *Tips*: Average tips per week x 52 = average annual tips.

      (vii) *Overtime*: Average overtime hours per week x overtime rate x 52 = annual overtime.

   b. *Non Regular Employment:* Includes employment where wages, hours, and employers worked for are flexible and no business related deductions are claimed. In general, this category applies to those types of employment which do not readily fit in the regular employment category. For example, a person who does yard work for the same employer, same wage, same number of hours per period could and should be verified under the

procedures for regular employment. However, if the client's wages, employers, and hours change frequently, their employment would be considered non-regular.

(i) *Verification*: The client must Self-Declare the following information:

- Type of work or services performed
- Average amount of income earned per month
- Signature of client and date prepared

(ii) *Calculation:* Average monthly income times 12 = annual income from non-regular employment.

c. *Public Assistance:* (Includes but not limited to AFDC, General Assistance, Supplemental Security Benefits, and Unemployment Compensation.)

(i) *Calculation*:

- Monthly Benefit x 12 = annual benefit. (Overpayments: In the case of benefits where a previous overpayment is currently being deducted the gross amount of the benefit minus the deduction for repayment shall be used.)

d. *Pension/Social Security*: Includes Social Security Benefits, Veterans Benefits, Pension Retirement and Annuity Benefits.

(i) *Calculation*:

- Monthly benefit x 12 = annual benefit. (*Overpayments*: In the case of benefits where a previous overpayment is currently being deducted, the gross amount of the benefit minus the deduction for repayment shall be used.)

e. *Child Support, Alimony, and Support Payments Made by Other Individuals:* Includes regular payments made by a parent for the support of a minor child residing in the household, regular payments made by relatives, friends, or other persons to the family, or on behalf of the family for basic rent and utilities.

(i) *Calculation*:

- Amount of payment x frequency = annual support income
- Frequency = Monthly (12)
  Weekly (52)

Semi-monthly	(24)
Bi-weekly	(26)

f. *Lump-Sum Payments*: Generally lump-sum amounts received by a family are considered assets, not income, i.e., inheritance, insurance, settlements, proceeds from the sale of property, etc. Deferred payments made because of a delay in processing a periodic payment such as unemployment, welfare benefits, etc., must be counted as income. Lump sum payments caused by delays in processing periodic payments for Social Security or SSI, are not counted as income. If an interim re-examination was not conducted to reduce the Total Tenant Payment, any lump sum amounts received by the family will be treated as an asset. The following example will apply only if an interim re-examination to reduce the Total Tenant Payment is conducted.

2 *Example:* Family member loses her job on October 10, 1997. Unemployment benefits are delayed. On December 10, 1997, family received a lump-sum payment of $600 for October 21, 1997 through December 7, 1997. Beginning December 8, 1997, the family receives $100 per week in unemployment benefits.

- Family requests and receives an interim re-examination. The interim re-examination reduces the family's Total Tenant Payment and is effective November 1, 1997, and annual income is computed as shown below. Income is annualized even though unemployment income is not expected to last the full twelve months and family is reminded to come in for an interim when circumstances change.

- Any amounts deducted from lump sum payments for attorney's fees shall be deducted from the lump sum amount which is counted as income.

- Any lump sum amounts, counted as income, shall be included as income for the entire year (until the next annual re-examination), or for 12 months, whichever is greater.

2 *Calculation*:

- $600 (Lump-sum payment) plus $5,200 ($100/week unemployment) = annual income from unemployment.

2 **Assets**

Family assets include interest, dividends, and any other net income of any kind from real or personal property, to include any assets disposed of at less than fair market value within the last two years.

3 Total Value of Assets Calculation.

4 *Savings and Checking Accounts, Certificates of Deposit, IRA and KEOGH Accounts:* Account balance or certificate of deposit value = total asset value of savings and checking accounts/certificates of deposit, IRA and KEOGH accounts.

5 *Stocks*: Number of shares x current per share value = total asset value of stocks.

6 *Bonds:* Cash value of bond x number of bonds = total asset value of bonds.

7 *Notes and Mortgages Held:* Principal amount remaining = total asset value of notes and mortgages held.

8 *Trusts*:

9 If trust is irrevocable, it is not counted as an asset.

10 If trust is revocable, current amount of trust = total value of trust.

11 *Real Property Owned*: Current market value minus amount owed (if any) = total asset value of real property owned.

12 Income from Assets Calculation.

13 *Savings and Checking Accounts, Certificates of Deposit, IRA and KEOGH Accounts:* Account balance x interest rate = annual income from savings/certificates of deposit, IRA and KEOGH accounts.

14 *Stocks*: Amount of dividends paid x frequency of payment = annual dividend income.

15 *Notes and Mortgages Held:* Interest portion of the payment x frequency of payment = annual note or mortgage income. (Repayment of principal is not considered income.)

16 *Trusts:* Use of amount of annual proceeds as determined through verification.

17 *Real Property Owned (if property is income producing):*

18 If income tax return for property is available, use the amount of net annual income from tax return.

19 If no income tax return is available, only the following deductions will be allowed:

- Amount of payments received x frequency of payment = gross annual income, then
- If balance owed on property, amount of interest portion of payments made x frequency of payment = annual interest deduction.

2 *Assets Disposed of:* Assets disposed of for less than fair market value during the two years preceding effective date of certification or re-certification are included as assets. Cash value of the asset, the amount the family would receive if the asset were converted to cash, must be used. Cash value is market value minus reasonable costs that were or would be incurred in selling or converting the asset to cash. Expenses which may be deducted include the following:

3 Penalties for withdrawing funds before maturity

4 Brokers/legal fees assessed to sell or convert the asset to cash

5 Settlement cost for real estate transactions

If the fair market value exceeds the gross amount the family received by more than $1,000 count the whole difference between the cash value and the amounts received. If the difference is less than $1,000, ignore it.

Assets disposed of for less than fair market value, as a result of a foreclosure, bankruptcy, divorce or separation, are not counted.

Assets put into trust or business assets disposed of for less than fair market value are counted.

6 *Calculation:* Include the difference between cash value and the amount received for any asset disposed of at less than fair market value within

the last two years. (Cash value = the fair market value less reasonable costs.)

7 Calculating Income from Assets:

Type of Asset	Cash Value Per Year	Actual Income From Asset
Checking Account	300	0
Savings Account	2,000	115
Certificates of Deposit	10,000	988
Rental Property	15,000	0
TOTALS	$27,300	$1,101

8 ISince total assets exceed $5,000, imputed income must be calculated: Total Assets multiplied by the passbook rate established by the HA's HUD field office.

9 Overall Asset Calculation. To determine what amount to use for assets in the overall calculation of total annual income for both rent and eligibility, use the following calculations:

10 Add total value of all assets = total asset value

11 Add total income from all assets = total asset income

12 If total asset value is less than $5,000, use total asset income in determining total annual income

13 If total asset value is $5,000, or more, use the larger of the following:

14 total asset value multiplied by the passbook rate established by the HA's HUD field office.

15 total asset income.

16 Asset Verification Guide.

17 *Savings and Checking Accounts, Certificates of Deposit, IRA and KEOGH Accounts:* Statement from the financial institution containing the following:

18 date prepared

19 account number

20 account balance

21 interest rate (if the rate is variable, statement must give current applicable rate)

22 name of the account holder(s)

23 signature of authorized person

24 *Stocks:* A statement from a broker or a statement from the issuing corporation containing the following information:

25 date prepared

26 account number

27 number of shares

28 current per share value or current total value of shares

29 amount of dividends earned

30 frequency of payment of dividends

31 name(s) of shareholders

32 if a statement from broker, authorized signature

c. *Bonds:* A copy of the face of the bond showing the following information:

33 face value

34 maturity date

35 interest rate (if any)

36 type of bond

37 *Trusts*: Client must provide a copy of the trust document or a statement from the trust officer containing the following information:

38 amount of trust

39 type of trust (revocable or irrevocable)

40 annual proceeds of trust

41 beneficiary of trust

42 if statement from trust officer

- date prepared
- authorized signature

NOTE: Due to type of verification required, the following forms of verification shall be provided by the client.

2 *Notes and Mortgages Held:* (This is where the client receives payments.) The client must provide a copy of the note or mortgage containing the following information:

3 date of transaction

4 amount of transaction

5 balance owing

6 amount of payments reflecting the distribution between principal and interest (repayment of principal amount is not considered income)

7 frequency of payments

8 interest rate

9 name of person(s) holding the note of mortgage

10 Real Property Owned: (Includes Mobile Homes):

11 Client must provide a current appraisal or current market analysis prepared by a licensed real estate agent, broker, or mobile home dealer containing the following information:

- date prepared
- current market value of the property
- authorized signature

2 Copy of the deed or other title instrument showing the name(s) of the owner(s).

3 If property is mortgaged, a statement from mortgagor(s) showing:

- balance

- amount of payments reflecting distribution between interest and principal

- frequency of payments

2 For income-producing property:

3 Copy of lease or rental agreements containing the following information:

- term
- amount of payments
- frequency of payment

2 Copy of rental income schedule from income tax return or copy of property tax statement. This information will be used to determine allowable expenses.

3 **Allowances**

The following allowances are amounts, as applicable, to be subtracted from the annual income to determine the adjusted income.

4 Dependent Allowance. A $480 deduction for any family member (excluding foster children, head of household, or spouse) who qualifies as one of the following:

5 Under 18 (Even if they have children of their own), or

6 Disabled, or

7 A full-time student. (The regulations clarify that an educational institution includes a vocational school with a diploma or certificate program, as well as an institution offering a college degree.

8 Elderly Household Allowance. A $400 deduction for families in which the head of household or spouse is at least 62 or disabled. Only one deduction per family is permitted even if both the head of household and spouse are elderly.

9 Child Care Allowance. Any reasonable child care related expense billed by a care facility or private

individual providing child care (only those amounts not reimbursed by an agency or individual outside the family can be counted). This deduction applies to expenses relating to the care of any children under the age of 13 residing with the family. Such care must be NECESSARY for a family member to be gainfully employed, to actively search for employment or to further his/her education. Child care for the convenience of the family is not an allowable expense. For example, if there is an adult family member, who is capable and available to provide child care residing with the family, who chooses not to care for the child, child care expenses are not deductible. The deduction for child care expenses may not exceed the amount of income earned.

10 Disability Assistance Allowance.

11 Anticipated expenses for attendant care and auxiliary apparatus for a disabled family member may be deducted if such expenses:

12 are needed to enable a family member (including the disabled member) to be employed, and

13 exceed three percent of annual income, and

14 the amount exceeding three percent does not exceed the earned income of the household member enabled to work.

15 Any family with a disabled family member may qualify for this allowance even if neither the head of household nor spouse is disabled.

16 Auxiliary apparatus includes items such as wheelchairs, ramps, adaptations to vehicles, special equipment to enable a blind person to read or type, etc., which directly relates to permitting the disabled person or other family member to work.

17 Example

Head	36	Earned Income $12,000
Spouse	35	Earned Income $10,000
Son	15	Disabled

Disabled Expenses for care of disabled son $3,500

Disabled Assistance Allowance:

Annual Income	$22,000
	x .03
.3% of Annual Income	$ 660
Total Disability Assistance Expense	$ 3,500
	660
Allowable Disability Expense	$ 2,840

(Note: $2,840 allowable expense is not greater than amount earned by spouse who is enabled to work.)

18 When a care provider takes care of children under the age of 13 and a disabled member 13 or older, expenses must be prorated appropriately since the way in which child care and disability assistance expenses are computed differ.

19 A family, whose head of household or spouse is elderly or disabled, is also permitted to deduct medical expenses. If a family has both disability assistance and medical expenses, a special calculation is required.

20 Medical Expense Allowance.

Medical expense deductions are allowed only for families where the head of household or spouse is at least 62 or disabled. If the family is eligible for a medical expense deduction:

21 Count medical expenses of all family members, and,

22 Include expenses that are not covered by insurance or other sources and that are anticipated to be incurred during the 12 months following the family's examination/re-examination, such as:

23 Services of doctors and health care professionals

24 Services of health care facilities

25 Medical insurance premiums

26 Prescription/non-prescription medicines

27 Transportation to and from treatment facilities

28 Dental expenses

29 Eyeglasses, hearing aids, batteries

30 Live-in attendant or periodic medical assistance

31 Monthly payment(s) on accumulated medical bills

32 Medical care of a permanently confined family member if his/her income is included in annual income.

33 Allow only that portion of the total medical expenses which exceeds three percent of annual income:

34 Example

Head of Household 64
Spouse 63

Annual Income	$12,000
Total Medical Expenses	$ 1,500
Annual Income	12,000
	x .03
3% of Annual Income	360
Total Expenses	$ 1,500
Minus 3% of Annual Income	- 360
Allowable Medical Expense	$ 1,140

35 If an elderly family has both disability assistance and medical expenses a special calculation is required. The HA will follow steps outlined by form HUD 50058.

36 Example 1: Family has $1,000 in medical expenses and $500 in expenses for disability assistance. Annual income is $20,000. $4,000 of annual income is earned because it enables a family member to work. Three percent of annual income is $600.

Total Disability Assistance Expense	$ 500
Minus 3% of Annual Income	$ 600
	(100)
Disability Allowance	000
Total Medical Expense	$1,000
Minus: Balance of 3% of Annual Income	$ -100
Allowable Medical Expense:	$ 900

37 Example 2: Family has $2,000 in medical expenses and $3,500 in expenses for disability assistance. Annual income is $20,000. $2,400 of annual income is earned because the disability assistance enables a family member to work. Three percent of annual income is $600.

Total Disability Assistance Expense	$3,500
Minus 3% of Annual Income	- 600
	$2,900
Maximum Allowance for Disability Assistance (cannot exceed income generated)	$2,400
Total Medical Expense	$2,000
Allowable Medical Expense (Entire 3% was deducted to compute the disability allowance)	$2,000

j. Income Disallowance for the Disabled

c. Disabled person can be on SSI or SSDI or have no benefits, only a doctor's statement verifying they are disabled.

d. This regulation does not apply to New Admissions. Does not apply even if voucher holder increases their income before they are admitted to the program. Will apply if their income increases after they are admitted to Section 8.

e. Exclusion from Annual Income for qualified disabled families:

a) **Qualified family:**

- A disabled family whose annual income increases as a result of employment of a family member who is a person with disabilities and who was previously unemployed (*see definition below) for one or more years prior to employment;
- Whose annual income increases as a result of increased earnings by a family member who is a person with disabilities during participation in any economic self-sufficiency or other job training program; or
- Whose annual income increases as a result of new employment or increased earnings of a family member who is a person with disabilities, during or within six months after receiving assistance, benefits or services under any state program for temporary assistance for needed families funded Part A of Title IV of the Social Security Act.

a) Disallowance of increase in annual income:

- During the cumulative twelve-month period once the family member is employed or experiences an increase attributable to employment, **the full amount of the increase** is excluded from annual income.
- During the second cumulative twelve-month period, **fifty percent** of any increase is excluded from annual income.
- Lifetime 48 month disallowance (starting from the initial exclusion) for 12 months under each disallowance (full disregard and 50% phase in)

- **Definition of previously unemployed:** a person with disabilities who has earned, in the twelve months previous to employment, no more than would be received for 10 hours of work per week for 50 weeks at the established minimum wage.

PROCEDURES TO FOLLOW WHEN A TENANT REPORTS A CHANGE OF INCOME AT RENEWAL OR DURING LEASE TERM:

1. Check file to see if they are a disabled family.
2. Review if any income increases were done after April 20, 2001. If so, determine if they would have been eligible for the income disallowance. If you can answer "yes" proceed to recalculate their rent using these new regulations and notify them of any overpayment in rent we charged them and request a check be issued to them for the overpayment.
3. Ask them the above questions under "Disallowance Of Increase In Annual Income" regarding their change in income.
4. If they answer yes then you will need to verify it with third party verification.
5. Start of 12 months at 100% disallowance will be the date of hire or if already working, the date their wages increased.
6. Since we do not do increases we will still process this change to show the disallowance, track the dates, and do a 50058.
7. Since we do not do increases we will still process this change to show the disallowance, track the dates, and do a 50058.
8. At the next renewal you will have to calculate how many months are left at 100% and then do Amendment for balance of year at 50% disallowance.
9. When the 50% income disallowance starts you will need to do another 50058 and when it ends do another 50058.
10. At the second renewal you will calculate number of months left at 50% and do Amendment to show when rent will change counting all the income.

11. Front of files will need to be marked in black marker showing they are under the "Income Disallowance for the Disabled". Show the date you started the 100% disallowance and the date for the 50% disallowance and also they dates the 12 months are up for each one-year period. If they start and stop employment you will have several dates showing for start and stop.
12. Remember this cannot go over a **48-month period.**
13. **FSS –** families will no longer have the option of increasing their rent for escrow if they qualify for this disallowance. Rewrite their goals and give them the opportunity to learn money management skills by starting their own savings account for the difference in rent they are saving. The only difference in this is that they will be responsible for the savings, not us.

SECTION VI

SECTION 8 HOUSING CHOICE VOUCHERS VERIFICATION PROCEDURES

[24 CFR Part 5, Subparts B, D, E and F; 982.516]

A. INTRODUCTION

HUD regulations require HA to verify the factors of eligibility and Total Tenant Payment/Family Share. Applicants and program participants must provide true and complete information to HA whenever information is requested. HA's verification requirements are designed to maintain program integrity. This Chapter explains HA's procedures and standards for verification of preferences, income, assets, allowable deductions, family status, and changes in family composition. HA will obtain proper authorization from the family before requesting information from independent sources.

HA staff will obtain written verification from independent sources whenever possible and will document tenant files whenever third party verifications are not possible as to why third party verification was not obtained as well as the manner in which the eligibility factors were verified.

B. METHODS OF VERIFICATION AND TIME ALLOWED [24 CFR 982.516]

HA will verify information through five methods of verification according to the hierarchy listed below:

1. Up Front Income Verification (UIV)
2. Third-Party Written Verification
3. Third-Party Oral Verification
4. Review of Documents
5. Certification/Self-Declaration

HA will allow up to two (2) weeks for return of third-party verifications and up to one (1) additional week to obtain other types of verifications before going to the next method. HA will document the file as to how the information was verified including an explanation for the method utilized if other than a written third party verification.

For applicants, verifications must be received 60 days prior to the issuance of a voucher. For participants, they will be valid for 60 consecutive days from date of receipt.

1. Up-Front Income Verification

HA will utilize up-front income verification methods, including TASS and the Work Number, whenever possible as well as any other UIV that might become available to HA. When HUD announces the availability of the UIV system for HA, additional UIV tools will be used. (, including a centralized computer matching system.)

Third-party verification may continue to be used to complement up-front income verification.

UIV may be used in lieu of 3rd party verifications when there is not a substantial difference between UIV and tenant-reported income. HUD defines substantial difference as $200 or more per month.

- If the income reflected on the UIV verification is less than that reflected on the tenant-provided documentation, HA will use tenant-provided documents to calculate anticipated annual income as

long as the difference is within the aforementioned $200 threshold. The income reflected on the UIV verification must not be more than 60 days old.

- If the income reflected on the UIV verification is greater than current tenant-provided documentation, HA will use UIV income data to calculate anticipated annual income as long as the difference is with in the above mentioned $200 threshold; unless the tenant provides documentation of a change in circumstances (i.e. change in employment, reduction in hours, etc.) The tenant supplied documents must not be more than 60 days old.

In cases where UIV data is substantially different than tenant-reported income, HA will follow the following guidelines:

- HA will utilize written third party verification to verify the information

- When PHA cannot readily anticipate income, such as in cases of seasonal employment, unstable working hours, and suspected fraud, HA will review historical income data for patterns of employment, paid benefits, and/or receipt of other income to anticipate income.

- HA will analyze all data (UIV data, third party verification and other documents; information provided by the family) and attempt to resolve the income discrepancy.

- HA will use the most current verified income data (and historical income data if appropriate) to calculate anticipated annual income.

If HA is unable to anticipate annual income using current information due to historical fluctuations in income, HA may average amounts received/earned to anticipate annual income.

If the tenant disputes UIV SS/SSI benefit data, HA will request the tenant to provide a current original SSA notice or benefit letter within 10 business days of being notified of the dispute.

2. <u>Third-Party Written Verification</u>

Third-party verification is used to verify information directly with the income source. Third-party written verification forms will be sent and returned via first class mail. The family will be required to sign an authorization for the information source to release the specified information.

Verifications received electronically directly from the income source are considered third party written verifications. Verifications hand carried by clients will not be considered third party verifications unless the verification is from a government agency.

HA will accept verifications in the form of computerized printouts delivered by the family from the following agencies:

- Social Security Administration

- Veterans Administration

- Welfare Assistance

- Unemployment Compensation Board

- City or County Courts

3. <u>Third-Party Verbal Verification</u>

Verbal third-party verification will be used when written third-party verification is delayed or not possible. When third-party verbal verification is used, staff will be required to complete the Verbal Verification Log, noting with whom they spoke, the date

of the conversation, and the facts provided. If verbal verification is utilized HA must originate the call.

4. Review of Documents

In the event that third-party written or verbal verification is unavailable, or the information has not been verified by the third party within two (2) weeks, HA will annotate the file accordingly and utilize documents provided by the family as the primary source if the documents provide complete information.

All such documents, excluding government checks, will be photocopied and retained in the applicant file. In cases where documents are viewed which cannot be photocopied, staff viewing the document(s) will complete a Certification of Document Viewed.

HA will accept the following documents from the family provided that the document is an original and does not appear to be tampered or altered.

- Printed wage stubs
- Computer print-outs from the employer
- Letters signed by the employer or other appropriate party (provided that the information is confirmed by phone)
- Other documents noted in this Chapter as acceptable verification

HA will accept faxed and photocopied documents when received directly from the generating source.

If third-party written verification is received after documents have been accepted as provisional verification, and there is a discrepancy, HA will utilize the third party verification.

HA will not delay the processing of an application beyond two (2) weeks because a third party information provider does not return the verification in a timely manner.

5. Self-Certification/Self-Declaration

When verification cannot be made by third-party verification or review of documents, families will be required to submit a self-certification. Self-certification requires a notarized and witnessed statement/affidavit/certification/statement under penalty of perjury.

C. RELEASE OF INFORMATION [24 CFR 5.230]

Adult family members will be required to sign the form HUD 9886 Release of Information/Privacy Act form. In addition, all adult family members will be required to sign specific authorization forms when information is needed that is not covered by the HUD form 9886, Authorization for Release of Information/Privacy Act Notice. Each member requested to consent to the release of specific information will be provided with a copy of the appropriate forms for their review and signature.

Refusal to cooperate with the prescribed verification system will result in denial of admission or termination of assistance because it is a family obligation to supply any information and to sign consent forms requested by HA or HUD.

D. ITEMS TO BE VERIFIED [24 CFR 982.516]

All income not specifically excluded by the regulations.

Zero-income status of household.

Full-time student status including High School students who are 18 or over.

Current assets including assets disposed of for less than fair market value in the preceding two years.

Childcare expenses when it allows an adult family member to be employed, to actively seek employment or to further his/her education.

Medical expenses of all family members in households whose head or spouse is elderly or disabled.

Disability assistance expenses to include only those costs associated with attendant care or auxiliary apparatus for a disabled member of the family, which allow an ***adult*** family member to be employed.

Disability for determination of preferences, allowances or deductions.

U.S. citizenship/eligible immigrant status

Social Security Numbers for all family members 6 years of age or older who havebeen issued a social security number.

"Preference" status, as applicable.

Marital status when needed for head or spouse definition.

Verification of Reduction in Benefits for Noncompliance:

Before granting a family's request for rent reduction because of a decrease in benefits, HA will obtain written verification from the Welfare agency stating that the family's benefits were not reduced because of fraud or non-compliance with an economic self-sufficiency requirement.

E. VERIFICATION OF INCOME [24 CFR 982.516]

This section defines the methods HA will use to verify various types of income.

1. Employment Income

Verification forms request the employer to specify the:

- Dates of employment
- Amount and frequency of pay
- Date of the last pay increase
- Likelihood of change of employment status and effective date of any known salary increase during the next 12 months
- Annual earnings
- Estimated income from overtime, tips, bonus pay expected during next 12 months

Acceptable methods of verification in addition to UIV include:

- Employment verification form completed by the employer.
- Check stubs or earning statements, which indicate the employee's gross pay, frequency of pay or year to date earnings.
- W-2 forms plus income tax return forms.

- Income tax returns signed by the family may be used for verifying self-employment income, or income from tips and other gratuities.

Applicants and program participants may be requested to sign an authorization for release of information from the Internal Revenue Service for further verification of income, IRS Form 8121. In cases where there are questions about the validity of information provided by the family, HA will require the most recent federal income tax statements. Confirmation may be made on a case-by-case basis.

2. <u>Social Security, Pensions, Supplementary Security Income (SSI), Disability Income</u>

Acceptable methods of verification in addition to UIV include:

- Benefit verification form completed by agency providing the benefits.
- Award or benefit notification letters prepared and signed by the providing agency.
- Computer report electronically obtained or in hard copy.

A. 3. Unemployment Compensation

Acceptable methods of verification in addition to UIV include:

- Verification form completed by the unemployment compensation agency.
- Computer report electronically obtained or in hard copy, from unemployment office stating payment dates and amounts.
- Payment stubs.

B. 4. Welfare Payments or General Assistance

Acceptable methods of verification in addition to UIV include:

- HA verification form completed by payment provider.
- Written statement from payment provider indicating the amount of grant/payment, start date of payments, and anticipated changes in payment in the next 12 months.
- Computer-generated Notice of Action.
- Computer-generated list of recipients from Welfare Department.

5. Alimony or Child Support Payments

Acceptable methods of verification in addition to UIV include:

- Copy of a separation or settlement agreement or a divorce decree stating amounts and types of support and payment schedules.
- A notarized letter from the person paying the support.
- Copy of latest check and/or payment stubs from Court Trustee. HA must record the date, amount, and number of the check.
- Family's self-certification of amount received and of the likelihood of support payments being received in the future, or that support payments are not being received.

If payments are irregular, the family must provide:

- A copy of the separation or settlement agreement, or a divorce decree stating the amount and type of support and payment schedules.

- A statement from the agency responsible for enforcing payments to show that the family has filed for enforcement.

- A notarized affidavit from the family indicating the amount(s) received.

- A welfare notice of action showing amounts received by the welfare agency for child support.

- A written statement from an attorney certifying that a collection or enforcement action has been filed.

6. <u>Net Income from a Business</u>

In order to verify the net income from a business, HA will review IRS and financial documents from prior years and use this information to anticipate the income for the next 12 months.
Acceptable methods of verification include:

- IRS Form 1040, including Schedule C (Small Business), Schedule E (Rental Property Income), Schedule F (Farm Income). Note: If accelerated depreciation was used on the tax return or financial statement, an accountant's calculation of depreciation expense computed using straight-line depreciation rules.

- Audited or un-audited financial statement(s) of the business.

- Credit report or loan application.

- Documents such as manifests, appointment books, bank statements, and receipts will be used as a guide for the prior six months (or lesser period if not in business for six months) to project income for the next 12 months. The family will be advised to maintain these documents in the future if they are not available.

- Family's self-certification as to net income realized from the business during previous years.

7. <u>Child Care Business</u>

If an applicant/participant is operating a licensed day care business, income will be verified as with any other business.

If the applicant/participant is operating a day care business which may or may not be licensed, HA will require that the applicant/participant complete a form for each customer which indicates: name of person(s) whose child (children) is/are being cared for, phone number, number of hours child is being cared for, method of payment (check/cash), amount paid, and signature of person.

If the family has filed a tax return, the family will be required to provide it.

HA may conduct interim reevaluations every 120 days and require the participant to provide a log with the information about customers and income.

If childcare services were terminated, a third-party verification will be sent to the parent whose child was cared for.

If the child care business provides day care services for the State of Missouri, a third party income verification will be sent to the Family Support Division.

8. Recurring Gifts

The family must furnish a self-certification, which contains the following information:

- The person who provides the gifts
- The value of the gifts
- The regularity (dates) of the gifts
- The purpose of the gifts

9. Zero Income Status

Families claiming to have no income will be required to execute verification forms to determine that forms of income such as unemployment benefits, TANF, SSI, etc. are not being received by the household. HA will request information from the Missouri Department of Revenue. Families claiming to have not income will have to certify to this status at least quarterly when notified by HA.

10. Full-time Student Status

Only the first $480 of the earned income of full time students, other than head, co-head, or spouse, will be included towards family income. Financial aid, scholarships and grants received by full time students are not family income.

Verification of full time student status includes:

- Written verification from the registrar's office or other school official.
- School records indicating enrollment for sufficient number of credits to be considered a full-time student by the educational institution.

F. INCOME FROM ASSETS [24 CFR 982.516]

1. Savings Account Interest Income and Dividends

Acceptable methods of verification include:

- Account statements, passbooks, certificates of deposit, or HA verification forms completed by the financial institution.
- Broker's statements showing value of stocks or bonds and the earnings credited the family. Earnings can be obtained from current newspaper quotations or oral broker's verification.
- IRS Form 1099 from the financial institution provided that HA must adjust the information to project earnings expected for the next 12 months.

2. Interest Income from Mortgages or Similar Arrangements

Acceptable methods of verification include:

- A letter from an accountant, attorney, real estate broker, the buyer, or a financial institution stating interest due for next 12 months. (A copy of the check paid by the buyer to the family is not sufficient unless a breakdown of interest and principal is shown.)
- Amortization schedule showing interest for the 12 months following the effective date of the certification or re-certification.

3. Net Rental Income from Property Owned by Family

Acceptable methods of verification include:

- IRS Form 1040 with Schedule E (Rental Income).
- Copies of latest rent receipts, leases, or other documentation of rent amounts.
- Documentation of allowable operating expenses of the property: tax statements, insurance invoices, and bills for reasonable maintenance and utilities, and bank statements or amortization schedules showing monthly interest expense.
- Lessee's written statement verifying rent payments to the family and family's self-certification as to net income realized.

G. VERIFICATION OF ASSETS

1. Family Assets

HA will require the information necessary to determine the current cash value of the family's assets, (the net amount the family would receive if the asset were converted to cash).

Acceptable verification may include any of the following:

- Verification forms, letters, or documents from a financial institution or broker.
- Passbooks, checking account statements, certificates of deposit, bonds, or financial statements completed by a financial institution or broker.
- Quotes from a stockbroker or realty agent as to net amount family would receive if they liquidated securities or real estate.
- Real estate taxes statements if the approximate current market value can be deduced from assessment.
- Financial statements for business assets.
- Copies of closing documents showing the selling price and the distribution of the sales proceeds.
- Appraisals of personal property held as an investment.
- Family's self-certification describing assets or cash held at the family's home or in safe deposit boxes.

2. Assets Disposed of for Less than Fair Market Value (FMV) During Two Years Preceding Effective Date of Certification or Recertification

For all Certifications and Re-certifications, HA will obtain the Family's certification as to whether any member has disposed of assets for less than fair market value during the two years preceding the effective date of the certification or re-certification.

If the family certifies that they have disposed of assets for less than fair market value, verification or certification is required that shows: (a) all assets disposed of for less than FMV, (b) the date they were disposed of, (c) the amount the family received, and (d) the market value of the assets at the time of disposition. Third party verification will be obtained wherever possible.

H. VERIFICATION OF ALLOWABLE DEDUCTIONS FROM INCOME

[24 CFR 982.516]

1. Child Care Expenses

Written verification from the person who receives the payments is required. If the childcare provider is an individual, s/he must provide a statement of the amount they charge and receive from the family for their services. Verifications must specify the child care provider's name, address, telephone number, Social Security Number, the names of the children cared for, the number of hours the child care occurs, the rate of pay, and the typical yearly amount paid, including school and vacation periods. Family's certification as to whether any of those payments have been or will be paid or reimbursed by outside sources.

Child care expenses are deducted only to the extent that they are not reimbursed and reflect a reasonable charge; and are paid for the care of children under the age of 13.

As stated elsewhere in this document, child care is allowable for the following reasons:

- Child-Care to Work. Child-Care to Work. Child-Care to Work. Child-Care to Work

  The maximum child-care allowed will be based on the amount earned by the person enabled to work. The "person enabled to work" will be the adult member of the household who earns the least amount of income from working.

- Child-Care for School. Child-Care for School. Child-Care for School. Child-Care for School

  The HA will compare the number of hours the family member is attending school relative to the number of child care hours to determine the number of child care hours that will be included in the rent calculation.

- Rate of Expense. Rate of Expense. Rate of Expense. Rate of Expense

  The HA will survey the local day care providers in the area/community to determine a reasonableness standard. The determination will be made only on a reasonable HOURLY rate. The reasonable rate will be determined based upon the type of care chosen by the family, i.e., center-based or in-home care; State provided care or private care.

- Actively Seek Employment

  The HA will obtain evidence that the individual is fulfilling welfare-to-work requirements or the requirements for receiving unemployment compensation; or is otherwise actively seeking employment. Written verification from a local or state government agency that oversees work-related activities will be accepted.

  If third party verification is not possible, HA will review documents provided by the family and/or a notarized statement from the family member attesting to his or her efforts to find employment.

2. Medical Expenses

Families, who claim medical expenses will be required to submit a certification as to whether or not any expense payments have been, or will be, reimbursed by an outside source. One or more of the methods listed below will verify all expense claims:

- Written verification by a doctor, hospital or clinic personnel, dentist, Pharmacist, of (a) the anticipated medical costs to be incurred by the family and regular payments due on medical bills; and (b) extent to which those expenses will be reimbursed by insurance or a government agency.

- Written confirmation by the insurance company or employer of health insurance premiums to be paid by the family.

- Written confirmation from the Social Security Administration of Medicare premiums to be paid by the family over the next 12 months. A computer printout will be accepted.

- For attendant care:

  HA will require certification from a qualified professional having knowledge of the person's need for an attendant and who can verify the attendant is necessary as a medical expense.

  Attendant's written confirmation of hours of care provided and amount and frequency of payments received from the family or agency (or copies of canceled checks the family used to make those payments) or stubs from the agency providing the services.

- Receipts, canceled checks, or pay stubs that verify medical costs and insurance expenses likely to be incurred in the next 12 months.

- Copies of payment agreements or most recent invoice that verify payments made on outstanding medical bills that will continue over all or part of the next 12 months.

- Receipts or other record of medical expenses incurred during the past 12 months that can be used to anticipate future medical expenses. HA may use this approach for "general medical expenses" such as non-prescription drugs and regular visits to doctors or dentists, but not for one time, nonrecurring expenses from the previous year.

- HA will use mileage at the IRS rate, or cab, bus fare, or other public transportation cost for verification of the cost of transportation directly related to medical treatment.

3. <u>Assistance to Persons with Disabilities</u> [24 CFR 5.611(c)]

- In All Cases:

Written certification from a reliable, knowledgeable professional that the person with disabilities requires the services of an attendant and/or the use of auxiliary apparatus to permit him/her to be employed or to function sufficiently independently to enable another family member to be employed.

Family's certification as to whether they receive reimbursement for any of the expenses of disability assistance and the amount of any reimbursement received.

- Attendant Care:

Attendant's written certification of amount received from the family, frequency of receipt, and hours of care provided.

Certification of family and attendant and/or copies of canceled checks family used to make payments.

- Auxiliary Apparatus:

Receipts for purchases or proof of monthly payments and maintenance expenses for auxiliary apparatus.

In the case where the person with disabilities is employed, a statement from the employer that the auxiliary apparatus is necessary for employment.

I. <u>VERIFYING NON-FINANCIAL FACTORS</u> [24 CFR 982.153(b)(15)]

1. <u>Verification of Legal Identity and Familial Relationships</u>

HA will require applicants to furnish verification of legal identity for all family members. The documents listed below will be considered acceptable verification of legal identity for adults. If a document submitted by a family is illegible or otherwise questionable, more than one of these documents may be required.

- Certificate of Birth, naturalization papers
- Church issued baptismal certificate
- Current, valid Driver's license
- U.S. military discharge (DD 214)
- U.S. passport
- Voter's registration
- Company/agency Identification Card
- Government issued Identification Card
- Verification of guardianship is:
  - Court-ordered assignment
  - Affidavit of parent
  - Verification from social services agency

Documents considered acceptable for the verification of legal identity for minors may be one or more of the following:

- Certificate of Birth
- Adoption papers
- Custody agreement
- Health and Human Services ID
- School records

If none of these documents can be provided, a third party who knows the person may, at HA's discretion, provide certification to be used as verification.

2. <u>Verification of Marital Status (when necessary to determine custody of children)</u>

- Verification of divorce status will be a certified copy of the divorce decree, signed by a Court Officer.
- Verification of a separation may be a copy of court-ordered maintenance or other records.
- Verification of marriage status is a marriage certificate.

3. <u>Verification of Permanent Absence of Family Member</u>

If an adult member who was formerly a member of the household is reported permanently absent by the family,HA will consider any of the following as verification:

- Divorce Decree
- Legal separation agreement
- Order of protection/restraining order obtained by one family member against another
- Proof of another home address, such as utility bills, canceled checks for rent, driver's license, or lease or rental agreement, if available.
- Statements from other agencies such as social services or a written statement from the landlord or manager that the adult family member is no longer living at that location.
- If the adult family member is incarcerated, a document from the Court or correctional facility should be obtained stating how long they will be incarcerated.
- If no other proof can be provided, HA will accept a self-certification from the head of household or the spouse or co-head, if the head is the absent member.

5. Verification of Change in Family Composition

HA may verify changes in family composition (either reported or unreported) through letters, telephone calls, utility records, inspections, landlords, neighbors, credit data, school or DMV records, and other sources.

6. Verification of Disability

Verification of disability must be receipt of SSI or SSA disability payments under Section 223 of the Social Security Act or 102(7) of the Developmental Disabilities Assistance and Bill of Rights Act (42 U.S.C. 6001(7) or verified by appropriate diagnostician such as physician, psychiatrist, psychologist, therapist, rehab specialist, or licensed social worker, using the HUD language as the verification format.

J. VERIFICATION OF CITIZENSHIP/ELIGIBLE IMMIGRANT STATUS

[24 CFR 5.508, 5.510,5.512, 5.514]

To be eligible for assistance, individuals must be U.S. citizens or eligible immigrants. Individuals who are neither may elect not to declare their status. Eligible immigrants must fall into one of the categories specified by the regulations and must have their status verified by Immigration and Naturalization Service (INS). Each family member must declare their status. Assistance cannot be delayed, denied, or terminated while verification of status is pending except that assistance to applicants may be delayed while HA informal review is pending.

1. Citizens or Nationals of the United States

All applicants and participants are required to sign a declaration under penalty of perjury. HA will require citizens to provide documentation of citizenship. Acceptable documentation will include at least one of the following original documents:

- United States birth certificate
- United States passport
- Resident alien/registration card
- Social Security card

- Other appropriate documentation as determined by HA

2. Eligible Immigrants who were Participants and 62 or over on June 19, 1995

Eligible Immigrants who were Participants and 62 or over on June 19, 1995 are required to sign a declaration of eligible immigration status and provide proof of age.

3. Non-citizens with eligible immigration status

Non-citizens with eligible immigration status must sign a declaration of status and verification consent form and provide their original immigration documents which are copied front and back and returned to the family. HA verifies the status through the INS SAVE system. If this primary verification fails to verify status, HA must request within ten days that the INS conduct a manual search.

4. Ineligible family members

Ineligible family members who do not claim to be citizens or eligible immigrants must be listed on a statement of ineligible family members signed by the head of household or spouse.

5. Non-citizen students on student visas

Non-citizen students on student visas are ineligible members even though they are in the country lawfully. They must provide their student visa but their status will not be verified and they do not sign a declaration but are listed on the statement of ineligible members.

6. Failure to Provide

If an applicant or participant family member fails to sign required declarations and consent forms or provide documents, as required they must be listed as an ineligible member. If the entire family fails to provide and sign as required, the family may be denied or terminated for failure to provide required information.

7. Time of Verification

For applicants, verification of U.S. citizenship/eligible immigrant status occurs at the same time as verification of other factors of eligibility for final eligibility determination at the time of initial application. HA will not provide assistance to any family prior to the affirmative establishment and verification of the eligibility of the individual or at least one member of the family. HA will verify the U.S. citizenship/eligible immigration status of all participants no later than the date of the family's first annual reexamination following the enactment of the Quality Housing and Work Responsibility Act of 1998.

For family members added after other members have been verified, the verification occurs at the first re-certification after the new member moves in. Once verification has been completed for any covered program, it need not be repeated except that, in the case of port-in families, if the initial HA does not supply the documents, HA must conduct the determination.

8. Extensions of Time to Provide Documents

HA will grant an extension of 30 days for families to submit evidence of eligible immigrant status.

9. Acceptable Documents of Eligible Immigration

The regulations stipulate that only the following documents are acceptable unless changes are published in the Federal Register.

- Resident Alien Card (I-551)
- Alien Registration Receipt Card (I-151)
- Arrival-Departure Record (I-94)
- Temporary Resident Card (I-688)
- Employment Authorization Card (I-688B)
- Receipt issued by the INS for issuance of replacement of any of the above documents that shows individual's entitlement has been verified

A birth certificate is not acceptable verification of status. All documents in connection with U.S. citizenship/eligible immigrant status must be kept five years.

K. VERIFICATION OF SOCIAL SECURITY NUMBERS [24 CFR 5.216]

Social security numbers must be provided as a condition of eligibility for all family members age six and over if they have been issued a number. Verification of Social Security numbers will be done through a Social Security Card issued by the Social Security Administration. If a family member cannot produce a Social Security Card, only the documents listed below showing his or her Social Security Number may be used for verification. The family is also required to certify in writing that the document(s) submitted in lieu of the Social Security Card information provided is/are complete and accurate:

- A driver's license
- Identification card issued by a Federal, State or local agency
- Identification card issued by a medical insurance company or provider (including Medicare and Medicaid)
- An identification card issued by an employer or trade union
- An identification card issued by a medical insurance company
- Earnings statements or payroll stubs
- Bank Statements
- IRS Form 1099
- Benefit award letters from government agencies
- Retirement benefit letter
- Life insurance policies
- Court records such as real estate, tax notices, marriage and divorce, judgment or bankruptcy records
- Verification of benefits or Social Security Number from Social Security Administration

SECTION VII

COMPUTING TOTAL TENANT PAYMENT AND TENANT RENT

C. Calculation of Total Tenant Payment and HAP Maximum Subsidy

The HA will compute Annual and Adjusted Income and Total Tenant Payment.

1. Section 8 Project-Based Certificate.

Section 8 Project-Based Certificate Program, Total Tenant Payment, will be calculated (using the definitions of annual income and adjustments as the greater of:

a.30% of the family's adjusted monthly income,
a. 10% of the gross monthly family income, or
c. Minimum rent of $50.00

Any allowance for utilities will be deducted from the Total Tenant Payment to determine the Tenant Rent. Where the Utility Allowance exceeds the Total Tenant Payment, the tenant will pay $0 rent and the difference between the utility allowance and the Total Tenant Payment will be issued to the tenant as a Utility Reimbursement for use towards utilities.

The Housing Assistance Payment paid by the HA will be the difference between the Contract Rent to the owner and the Tenant Rent (plus any Utility Reimbursement).

2. Section 8 Voucher Program.

Under the Voucher program, the Tenant Rent will vary based upon the Total Tenant Payment and the Contract Rent and its relationship to the Payment Standards.

At the time of the briefing, the HA's Maximum Subsidy Payment is calculated. The Maximum Subsidy is the difference between the HA's applicable Payment Standard for the unit size issued and 30% of the family's adjusted income. This is the maximum that the HA will pay as subsidy for the household.

Once the unit is selected, the family's portion of the rent is calculated as the difference between the gross rent (Contract Rent plus utilities) and the *appropriate* Payment Standard. The appropriate Payment Standard is the lesser of the standard for the unit size issued, or the unit size selected. The tenant's portion may be more or less than 30% of the family's monthly adjusted income depending on the total rent of the unit

selected by the family, except that the family may never pay less than the greater of 10% of monthly gross family income or $50.

The Housing Assistance Payment will equal the difference between the Payment Standard and 30% of the family's monthly adjusted income, except that the family must pay the greater of 10% of gross family income or $50.00(minimum rent amount). In that case, the HA will pay the difference between the Contract Rent and what the tenant pays to the owner as the Housing Assistance Payment.

j. In the Housing Choice Voucher Program the monthly assistance payment for a family that rents for a gross rent below the payment standard for the family is the gross rent minus the total tenant payment (TTP), as computed by a statutory formula. The PHA approves a tenancy for initial occupancy of a dwelling unit by a family with tenant-based assistance under the program, and where the gross rent of the unit exceeds the applicable payment standard for the family, the family share must not exceed 40% of the family's adjusted monthly income. The determination of adjusted monthly income must be based on verification information received by the PHA no earlier than 60 days before the PHA issues a voucher to the family.

B. Utility Allowance

The utility allowance used is based on the actual size of the unit the family selects regardless of the size authorized on the family's Certificate or Voucher.

As required, the Utility Allowance Schedule will be reviewed on an annual basis and adjusted as needed.

At least annually, the HA shall determine whether there has been a substantial change in utility rates that were used to calculate allowances. If there has been a change of more than 10% individually or cumulatively, the utility allowance will be adjusted to reflect such increases. Such change shall be processed according to federal regulations.

The HA will give tenants a utility allowance for stoves and refrigerators when these appliances are provided by the tenant. The determination regarding provision of appliances is between the landlord and the tenant; the HA will not be involved.

C. Payment Standards

1. At least annually the HA will review and when necessary, revise Payment Standards between 90% and 110% of the published Fair Market Rent. Copies of Payment Standards currently utilized may be obtained from the HA.
2. Mobile Home Pads Payment Standards – 40% of the two bedroom published FMR used in calculating the subsidy amount.

A. Minimum Rent Hardships

Any family unable to pay the Minimum Rent of $50.00 due to extenuating circumstances listed below may request in writing form the HA a waiver on this. Extenuating circumstances may include the following:

3. Lost eligibility for, or are awaiting an eligibility determination for a Federal, State or local assistance program
4. Would be evicted because unable to pay the minimum rent
5. Income has decreased due to changes circumstance, including: Loss of Employment, death in the family or hospitalization
6. Extended illness
7. Other circumstances as determined by HA

Participant must request the "Hardship Exemption" in writing and written verification must be obtained to determine circumstance. Once the "Hardship Exemption" is received HA will adjust tenant rent share and pay the additional HAP amount to the landlord effective on the first of the next month.

HA will determine through documentation/written verification process whether a qualifying hardship exists, and, if so whether such a hardship is temporary or long term. If it is determined that there is no hardship or the hardship is temporary (less than 90 days) tenant will be required to pay back any amount of rent paid by HA office on tenant's behalf.

SECTION VIII

SUBSIDY STANDARDS

A. Bedroom Size Assignment

Bedroom size assignments on certificates/vouchers will be made so that no less than one (1) and no more than two (2) persons will occupy a bedroom. No assignments of bedroom size on a Certificate/Voucher will be made which require use of the living room for sleeping.

In the case of a participant who shares custody of a child (or children), or has primary care, the child shall be included when considering the assignment of bedroom size.

The following subsidy standards will determine the number of bedrooms required in determining certificate/voucher size.

Single Person	0 bedroom
Single Person	1 bedroom
1 Parent and 1 Child under age 4	1 bedroom
1 Parent and 1 Child over age 4	2 bedroom
1 Parent and 2 Children, opposite sex	3 bedroom
1 Parent and 2 Children, same sex	2 bedroom
2 Parent and 1 Child	2 bedroom
2 Parent and 2 Children, opposite sex	3 bedroom
2 parents and 3 children	3 bedroom
2 adults of same sex(bedroom for each)	2 bedroom

A separate bedroom may be provided for an individual family member if the family presents documentation sufficient to convince the HA that the individual's physical or mental health requires separate sleeping quarters. This will be in the form of written documentation from the family's physician, psychiatrist, or medical-social worker.

SECTION IX

ISSUANCE OF CERTIFICATES/VOUCHERS AND BRIEFING OF FAMILIES

A. Selection from the Waiting List

Applicants are selected from the waiting list based on date and time application is submitted and verified qualification for preference. If federal preferences are re-instated, the HA will select applicants when preference status has been verified.

B. Notification and Response

Once an applicant's program eligibility and qualification for Preference has been verified; the family's annual income and TTP has been calculated; and the subsidy size has been determined, the family will be informed, in writing of their eligibility status. All eligible applicants are required to attend a briefing at which the family will be issued the Voucher and will be provided with a detailed overview of the Section 8 Program. The program briefing may be group or individual.

If an applicant fails to appear, without prior explanation to the HA, for a scheduled appointment to receive a briefing and a voucher, such failure shall result in removal from the waiting list and the person may reapply, provided that applications are being accepted at that time.

C. Briefings

1. Briefing Packets.

   a. At the family briefing, the family will receive a Section 8 Housing Voucher briefing packet which will include explanations of applicant and owner responsibilities under the programs.

      The briefing packet shall contain:

      (i) Term of Voucher (60-120 days), a description of the HA's Voucher extension or suspension policies and how to request them.

      (ii) How HAP is determined.

      (iii) How maximum rent is determined.

      (iv) What family should consider when deciding whether to lease a unit, such as: unit condition; reasonableness of rent, cost of tenant paid utilities; whether the unit is energy efficient; and proximity of unit to public transportation,employment, schools and shopping.

(v) Where family may lease a unit, including information on portability.

(vi) HUD required "lease addendum".

(vii) Request for Tenancy Approval, explanation of how to request approval to lease a unit., and Sample Disclosure on lead based paint.

(viii) HA policy on providing information about family to prospective owners.

(ix) The HA's subsidy standards, including any exceptions to these standards.

(x) HUD brochure entitled “A Good Place to Live”.

(xi) HUD Lead Based Paint brochure.

(xii) Fair Housing Brochure and information, HUD-401 and a Discrimination Complaint Form HUD-903.

(xiii) List of landlords or real estate agents who may be willing to lease a unit or may be able to help the family locate a unit.

(xiv) Notice that if family includes a disabled person they may request a current listing of available accessible units known to the HA.

(xv) Family Obligations under the Section 8 program.

(xvi) Grounds on which the HA may terminate assistance.

(xvii) Informal hearing procedures.

(xviii) The HA's policy on providing information to owners about a participant's tenancy history.

(xix) Information regarding the Family Self-Sufficiency Program.

(xx) Additional information as determined by the HA.

2. Briefing Session.

a. The briefing session will be informal with the opportunity for the applicants to ask questions to ensure that they have an adequate understanding of the program and procedures to be followed.

b. Briefing session topics will include:

(i) Description of how the program works.

(ii) Family and owner responsibilities.

(iii) Where the family may lease a unit, including renting a dwelling unit inside or outside the HA's jurisdiction.

(iv) Portability.

(v) Advantages of moving to an area that does not have a high concentration of poor families.

j. Description of the Family Self-Sufficiency program and an explanation of how to apply.

k. Voucher holders (especially disabled) are notified in Briefing if they need additional assistance in locating a unit to contact our office for help.

c. The family will be notified that they must report any changes in family composition and/or income during the period between issuance of the Voucher and execution of the HAP/Voucher Contract. The HA will follow up as necessary before execution of lease and contract.

D. Voucher Suspensions Extensions

1. Suspensions. The Voucher shall expire at the end of 60 - 120 days unless within that time the family submits a Request for Tenancy Approval (RFTA), at which time a "suspension" may occur. (The time between the date the RFTA is submitted and the date the HA determines whether to lease or deny the RFTA is not counted against the Voucher time limit.)

2. Extensions. If a Voucher is about to expire, a family may submit the Voucher to the HA with a written request for an extension. The applicant must present evidence justifying the extension which is satisfactory to the HA. If the family is unable to locate a unit due to circumstances beyond the family's control (such as, for example, extreme illness, death, birth of a child), the HA may issue an extension. Length of extension will be determined by the HA based upon the circumstances.

SECTION X

UNIT SELECTION AND APPROVAL

A. Locating a Unit

It is the responsibility of the Voucher holder to locate a unit suitable to the holder's needs and desires.

The holder of a Voucher may select the dwelling unit which the holder already occupies if the unit meets program qualifications.

Information regarding landlords interested in participating in the program will be offered to the Voucher holder. Voucher holders will be encouraged to locate their own housing, but will also be informed that they should periodically contact the HA staff in order to report their progress or request any new information regarding available units. Owners who have committed "fraud, bribery or any other corrupt or criminal act" in connection with a federal housing program may be denied. Owners may be denied participation for reasons listed under item “G” of this Section.

Whenever possible, staff will provide a list of accessible units known to the HA and assistance in locating a dwelling unit to those families who, because of age or disability, are unable to find suitable units.

To those applicants reporting apparent discrimination, assistance will be provided in preparing the required HUD Discrimination Complaint Form and in locating available housing elsewhere.

If a Voucher holder elects to move to a different jurisdiction, they must follow HUD's portability guidelines.

Special accommodation requests for the disabled will need to be requested in writing. Forms are available at the office and information on how to request one will be posted in the lobby.

Types of accommodations our office may provide, but are not limited to:

1. Transportation to look at housing
2. Interpreters
3. Referrals to disabled organizations
4. List of accessible units
5. Wheel chair accessible building
6. Loans up to $200 for security deposits and utility deposits
7. Participating in Shared Housing
8. May allow unit to exceed rent reasonableness as a special accommodation to unit if no other funding resources are available

All accommodation requests will be reviewed and a determination will be made if reasonable.

A. Shared Housing

Shared Housing is a single housing unit occupied by a disabled assisted family and another disabled resident or residents and they are unrelated. The shared unit consists of both common spaces for use by the occupants of the unit and separate private space for each assisted family. The owner of a shared housing unit may reside in the unit, but housing assistance may not be paid on behalf of the owner. The owner may not be related by blood or marriage to the assisted family unless a waiver of the rule is requested and approved by the HA.

Shared Housing must have supportive services in place to meet the needs of the disabled resident. These services include, but are not limited to, transportation, supervision, and social services for the disabled resident.

The payment standard for a family in shared housing is the lower of the payment standard for the family unit size or the pro-rata share of the payment standard for the shared housing unit size.

C. Portability

Portability is the ability of a family issued a Voucher, to move anywhere within the State of Iowa or anywhere in the United States where a tenant-based program is administered.

If neither household head or spouse resided in permanent housing in the jurisdiction of the HA at the time of application, the family must lease a unit in the HA jurisdiction for one year before becoming eligible for portability.

If a family's initial lease is outside the jurisdiction of the HA, they must be income eligible for the area in which they will lease.

The receiving HA may offer to absorb families from another HA into their local Voucher Program, according to availability and eligibility.

The amount of housing assistance shall be based on the applicable Payment Standard in effect at the receiving HA at the time the Voucher is received.

The receiving HA will promptly notify the initial HA if the family has submitted a Request for Lease Approval, whether they will absorb or administer the Voucher, if the family ceases to be a current participant in the initial HA's Voucher Program, or has requested to move to another HA jurisdiction.

The receiving HA will perform all functions normally associated with providing assistance to a family in the Voucher Program, including determining unit size, lease approval, annual re-examination of income, annual inspection of the unit to meet Housing Quality Standards, and executing the HAP Contract. If the receiving HA does not absorb the family into it's program, they will bill the initial HA for the Housing Assistance Payment on behalf of the family. The receiving HA will be eligible to receive 80% of administrative fees, and all hard-to-house fees associated with the portable Voucher being administered. The initial and receiving HAs must comply with financial procedures and billing and payment deadlines required by HUD.

If the family selects an area where more than one Housing Authority may have jurisdiction, then the HA may select which Housing Authority in the new area shall be the receiver.

Portability requests to higher cost areas may be denied if HA does not have sufficient funding.

D. Applicant Flexibility on Unit Size Selection

It is emphasized that the unit size listed on the applicant's Voucher does not preclude the family from selecting either a smaller or larger-sized unit provided the following requirements are met:

1. Larger-Sized Units.

   Voucher: The family may select a larger-sized unit than listed on its Voucher. The family will be required to pay any additional cost for the larger size unit. The family cannot pay more than 40% of their monthly adjusted income towards the gross rent.

2. Smaller-Sized Units.

   The family may select a smaller-sized unit provided there is at least one sleeping room or living/sleeping room of appropriate size for each two persons in the household. The applicable Voucher Payment Standard will be that of the smaller unit size, which will lower the rent subsidy paid by the Housing Authority.

E. Eligible and Ineligible Housing Units

l. Eligible Units.

   a. The types of housing units that are eligible for the Voucher Programs are: apartments, single family homes, townhouses, duplexes, four-plexes, mobile homes, and assisted living units.

   b. Owners of manufactured homes can obtain housing assistance to rent mobile home pads.

   c. Single Room Occupancy (SRO) Housing is eligible for assistance on the Certificate/Voucher Program if:

      (i) The property is located in an area where there is significant demand for SRO units (as determined by HUD),

      (ii) The HA approves the use of SRO units for such purposes,

      (iii) The HA certifies to HUD that the property meets applicable local health and safety standards for SRO housing.

d. Some units or developments sponsored by the FMHA may be eligible for residency by a certificate/voucher holder if occupancy does not create a situation of duplicate subsidy.

2. Ineligible Units.

a. Any Public Housing or Indian Housing unit.

b. Units in which the family is being assisted under other Section 8 subsidy programs.

c. Nursing homes, board and care homes, or facilities providing continual psychiatric, medical or nursing services.

d. Colleges or other school dormitories.

e. Units on the grounds of penal, reformatory, medical, mental and similar public or private institutions.

f. Housing owned in whole or in part, by the family to be assisted.

h. Units that are owned by landlords that have been barred from participating in the program.

i. The owner (including a principal or other interested party) is the parent, child, grandparent, grandchild, sister or brother of any member of the family, unless the HA has determined (and has notified the owner and the family of such determination) that approving rental of the unit, notwithstanding such relationship, would provide reasonable accomodation for a family member who is a person with disabilities.

F. Information Provided to Prospective Landlords About Participants

The HA will provide the following information about program participants to prospective landlords, if requested:

a. current address; and

b. if known, name and address of owner of participant's current and prior address.

c. information about family owing HA money.

The HA will inform all property owners interested in participating in the Section 8 Program that tenant screening for payment and other lease compliance behavior is the owner's responsibility, and is not performed by the HA.

The HA may offer the owner other information in the HA's possession about the family including information about the tenancy history of family members or about drug trafficking by family member. The same types of information will be provided to all families and all owners.

G. Security Deposits

Property owners have the right to request security deposits from Section 8 tenants. Security deposits collected by owners cannot be in excess of private market practice. Security deposits cannot be in excess of what is allowable under the Iowa State Tenant-Landlord Law or in excess of the amounts charged by owners to unassisted rental units.

It is the family's responsibility to pay the security deposit to the owner. The HA will not provide advances to assist families in meeting security deposits, but will provide assistance by referring the family to other potential private or public sources if the family is unable to pay their security deposit.

After the family moves from the unit, the owner must treat the deposit in accordance with State law. The owner may use the security deposit, including interest earned, as reimbursement for any unpaid Tenant Rent, damages to the unit, or other amounts which the family owes under the lease. The owner must give the family a written statement listing all items charged against the security deposit and the amount charged for each item. It is the responsibility of the owner/landlord to notify the tenant of the move-out inspection. After deducting the amount used as reimbursement, the owner must promptly refund the full amount of the balance to the family. Any interest earned on a rental deposit during the first five years of a tenancy shall become property of the landlord. The family must provide a forwarding address or delivery instructions to the landlord upon move out. If the family fails to provide a forwarding address within one year from the termination of the tenancy, the rental deposit shall revert to the landlord and the tenant will be deemed to have forfeited all rights to the rental deposit.

For the pre-9/95 Section 8 Certificate/Voucher contracts and Moderate Rehabilitation Units: If at the time of initial execution of the lease the owner wishes to collect a security deposit, the maximum amount shall be the greater of one month's Total Tenant Payment or $50. However, this amount shall not exceed the maximum amount allowance under Iowa state law--two months' rent.

H. Approval of Property Owner

The HA will not approve a unit if any one of the following conditions exists:

1. The owner is debarred, suspended or subject to a limited denial of participation by HUD.

2. If directed by HUD because the Federal government has instituted an administrative or judicial action against the owner for violation of the Fair Housing Act or other Federal equal opportunity requirements and such action is pending.

3. If directed by HUD because a court or administrative agency has determined that the owner has violated the Fair Housing Act or other Federal equal opportunity requirements.

4. The HA, at its discretion, may deny participation for a period of five (5) years to an owner if any one of the following conditions exists:

   a. The owner has violated obligations under any Section 8 HAP contract;

   b. The HA has obtained documentation that the owner has committed fraud, bribery or any other corrupt or criminal action in connection with any Federal housing program;

   c. The owner has engaged in drug trafficking and/or violent criminal activity;

   d. The owner has a history or practice of non-compliance with the HQS for units leased under the tenant-based programs, or with applicable housing standards for units leased with project-based Section 8 assistance or leased under any other Federal housing program;

m. The owner has a history or practice of renting units that fail to meet state or local housing codes; *or*

n. The owner has not paid state or local real estate taxes, fines or assessments.

o. The owner is not current on City rental code inspection fees and registration fees for the property address listed on the Request for Tenancy.

The individual circumstances and seriousness of such conditions will be considered prior to disapproval of an owner.

If the HA determines that the owner is approved and that the lease does not violate any program rules, the lease may be approved. If the lease cannot be approved, the owner and subsidy holder will be notified and provided with the reason and an opportunity to correct any deficiencies.

I. Approval of Owner's Proposed Lease

p. The HA may adopt a model lease for the Section 8 Voucher program, however owners may elect to use their own lease. For any new tenants leasing on or after October 2, 1995, all leases must include the Section 8 lease addendum language verbatim. If the owner selects his/her own lease, the Voucher holder must submit a copy for review at the time the RFTA is submitted. The HA will review all leases proposed by property owners to ensure that:

Lease Form:

q. Must be standard form used by owner for unassisted tenants
r. Owners may choose to use HA lease if owner has no standard lease form
s. Lease must comply with State/local law and include HUD Tenancy Addendum

Required Lease Information:

t. Names of the owner and the tenant
u. Unit address and apartment number
v. Amount of monthly rent
w. Term of lease and provisions for renewal
x. Utilities and appliances to be supplied by the owner and the family

Lease Term:

y. Initial lease term for one year, except
z. HA may approve shorter initial lease term if:
    a. Would improve housing opportunities AND
    b. Shorter term is current market practice

Changes in Lease:

aa. Any changes to lease must be agreed upon by owner and tenant
bb. Changes must be in writing
cc. Owner must immediately give copy of changes to HA

J. Rent Reasonableness.

Rent reasonableness will be determined for Voucher holders at initial lease up and each annual certification thereafter. Documentation of reasonable rent will be included in each participant's file signed and dated by the staff member responsible for determination. The reasonableness of the rent requested by the owner will be determined on the basis of:

a. HA market survey information on rents for comparable units in the area;

dd. Location, quality, size, unit type, and age of the contract unit.

ee. Amenities, housing services, maintenance, and utilities to be provided by the owner in accordance with the lease.

ff. The rent to owner must be no more than rent charged by owner for comparable unassisted units on the premises

The HA will collect and maintain substantial data to determine and support rent reasonableness for all program rents. Data will be purged and updated regularly by Section 8 staff.

If the HA determines that the amount of rent requested by the owner is not reasonable, a reasonable rent will be computed, and a counter-offer will be made to the owner. Failure by the owner to lower the rent will result in disapproval of the unit for the program.

K. Housing Quality Standards Inspections

1. Inspection Procedures.

When a family selects a unit and submits a Request for Tenancy Approval, the HA will inspect the unit for compliance with HQS. The inspection will be conducted within a reasonable time after the family submits a request for tenancy approval and when the unit is available.

The HA will use an approved HUD Housing Quality Standards (HQS) inspection form. The inspection form is maintained in the tenant file. Copies may be sent to both the owner and the tenant on request. In the case of any "fail" items, a re-inspection is completed prior to approval of any lease. In the case of any "inconclusive items," further documentation of the acceptability of the items will be required, or a re-inspection will be completed to confirm acceptability of the unit.

The HA has upgraded their inspection standards by adding the additional requirements:

1. Use of extension cords will be prohibited
2. Requirement of boiler and furnace inspections every 7 years

The various types of inspections include: annual, move-in, move-out, complaint and special. The HA will inspect each dwelling unit leased to an eligible family at least annually and at such other times as may be necessary to insure that the owner is maintaining the unit in accordance with HQS and is providing the agreed upon utilities and other services. The annual inspection will be performed annually and must be conducted within 365 days of the previous inspection.

The HA encourages that both the owner and tenant are present during inspections. The HA will notify the landlord and/or tenant informing them of the inspection date and time. The landlord is responsible for notifying the tenant of the date and time of the move-out inspection.

When a unit fails the HQS inspection, the HA will notify the owner of the failed item(s) and the required time to repair (24 hours for emergency items, 30 days for other non-emergency items).

The following items are considered emergency items:

a. No heat between October 1 and May 1.

b. No electricity.

c. No gas.

d. No running water.

e. Natural gas leak or fumes.

f. Major plumbing leaks or flooding (such as sewer backup or stoppage).

g. Any electrical outlet, switch, stationary light fixture, fuse box or circuit breaker that smokes, sparks or short circuits, creating a fire hazard.

h. Broken or missing lock on any dwelling unit doors accessible to the outside of the dwelling unit.

i. Uninhabitable units due to fire, tornadoes, destroyed or vandalized property that prevent a tenant from using the bathroom or kitchen or from entering the dwelling unit.

j. No smoke detector or non-working smoke detector.

k. Any matter considered Life Threatening, Health and Safety, or potential

If the owner fails to take corrective action within the time prescribed in the notice, the HA may exercise any of its rights or remedies under the contract, including abatement of Housing Assistance Payments (even if the family continues in occupancy) and termination of the contract. If the family wishes to be re-housed in another dwelling unit with Section 8 assistance and the HA decides to terminate the Housing Assistance Payments Contract, the HA shall issue to the family another Voucher.

A family's assistance may be terminated if the family has breached its responsibilities under the program and is responsible for HQS failure for the following reasons: failure to pay for tenant supplied utilities and services; failure to provide and maintain tenant-supplied appliances, or; damages caused by tenants, guests or family members.

The HA will attempt to obtain annually from local health agencies the names and addresses of children with identified elevated blood levels (EBLs) and match this information with the names and addresses of participants. If a match occurs, the HA will determine whether local health officials have tested the unit for lead-based paint. If the unit has lead-based paint the owner will be required to treat the lead-based paint. If corrective action is not taken the family will be issued a Voucher to

move. Copies of the inspection reports will be kept for a period of three (3) years.

2. Quality Control Procedures.

In order to ensure that the inspections are adhering to HQS, and are providing consistent determinations, a random sample of approximately five percent of the approved units are reinspected by housing supervisory personnel. If inconsistencies are found a larger sample will be used and additional training provided.

SECTION XI

HOUSING ASSISTANCE PAYMENTS CONTRACT

A. HAP Contract Execution

1. Once the owner, lease (if owner elects to use his/her own lease), and unit are approved, and a reasonable rent negotiated, the HA will enter into a HAP contract.

   The HAP contract is a contract between the HA and the owner and provides for the HA to make monthly payments to the owner for a specific family in a specific unit. The term of the contract runs concurrently with the lease term. The HAP contract terminates if the lease terminates. No payments may be made after the family moves out or the lease term ends.

   HAP contract HUD 52530A will be used for the Section 8 project-based program and the current HUD Voucher HAP contract will be used.

2. Current owners under the HA's Section 8 program may continue to use the old HAP contract for current participants until the owner decides to revise the lease, the tenant moves, or the owner agrees to sign the new contract.

   The family is not responsible for the HAP payment and cannot be charged late fees if the HA pays late. However, the Conforming Rule, effective October 2, 1995, permits a HA to be charged late fees in accordance with state/local laws. The HA may pay for late fees from administrative fee income or reserves.

3. Once the leasing/contract documents are prepared, HA staff will meet with the owner and family (preferably together) to review documents. (If the landlord is unable to meet in person, the HA can mail the documents to the landlord.) In addition to reviewing the specific terms of the HAP contract and lease, staff will explain:

   a. Owner requirements to maintain the unit, allow inspections, and inform the HA if the tenant vacates without notice.

   b. Tenant requirements to pay rent, maintain the unit, allow inspections, cooperate with the HA's recertification requirements, and notify the HA when the family wishes to move.

4. The HA will make their best effort to sign all HAP contracts before lease terms start and will ensure that all contracts are executed within 60 days after the beginning of the lease term. All HAP contracts must start on the first day of the month. They may not be pro-rated.

   a. If the HAP contract was signed within the 60 day period after the lease term started, housing assistance payments may be made retroactive to the beginning of the lease term.

b. If the HAP contract was executed more than 60 days following the beginning of the lease term, the contract is void and no housing assistance payments may be made to the owner.

5. A new HAP contract will be required for new leases, and for revised leases as follows: In the following cases, tenant based assistance shall not be continued unless the PHA has approved a new tenancy in accordance with program requirements and has executed a new HAP contract with the owner:

a. If there are any changes in lease requirements governing tenant or owner responsibilities for utilities or appliances;
b. If there are any changes in lease provisions governing the term of the lease;
c. If the family moves to a new unit, even if the unit is in the same building or complex.

B. Payments to Owners

Housing Assistance Payment, (the difference between the contract rent and the portion of the rent payable by the family) shall be paid to the owner in accordance with the contract.

No payments will be made on behalf of an assisted family until the lease and the Housing Assistance Payments Contract have been signed by all appropriate parties.

The HA will maintain an internal control system which will ensure the accurate posting and tracking of Housing Assistance Payments to owners.

C. Contract Rent Adjustments – Project-Based Certificate Program

1. Before the initial contract is executed, owners are informed of program regulations regarding both annual adjustments and special adjustments. They are also made aware of the HA's review process regarding contract rent adjustments.

a. Upon receipt of an owner's request for an Annual Rent Adjustment, the following will be reviewed:

(i) The limitation of the appropriate Annual Adjustment Factor.

(ii) The timeliness of the owner's request. Requests for rent increases must be submitted in writing no less than sixty (60) days before the effective date of contract expiration.

(iii) The current Housing Quality Standards inspection.

(iv) The reasonableness of the requested rent in respect to property improvements completed.

(v) Ongoing property maintenance.

For the Certificate Program, any adjustment cannot exceed the amount determined to be reasonable under rent reasonableness comparability. Authorization is required for all rent increases. The HA must implement annual contract rent increases effect the later of:

(i) The anniversary date of the HAP contract, or

(ii) The first day of the month following the owner's request for an increase.

b. Annual Adjustment to rents for assisted units will be limited to the lesser of:

(i) The maximum amount allowable by application of the Annual Adjustment Factor, or

(ii) The amount determined to be Rent Reasonable, or

(iii) The rent charged for comparable unassisted units owned by the same owner.

D. Contract Rent Adjustment - Voucher Program

The Contract Rent may not be increased during the first year of the lease. After the initial year, owners may request an annual increase at any time, but must provide 60 days written notice of any proposed increase to the family, in accordance with the lease and contract, and to the HA. The increase will not be approved unless the increased rent meets rent reasonableness requirements.

Families who wish to move because of the owner's rent increase will be required to give the owner proper notice and notify the HA at least sixty (60) days in advance.

E. Rent Abatement and Contract Termination for HQS Violations

When an owner fails to correct cited repairs within the specified time frame, housing assistance payments will be abated at the end of the month in which the failed re-inspection occurred, and will continue until such time when:

1. The owner corrects the deficiencies, in which case the housing assistance payments may be resumed as of that date; or

2. The HAP contract expires or is terminated.

The HA will not resume HAP payments until the owner has corrected the deficiencies. No retroactive payments will be made for the period during which the rent abatement occurred. When the deficiencies are corrected, however, a prorated housing assistance payment may be provided to the owner for the period commencing with the date a HA inspector certified the required work was completed.

The HA will send the owner advance written notification, in accordance with the HAP contract, when the HA plans to abate payments. The HA will also notify the family of this action and apprise the family of its responsibility, based on applicable State or local law, for the payment of the tenant share of rent to the owner.

The HA will terminate HAP contracts which are under abatement at the earlier of: a) the month the family living in the unit has moved, or b) six months after the last payment was made.

HAP contracts will be terminated immediately, without application of the rent abatement process described above, in cases of owner failure to repair life-threatening conditions within the required 24 hour time period. This applies only to cases in which the owner is responsible for the situation not when the tenant has caused the violation. Life-threatening conditions include but are not limited to:

a. No heat between October 1 and May 1.

b. No electricity.

c. No gas.

d. No running water.

e. Natural gas leak or fumes.

f. Major plumbing leaks or flooding (such as sewer backup or stoppage).

g. Any electrical outlet, switch, stationary light fixture, fuse box or circuit breaker that smokes, sparks or short circuits, creating a fire hazard.

h. Broken or missing lock on any dwelling unit doors accessible to the outside of the dwelling unit.

k. Uninhabitable units due to fire, tornadoes, destroyed or vandalized property that prevent a tenant from using the bathroom or kitchen or from entering the dwelling unit.

j. No smoke detector or non-working smoke detector.

SECTION XII

ONGOING ACTIVITIES

A. Annual Re-examinations

1. The HA will re-examine the income, assets, expenses and family composition of all families at least annually. Re-examinations determine the participant's monthly TTP and rent to owner (Tenant Rent), eligibility for continued occupancy, and required unit size.

   The HA follows all pertinent HUD regulations in its completion of re-examinations. Approximately ninety (90) days prior to the family's re-examination effective date, the family will be notified in writing of a scheduled re-examination interview. If the family fails to keep or reschedule the appointment, the HA may send a notice terminating assistance under the Section 8 program, effective on the family's re-examination effective date.

   Employment and income data, family members, assets, full-time student status, medical expenses (elderly and disabled families only), child care expense, and disabled assistance expenses will be verified, documented and placed in the participant's folder.

   Procedures for verifications will be followed per Section VI of this document, including a request for birth certificates at renewal if not does not exist in file. All verifications will be maintained in the participant's folder.

   Verified information will be analyzed to determine TTP and the appropriate unit size.

2. Tenants requiring larger or smaller units are issued a Voucher for the appropriate bedroom size dwelling unit at the annual re-examination, or at such other times necessary, depending on availability. However, if the family size exceeds the maximum subsidy standard for continued occupancy, the family must be immediately issued the appropriate size Voucher. The Payment Standard may not be less than the standard previously used, except when the family qualifies for a smaller unit.

3. Tenants whose Total Tenant Payment equals or exceeds the gross rent for their dwelling unit, will be notified of their responsibility for the entire contract rent amount.

   a. Housing Assistance Payments shall be terminated with proper notice to both the tenant and owner.

   b. Suspension of Housing Assistance Payments shall not affect the tenant's other rights under the lease, nor shall suspension preclude the resumption of payments as a result of loss of income or other relevant circumstances.

c. For HAP contracts executed after 9/95, the HA will terminate the contract if six (6) months have passed since the date of the last Housing Assistance Payment. For pre 9/95 HAP contracts the HA will terminate the contract if twelve (12) months have passed since the date of the last Housing Assistance Payment.

4. Increases in the participant's portion of the rent to owner (Tenant Rent) will be effective on the scheduled re-examination effective date, with reasonable advance notice (30 days) provided the participant has complied with all reporting requirements. When the participant has failed to do so, the participant's portion will increase retroactive to the re-examination effective date. Retroactive changes in participants rent share will not be made when delays are solely the fault of the Authority or a verification source.

5. Decreases in participant's portion of rent shall take effect on the re-examination effective date.

B. Interim Re-examinations

All decreases reported in income which affect rent between the initial admission and re-examination or the next scheduled annual re-examination must be reported no later than the 15th of the month to become effective the first of the following month. The income shall be verified in accordance with above provisions unless the applicant or tenant can provide reliable documentation. All increases in income reported after the first of the month shall not result in an increase in rent until a period between the second month and fourth month following the initial report, contingent upon receiving documentation of any change in benefits that will be effected by the income change. The participant will be given a 30-day notice of rent change when all income verification has been received and processed by the HA.

1. Income/Family Composition Changes.

The resident must report in writing within 10 working days:

a. All changes in the household composition; including family members moving in and out, births, children going to and from foster care; and

b. Any of the following facts which would result in an increase in rent:

(i) An increase in per month gross household income that would result in an increase in rent;

(ii) Receipt of a deferred payment in a lump sum (such as unemployment benefits or social security).

The resident may report any of the following changes which would result in a decrease in rent:

a. Decrease in income expected to last at least 60 days; and

b. Increase in allowances or deductions.

2. Zero Income. The HA will schedule special re-examinations every 30 days for families reporting $0 income. Families reporting $0 income will be required to have all adult household members sign a certification of $0 income and a release allowing the HA to obtain a certified copy of any tax return submitted to IRS by all adults residing in the household. Failure to comply with these re-examination requirements will be considered grounds for termination of assistance. The HA will review the monthly statement of income and expenses for families reporting zero income.

3. Effective Date of Rent Changes Due to Interim Re-certifications.

a. For all income decreases, refer to the above Section B, "Interim Determinations".

b. For all income increases that result in an increase, the adjustment in rent will be made effective between the second month and fourth month subsequent to the initial notice.

c. Tenant and owner will be notified thirty (30) days in advance as to any changes in the Housing Assistance Payment or Tenant Rent.

4. Errors. If an error in Tenant Rent is revealed at any time during the income year, proper adjustment will be made to correct the error as follows:

a. If the error is the fault of the tenant, and results in the tenant owing additional rent, such rent shall be repaid by the family within a reasonable period of time. Failure to repay may result in termination.

b. If the error is not the fault of the tenant and it results in increased Tenant Rent, such rent shall be made effective the first day the change is corrected. If a refund is necessary, because of a decrease in rent, it shall be processed immediately.

c. If the error is not the fault of the tenant, and corrective action results in a decreased rent, such rent shall be made effective as of the date the error was made.

5. Unreported income/Family Composition Changes:

a. Interim Re-exam – Tenant reports income but not within 10 days. Process rent increase with 30 day notice. Send them warning letter and do one year Promissory Note if unreported income is more than two months old. Count all unreported income two months from the date tenant started receiving it.

Document file for future reference. Letter created in HAPPY called Unreported Income Warning. Letter cites voucher and briefing meeting that states tenant obligations regarding reporting income and changes.

b. Annual Recertification – Tenant reports new income but not until Annual recertification or Interim Re-exam. Send them warning letter and do one year Promissory Note if unreported is more than two months old. Count all unreported income two months from the date the tenant started receiving it.
c. Terminate assistance – Tenant did not report income at all and income found through anonymous source or during Interim or Annual Recertification verifications.

Documentation in file for prior history of unreported income.

C. Changes in Household Composition

All participants are required to report any change in household composition within 10 working days of the change to the Authority and to the landlord. New household members may be added to the resident's lease if the new family member has been added as the result of birth, marriage, reconciliation with a spouse, legal adoption, award of custody to or by a member of a household on the lease and award of a foster child. However, no new household member over the age of five years may be added unless and until that person has provided the required information to the HA and been determined eligible for admission according to the guidelines specified in Section II of this policy. The Housing Authority has the right to deny admission to any person found to be ineligible.

Participants must provide documentation as required by the Authority when reporting that a family member has left the household. In the case of an income producing household member, the Authority will require written documentation verifying the new address or other evidence deemed acceptable by the Authority. Utility bills, a driver's license, an automobile registration, voter registration, an employer's verification, or a lease or a rent receipt bearing the family member's name, new address and a date are examples of acceptable evidence. Court papers indicating that a family member has left the household such as a Petition for Dissolution of Marriage, a Petition for an Order of Protection, or a Petition for Legal Separation may also be acceptable.

D. Family Moves with Continued Assistance

1. If the tenant desires to relocate, they may do so freely upon completion of the first year's term of the lease. However, the tenant must first submit at least a 30 day written notice to the landlord stating his/her intention to vacate. A copy of this notice, signed by the tenant, must be provided to the HA. It is the HA's recommendation that the tenant submit a 60 day notice to our office to allow time to process our paperwork.

2. If the tenant desires to relocate, but has not completed the initial year's term of the lease, the transfer will not be granted by the HA unless both tenant and landlord mutually agree to rescind the lease. The HA will also require documentation regarding the extenuating circumstances for early termination. If both the landlord and tenant do so agree, they must both sign a mutual rescission form supplied by the HA. A copy of the rescission and documentation must be provided to the HA. The HA will review rescission and documentation and make a

written decision regarding the early termination within 10 working days. The HA will limit moves to one during a 12 month period.

3. (For pre 9/95 HAP Contracts) If, after the move-out inspection, it is determined that the final assessment of damages is in excess of the security deposit, the tenant will be offered a repayment arrangement in the form of a promissory note. However, the tenant is not obligated to sign a promissory note as a condition of continued assistance, but repayment is required, and payments must be current to move or at annual re-examination

4. Participants are limited to one move in any 12 month period, unless the move is a result of extenuating circumstances. In this case, the participant must submit a written request for lease termination as well as a brief explanation with documentation for the move no less than 30 days from the effective date of the move. Prior written approval must be given by the HA.

5. If the family wants to move to a new unit that is located in another jurisdiction, the family must provide notice to the HA and must specify the area where the family wants to move.

6. The HA may deny a participant family's request to move if the family has not complied with a Repayment Agreement executed with the current or another HA, or if the HA does not have sufficient funding for continued assistance.

7. A new Voucher must be issued no later than the date the Housing Assistance Contract expires and rental assistance terminates.

E. Assistance for Families Under Lease

The HA will plan, develop and coordinate working relationships with human services and social service agencies that can be of help to tenants. The HA staff will assist in providing information and referral service to tenants. Families who have questions regarding their participation in the Certificate/Voucher Program, may request assistance from the HA.

F. Family Break-Up

In the case of family break-up, the HA has the discretion to decide which members of an assisted family will continue to receive the housing assistance. In making such a determination, the factors to be considered may include: whether the assistance should remain with family members remaining in the original assisted unit; the interest of minor children or of ill, elderly or disabled family members; and whether family members are forced to leave the unit as a result of actual or threatened physical violence against family members by a spouse or other member of the household.

If a court determines the disposition of property between members of the assisted family in a divorce or separation under the settlement or judicial

decree, the HA will follow the court's determination of which family members continue to receive assistance in the program.

In the case where there is no adult remaining family member and there are minors still living in the unit, the Authority will accept proof of legal guardianship of remaining minors and will grant remaining member status subject to all program eligibility considerations.

G. Family Absence From Unit

The family may be absent from the unit for brief periods. However, the family may not be absent from the unit for a period of more than 180 consecutive calendar days in any circumstance, or for any reason.

Absence means that no member of the family is residing in the unit. Absences can be for vacations, hospitalization, or imprisonment.

If the family will be absent from the unit for more than 30 consecutive calendar days the family must notify the HA in writing of the following:

1. The reason they are absent.
2. Anticipated date they will return to the unit.

For imprisonment and hospitalization, written verification will be requested by the HA from these two places on a monthly basis regarding the status of the family's anticipated return to the unit.

If the family is on vacation, the family must report in monthly to the HA by mail or telephone regarding the status of the family's anticipated return to the unit.

The family will be required to pay their portion of the rent and the unit must meet HQS, and all utilities must be on.

The HA will send written notice of termination to the family and owner if the family will not be returning to the unit within 180 days.

The Housing Assistance Payment will terminate if the family is absent for more than 180 consecutive calendar days. The term of the HAP contract and assisted lease will terminate also.

If the family is terminated from the program because they were absent from the unit for more than 180 days, they must reapply and go on the waiting list.

H. Repayment Agreements

If a participant owes money to the HA, the HA may require the participant to enter into a repayment agreement or may require repayment on demand. The agreement will stipulate that the participant must initially pay 20% of the claim and pay the remainder within the next eleven months. If the participant does not comply with the repayment agreement, the HA may terminate the participant from the program. However, the HA will consider extenuating circumstances on a case-by-case basis.

If the HA determines that the family committed fraud or was grossly irresponsible, the HA may require the family to repay the entire amount in full or have its assistance terminated, since fraud or gross irresponsibility are considered a violation of a family obligation.

In no case does the HA have a responsibility to enter into a repayment agreement. If the family's assistance is terminated and repayment has not been made, the money will still be considered to be owed and the HA may still take action to collect the amounts owed.

G. Policy on Public Requesting Information From Program Files

The Section 8 Housing Choice Voucher program through the City of Cedar Rapids is subject to the Iowa Open Records Law. The Housing Services office cannot guarantee that the information in a person's file will be kept confidential. Medical records will be considered confidential under the Health Insurance Portability and Accountability Act (HIPAA).

1. A request for access to a record must be directed to the Assisted Housing Manager. Except in cases where employees working with the Section 8 program receive a request of information from a government agency, profit/non-profit corporation, educational institution, and/or individuals to determine a family's eligibility or waiting list status the employee may release this information.
2. Open records will be made available from 8:00 a.m. to 5:00 p.m., Monday through Friday, except for legal holidays and shall correspond with work schedules.
3. Requests for access to open records may be made in writing, in person, by email, fax, or telephone. Requests shall identify the particular records sought by name or description to facilitate the location of the record. All requests shall include the name, address, and telephone number of the person requesting the information. A person shall not be required to give a reason for requesting an open record. The City shall make a Publication Information Request form available to assist requests. Use of such form will not be required.
4. Refer to Resolution No. 0829-05-04 for the City of Cedar Rapids Open Records Policy.

SECTION XIII

TERMINATION, CLAIMS AND COMPLAINTS AND APPEALS

A. Termination of Tenancy By Owner

1. Owner Initiated Lease Termination. During the term of the lease, the owner may terminate tenancy on the following grounds:

   a. Serious or repeated violation of the terms and conditions of the lease;

   b. Violation of Federal, State or local law that imposes obligations on a tenant in connection with the occupancy or use of the premises; or

   c. Other good cause. However, during the first year of the lease, the owner may not terminate for "other good cause" unless the termination is based on something the family did or failed to do. The following are some examples of "other good cause" for termination of tenancy by the landlord:

      (i) Failure by the Tenant Family to accept the offer of a new or revised lease.

      (ii) Tenant Family history of disturbance of neighbors or destruction of property, or of living or housekeeping habits resulting in damage to the unit or property.

      (iii) Criminal activity by Tenant, any member of the household, a guest or another person under the tenant's control, that threatens the health and safety or right to peaceful enjoyment of the premises by other residents or persons residing in the immediate vicinity of the premises.

      (iv) Any drug related criminal activity on or near the premises.

      (v) The landlord's desire to utilize the unit for personal or family use or for a purpose other than use as a residential rental unit; or

      (vi) A business or economic reason for termination of the tenancy (such as sale of the property, renovation of the unit, desire to rent the unit at a higher rental).

      The owner may only evict the tenant from the unit by instituting a court action.

      NOTE: This list of examples is intended as a non-exclusive statement of some situations included in "other good cause," but shall in no way be construed as a limitation on the application of "other good cause" to situations not included in the list. The

owner may not terminate the tenancy during the first year of the term of the lease, for example, for reasons (i), (v) or (vi) of "other good cause."

If termination is due to a "business or economic reason" (i.e., the HA is unable to approve the amount of rent you are currently charging), or "expiration" of the HAP contract, a written notice must be sent the tenant family in accordance with the lease and state and local law.

d. If owner initiates an eviction action in accordance with the lease and the family continues to live in the unit, the HA will continue to make payments until the family moves or is evicted.

e. The owner will keep the full payment for the month in which the family moves out in "skip" cases. If the family does not skip and the lease is scheduled to terminate during the month, then the owner keeps a prorated payment for the last month.

2. Participant Initiated Lease Termination.

a. If a tenant wishes to move, they may do so at any time after the first year of the term of the lease. The tenant must submit a 30 day written notice, but not more than a 60 day notice, to the landlord. A copy of this notice, signed by the tenant, must be provided to the HA. The HA will acknowledge receipt of the notice to move and will forward a copy of the procedures required to re-certify the tenant for assistance to the tenant and current landlord. The procedures will also include instructions to the landlord regarding move-out inspections for pre 1995 HAP contracts.

b. If a family desires to be released prematurely from a lease in effect at the time due to extenuating circumstances. The family must submit a written request for lease termination as well as a brief explanation with documentation for the move no less than 30 days from the effective date of the move. A Mutual Rescission form must be filled out, in full, by the landlord and tenant. Prior approval must be given by the HA. The HA will limit moves to one during a 12 month period and new leases may only start on the first of the month.

c. The HA may deny permission to move if there is insufficient funding for continued assistance.

d. If the family wishes to terminate assistance voluntarily and remain in the unit, the family and owner must provide the HA with a 30-day written notification that they intend to terminate the HA Lease and HAP and execute a new lease with the tenant.

B. Housing Assistance Termination

Program participants in the Section 8 programs will continue to receive assistance as long as they comply with program obligations. If a participant family fails to abide by the program obligations, they may be terminated from the Section 8 Program which will result in the discontinuation of the housing assistance in the family's current unit and in all future units.

All participants for whom the HA intends to terminate assistance will be provided a written notification informing them of the reason for the termination determination and the right to request an Informal Hearing.

1. The HA may terminate housing assistance for the following reasons:

   a. If the family violates any family obligations under the program.

   b. If any member of the family has been evicted from public housing.

   c. If the HA has ever terminated assistance under the certificate or voucher program for any member of the family.

   d. If any member, guest, or visitor of the family commits drug-related criminal activity, or any criminal activity. This includes charges for disorderly house and drug paraphernalia.

   e. If any member of the family commits fraud, bribery or any other corrupt or criminal act in connection with any federal housing program.

      If any member of the family is placed on the Iowa Sex Offender Registry or any other state's Sex Offender Registry. (Regardless of length of time on registry.)

   f. If the family currently owes rent or other amounts to the HA or to another HA in connection with Section 8 or public housing assistance under the 1937 Act.

   g. If the family has not reimbursed any HA for amounts paid to an owner under a HAP contract for rent, damages to the unit, or other amounts owed by the family under the lease.

   h. If the family breaches an agreement with the HA to pay amounts owed to an HA, or amounts paid to an owner by an HA.

   i. If a family has engaged in or threatened abusive or violent behavior toward HA personnel.

   j. If any family member fails to sign and submit consent forms for obtaining information.

   k. Evidence of citizenship (i.e., the declaration) and eligible immigration status is not submitted by date specified by the HA.

l. Evidence of citizenship or eligible immigration status is submitted in a timely manner, but INS primary and secondary verification does not verify eligible status of any family member and:

(i) Family does not pursue INS appeal or HA informal hearing rights or

(ii) INS appeal and informal hearing rights are pursued but final appeal and/or hearing is decided against family member.

m. The tenant has failed to meet his/her HQS obligation in cases where they are responsible for tenant supplied appliances or utilities and/or the activities of their guests.

n. The tenant has failed to promptly notify the HA if any family member no longer resides in the unit.

o. The family fails to promptly inform the HA of birth, adoption, or custody of a child and request approval to add any other family member.

p. The family fails to promptly notify the HA of any absence from the unit.

q. The family has committed fraud, bribery or any other corrupt or criminal act in connection with the Certificate/Voucher programs.

r. If any family member illegally uses, or possesses for personal use, a controlled substance. Such use or possession must have occurred within one year before the date the housing authority provides notice to the family of its decision to terminate assistance. The housing authority will not deny or terminate assistance for such use or possession by a family member, if the family member can demonstrate that he or she:

(i) Has an addiction to a controlled substance, has a record of such an impairment, or is regarded as having such an impairment; and

(ii) Is recovering, or has recovered from, such addiction and does not currently use or possess controlled substances. As a condition of being allowed to reside in the unit, the HA will require evidence of participation in, or successful completion of, a treatment program from the family member who has engaged in the illegal use of drugs.

s. If a family signed a statement certifying that a person who engaged in domestic violence against the household would not be allowed to reside in the household, breach of this certification may be grounds for termination of assistance.

t. The housing authority determines that there is reasonable cause to believe that the participant abuses alcohol in a way that interferes with the health, safety, or right to peaceful enjoyment of the premises by other residents. The HA may waive this provision if the participant demonstrates to the HA's satisfaction that the participant is no longer engaging in abuse of alcohol and:

(i) Has successfully completed a supervised drug or alcohol rehabilitation program;

(ii) Has otherwise been rehabilitated successfully; or

i. Is participating in a supervised drug or alcohol rehabilitation program.

u. The tenant has a total tenant payment equal to or greater than the gross rent for the unit for six (6) months.

v. The tenant is evicted by court action from their assisted unit.

w. The HA may consider all relevant circumstances surrounding criminal offenses, such as:

i. Seriousness of the offense.
ii. To what extent did other family member participate.
iii. Circumstances related to a disability.
iv. What effect to other family members who were not involved if they were denied.

C. Contract Termination

1. HAP contracts terminate automatically 180 calendar days after the last housing assistance payment to the owner. The HA may terminate, with a 30 day or less written notice, a contract with a landlord for the following reasons:

a. The unit is not in compliance with Housing Quality Standards because the owner has refused, or failed to correct the HQS deficiencies after proper notice by the HA.

b. The tenant has moved. It is the owner's responsibility to notify the HA if the tenant has moved without notice within 5 working days.

c. The tenant has been notified by the HA to move because the unit is either overcrowded or under occupied.

d. The owner has committed any fraud or made any false statement to the HA or HUD in connection with the contract, or has committed fraud or made any false statement in connection with any federal housing assistance program.

e. The unit is determined by the HA and/or owner to be abandoned or unoccupied.

f. Lease is terminated by mutual agreement of the owner and tenant, then the HAP contract automatically terminates in accordance with the contract terms.

g. The HA cannot approve the new rent requested by the owner, and the owner will not accept a lower rent.

h. The HA has found it necessary to terminate the tenant's assistance for documented good cause.

i. Owner has decided to terminate tenancy for "other good cause" that is a business or economic reason.

j. If the owner has violated any obligation under this Contract or under any other Housing Assistance Payments contract under Section 8 of the U.S. Housing Act of 1937.

k. If the owner has demonstrated any intention to violate any obligation under this Contract or under any other Housing Assistance Payments contract under Section 8 of the U.S. Housing Act of 1937.

l. For projects with mortgages insured by HUD, or loans made by HUD, if the owner has failed to comply with the regulations for the applicable mortgage insurance or loan program, with the mortgage or mortgage note, or with the Regulatory Agreement; or if the owner has filed any false statement or misrepresentation with HUD in connection with the mortgage or loan.

m. If the owner has engaged in drug trafficking and/or violent criminal activity.

NOTE: If the HA determines that a breach has occurred, the HA may exercise any of its rights or remedies under the Contract. The HA shall notify the Owner in writing of such determination, including a brief statement of the reasons for the determination. The notice by the HA to the owner may require the owner to take corrective action (as verified by the HA) by a time prescribed in the notice. The HA's rights and remedies under the Contract include recovery of overpayments, termination or reduction of Housing Assistance Payments, and termination of the Contract.

D. Claims. Claims will be paid only for pre 9/95 versions of the HAP contract, and only in cases when the requirements specified below are met. No claims will be honored for owners under the HAP contract edition dated 9/95 or after. Only program eligible to make a claim is the Project-Based Certificate program.

1. General Conditions. The landlord must request a move-out inspection within 7 days of the tenant's move. It will be the owner's responsibility to notify the tenant to be present at the move-out inspection.

Completion of the move-out inspection and damage report or notification that the parties have waived the move-out inspection, initiates the final claim for payment or the closing of the file.

2. Eligible Expenses and Maximum Amounts for Unpaid Rent and Damages.

   a. Project-Based *Certificate Program:* On the Certificate Program, claims can be paid for actual amounts due to the owner for unpaid rent and damages, (up to two months contract rent minus the security deposit the owner could collect or actually collected).

3. Unpaid Rent.

   a. Under the lease and contract, it is a tenant's responsibility to pay his portion of the rent every month and an owner's responsibility to collect the tenant's portion of rent every month. It is an owner's responsibility to evict on grounds of non-payment of rent if a tenant does not pay his rent. Late charges may not be included in a claim for unpaid rent. An owner must demonstrate that a good faith effort was made to collect the rent during the tenant's occupancy.

   b. Claims for unpaid rent must be supported by a dated copy of a bill(s) or notice(s) which the owner sent to tenants, or other documentation showing that the owner took all reasonable steps to collect the debt at the time that it occurred including legal actions. Claims for unpaid tenant rent will be authorized only for the time in which the tenant occupied the unit during the last lease term.

4. Damages – PROJECT-BASED CERTIFICATE PROGRAM ONLY

   a. A move-out inspection will not be made unless the landlord intends to file a damage claim. All damage claims must be submitted within 60 days of the date of move-out. The landlord must comply the Iowa State law regarding tenant notification of security deposit return or reason for retaining the security deposit.

   b. The extent of damages will be determined by all parties attending the move-out inspection. No move out inspection will be performed until the family has actually vacated the unit and their belongings have been removed.

   c. All claims must be submitted with documentation that the landlord has complied with State law. The letter requesting payment must be sent to the tenant's last known address by certified mail. If the letter is returned because the tenant did not leave a forwarding address, or it was unclaimed, it must be submitted along with the claim. Final responsibility for determining the reasonableness of the claim rests with the HA.

d. Claims must be submitted with, ITEMIZED receipts for materials and labor. The HA will not accept cash register receipts unless accompanied by a detailed invoice from the vendor. Bids and estimates will not be accepted. All labor costs must be itemized and must include a reasonable hourly rate and a reasonable time spent on cleaning and/or repair of each job.

e. Cost of filing eviction and forcible detainer to remove tenant from premises when they have violated their lease shall not be considered a "damage" to said unit and should not be included in the listing of said damages for reimbursement.

f. The final responsibility for determining that the amount paid for a claim for damages is reasonable and properly supported rests with the HA. A move-in inspection report clearly documenting conditions at the time of admission is essential to this determination.

5. Final Processing of Claims – PROJECT-BASED CERTIFICATES ONLY

a. If the Security Deposit is insufficient to reimburse the owner for unpaid Tenant Rent or other amounts which the family owes under the lease, or if the owner did not collect a security deposit, the owner may claim reimbursement from the HA for an amount not to exceed the lesser of:

(i) The amount owed to the owner, or:

(ii) Two month's contract rent (Certificate Program) or one month's contract rent (Voucher Program), minus, in either case, the greater of the security deposit actually collected, or the amount of security the owner could have collected under the program. Any reimbursement must be applied first toward any unpaid rent for the period after the family vacates.

b. The HA will provide written notice to the landlord advising him/her of the HA's determination of amounts to be paid and allowing ten (10) days for dispute. Upon notification of acceptance of the HA proposal, the HA will notify the tenant of the damage claim and will be advised of their right to an informal hearing. The tenant will be given 15 days to submit a request for informal hearing to review and challenge the landlord's claim for damages.

c. Owners and tenants are notified of the results of the claim in writing including the amount of liability to the HA. The completed claim forms are submitted to accounting for final payment.

d. All tenants who remain in the program and have incurred a liability are requested to execute a payment agreement to reimburse the HA. A tenant may not be required to sign a payment agreement as a condition of continued assistance.

6. Vacancy Loss.

a. *Voucher Program*: No vacancy loss will be paid to a property owner participating in the Voucher Program.

b. Project-Based *Certificate Program*: Owners are required to submit the following information to receive a vacancy loss payment (Certificate Program only):

(i) The date the unit was vacated, and

(ii) The date the unit was re-rented, and

(iii) The efforts made to re-rent the unit during the vacancy period.

l. MOVE-OUTS – VOUCHER PROGRAM ONLY

a. HA will not perform move-out inspections if the tenant has created unsanitary, malicious or intentional/unintentional damage to the living unit.
b. If the damages, cleaning fees, and unpaid rent exceed the deposit it is the owner's responsibility to document this activity and take appropriate action prescribed under the tenant/landlord law.
c. The HA will only take action against the tenant when an owner files a complaint in small claims court and receives a monetary judgment against the tenant.
d. If the small claims courts issues a monetary judgment against the tenant, the HA will take the following action:
   i. if the tenant is no longer participating in the Section 8 program, this office will keep a copy of the monetary judgment on file. If the tenant re-applies for future housing assistance, they will be denied until the judgment is paid off in full.
   ii. If the tenant remains an active participant on the Section 8 program, the HA can revoke the tenant's voucher and/or terminate the tenant's participation in the program and/or mandate that the tenant pay off the monetary judgment.
e. To assist the HA office in taking action against the tenant the owner must forward the following information to this office:
   i. Copy of the court judgment against the tenant.
   ii. If available, paper copies of photographs highlighting damages. Computer CD's and/or floppy discs will not be accepted.

E. Complaints and Appeals

1. Complaints.

a. *Discrimination:* If a person encounters discrimination from an owner in obtaining a unit, the HA will refer them to the local fair housing office or will assist the person in filing a complaint with the Department of Housing and Urban Development with a review of the specific circumstances.

b. *Tenant/Landlord Complaint Regarding HA Decision:* If a tenant or landlord disagrees with a decision by a Section 8 staff person, the following procedure is available:

(i) Contact the Housing Services Program Manager/Supervisor and discuss the problem.

2. Appeals.

a. *Participants:* The HA has established an informal hearing procedure which is in accordance with federal regulations. All participant appeals will be handled as specified by these procedures. (See F. Informal Hearing.)

b. *Applicants:* The HA has established an informal review procedure which is in accordance with federal regulations. All applicant appeals will be handled as specified by these procedures. (See Section III, F. Informal Review.)

F. Informal Hearing

The purpose of the Informal Hearing is to give the participant an opportunity to review the determination to ensure that it is in accordance with the law, HUD regulations and program rules. Pursuant to a judgment from the federal district court of Linn County, the HA will conduct informal hearings according to the following procedure. An outline of the hearing procedures is included in Appendix 7 and 7a.

Informal hearings will be provided to Section 8 participants requesting to appeal the HA's determination regarding:

1. Income determination for HAP.

2. Utility allowance determination.

3. Family unit size under HA subsidy standard.

4. Bedroom size conflicts with subsidy standard.

5. Determination of violation of Section 982.552(b), "Grounds for termination".

6. Determination on absence from unit for longer than the maximum 180 days, per HUD regulations.

7. Determination on family breach of HQS.

8. Damage claims charged by property owners (for pre-January, 1996 leases).

The HA will send a written notification, by certified and regular mail, to participants terminated for the above listed reasons. The notification will state

the factual basis and legal basis for the determination. The participants will be given fifteen (15) days to submit a written request to the HA for informal hearing. If the participant does not respond within the 15-day period, then the HA's determination will be upheld.

Prior to the informal hearing, the participant has the right to pre-hearing discovery and may make an appointment with the HA staff to review any and all documents upon which the HA intends to use during the hearing. An appointment will be required at a minimum of 24 hours in advance to review HA documents. The participant may obtain copies of the documents at their own expense. The HA staff will review these documents prior to photocopying them for the participant.

The HA will schedule the Informal Hearing, at the convenience of the Hearing Officer. The Hearing Officer will be an impartial person who does not perform duties inconsistent with his/her duties and responsibilities as a hearing officer. The HA 's Informal Hearing procedures are included in this Plan.

The HA is not bound by the decision of the Hearing Officer where the decision is contrary to HUD regulations or requirements or contrary to federal, State, or local law. If the HA determines that it is not bound by the Hearing Officer's decision, the HA will notify the family of the determination and the reasons for the determination.

A 24 hour notice is required to cancel or reschedule the hearing. One reschedule will be allowed.

G. Family Team Meetings – The HA will offer Family Team Meetings to all Domestic Violence cases in order to prevent the family from being terminated from the Housing Assistance Program. This is a voluntary program but the family must comply with identified housing goals in order to keep their housing assistance. The HA will have first meeting to determine the goals for the family to keep housing assistance. The second meeting will review the goals and address other family goals. If goals are not being met from the first meeting the family may be terminated from the program.

SECTION XIV

ADDITIONAL ITEMS

A. Misrepresentation

The resident is to be notified in writing if the Authority finds evidence that the resident or any adult member of the resident family has misrepresented facts affecting the family's eligibility or rent. Willful misrepresentation of facts may result in retroactive rent charges, termination of assistance, and/or criminal prosecution.

Section 1001 of Title 18 of the United States Code makes it a criminal offense to knowingly make a false statement to any department or agency of the United States as to any matter within its jurisdiction and establishes penalties of fines up to $10,000 and/or imprisonment not to exceed five years.

B. Monitoring Program Performance

The HA places strong emphasis on staff communication in regular staff meetings. Problems and potential problems are investigated, discussed and handled using team effort. The HA management policy is formulated accordingly. Internal policies and procedures, as required for the implementation of the Administrative Plan, shall be developed as necessary.

A monitoring and evaluation system has been developed to include major program areas. This system is designed to ensure that regulations are followed and program goals are met. Changes in approach are initiated on a as-needed basis, subject to program regulations and funding limitations. Annual and interim re-examinations, leases, contracts, and supporting documents are checked by appropriate staff for accuracy, completion, and program compliance. An annual financial audit will be conducted on an annual basis by an independent public accountant.

The HA will maintain records of applications, eligibility and ineligibility determinations, verifications, HQS inspections, leases, contracts and payment information in applicant and participant files. Inactive files will be maintained for a minimum of three years.

Applicable records related to immigration status will be maintained for a minimum of five years. All other aspects of monitoring program performance will be performed in accordance with HUD requirements and the HA's policies.

C. Interpretation and Amendment

1. Interpretation.

The policies set forth herein shall be interpreted, implemented and acted upon in relation to the laws of the United States and the State of Iowa, and all rules, regulations and policies enacted, enforced or promulgated by the United States Department of Housing and Urban Development, all of which shall take precedence over the Policies and Procedures described in this Administrative

Plan and all of which are incorporated herein by reference and all current rules, regulations and policies, including but not limited to Income Limits, Utility Schedules and Fair Market Rents, shall be in accordance with Federal law.

2. Amendment.

The policies outlined herein shall be amended only by resolution adopted by the affirmative vote of the HA Board upon recommendation by the HA, except that no action shall be required to make changes required by laws of the United States or the State of Iowa or any rules, regulations and policies enacted, enforced or promulgated by the United States Department of Housing and Urban Development, all of which shall take precedence over the herein expressed Policies, and all of which are incorporated herein by reference. The HA Board of Commissioners will be notified of any subsequent changes that may be effective through new Federal regulations.

G. Family Self-Sufficiency Program (FSS)

As mandated by HUD, the HA is required to operate a program to promote self-sufficiency of assisted families.

The FSS Action Plan included in the Appendix addresses the specifics of the program.

E. Section 8 Homeownership Program

1. Families participating in the FSS program who set homeownership as a goal will be referred to MidAmerica Housing Partnership homeownership counseling and budgeting programs.
2. The HA will explore additional homeownership opportunities.

APPENDICES

SECTION 8 ADMINISTRATIVE PLAN
GLOSSARY OF TERMS

ABSORPTION

In portability, the point at which a receiving HA chooses not to bill or stops billing the initial HA for assistance on behalf of a family and issues assistance from its own allocation.

ADJUSTED INCOME

Annual income less the following allowances determined in accordance with HUD instructions:

1. $480 for each Dependent;

   Note: The head, co-head, spouse, foster child or live-in aide are never counted as dependents.

2. $400 for each family whose head or spouse is at least 62 years or age or disabled;

3. For any family that is not an elderly family or a disabled family but has a disabled member other than the head of household or spouse, disability assistance expenses in excess of three percent of annual income, but this allowance may not exceed the employment income received by family members who are 18 years of age or older as a result of assistance to the person with disabilities;

4. For any elderly family or disabled family: (i) that does not have disability assistance expenses, an allowance for medical expenses equal to the amount by which the medical expenses exceed three percent of annual income; (ii) that has disability assistance expenses greater than or equal to three percent of annual income, an allowance for disability assistance expenses computed in accordance with paragraph 3 of this section, plus an allowance for medical expenses that is equal to family's medical expenses; (iii) that has disability assistance expenses that are less than three percent of annual income, an allowance for combined disability assistance expenses and medical expenses that is equal to the amount by which the sum of these expenses exceeds three percent of annual income; and

5. Child care expenses (see Section V for detail).

ADMISSION

The effective date of the first HAP contract for a family (first day of initial lease term) in a tenant-based program. This is the point when the family becomes a participant in the program.

ANNUAL INCOME

1. Annual income is the anticipated total income from all sources (monetary or not) received by the family head and spouse (even if temporarily absent) and by each additional member of the family, including all net income derived from assets for the 12-month period following the effective date of initial determination or re-examination of income, exclusive of income that is temporarily non-recurring or sporadic. Annual income includes, but is not limited to:

   a. The full amount, before any payroll deductions, of wages and salaries, overtime pay, commissions, fees, tips and bonuses, and other compensation for personal services;

   b. The net income from operation of a business or profession. Expenditures for business expansion or amortization of capital indebtedness shall not be used as deductions in determining net income. An allowance for depreciation of assets used in a business or profession may be deducted, based on straight line depreciation, as provided in Internal Revenue Service regulations. Any withdrawal of cash or assets from the operation of a business or profession will be included in income, except to the extent the withdrawal is reimbursement of cash or assets invested in the operation by the Family.

   c. Interest, dividends, and other net income of any kind from real or personal property. Expenditures for amortization of capital indebtness shall not be used as deductions in determining net income. All allowance for depreciation is permitted only as authorized in paragraph 1b of this section. Any withdrawal of cash or assets from an investment will be included in income, except to the extent the withdrawal is reimbursement of cash or assets invested by the Family. Where the Family has Net Family Assets in excess of excess of $5,000, Annual Income shall include the greater of the actual income derived from all Net Family Assets or a percentage of the value of such Assets based on the current passbook savings rate, as determined by HUD.

   d. The full amount of periodic payments received from Social Security, annuities, insurance policies, retirement funds, pensions, disability or death benefits and other similar types of periodic receipts, including a lump-sum amount or prospective monthly amount for the delayed start of a periodic payment (except as provided in 2n below).

   e. Payments in lieu of earnings such as unemployment and disability compensation, worker's compensation and severance pay.

f. Periodic and determinable allowances, such as alimony and child support payments and regular contributions or gifts received from persons not residing in the dwelling.

g. All regular pay, special pay allowances of a member of the Armed Forces (whether or not living in the dwelling) who is head of the family or spouse (but see 2g below).

2. Income Exclusions

Annual income does not include the following:

a. Income from employment of children (including foster children) under the age of 18 years;

b. Payments received for the care of foster children or foster adults (usually individuals with disabilities, unrelated to the tenant family, who are unable to live alone);

c. Lump-sum additions to family assets, such as inheritances, insurance payments (including payments under health and accident insurance and worker's compensation), capital gains and settlement for personal or property losses (except as provided in 1e above);

d. Amounts received by the Family that are specifically for, or in reimbursement of, the cost of Medical Expenses for any Family member;

e. Income of a live-in aide as defined in 24 CFR 5.403;

f. The full amount of student financial assistance paid directly to the student or to the educational institution;

g. The special pay to a Family member serving in the Armed Forces who is exposed to hostile fire;

(i) Amounts received under training programs funded by HUD;

(ii) Amounts received by a disabled person that are disregarded for a limited time for purposes of Supplemental Security Income eligibility and benefits because they are set aside for use under a Plan to Attain Self-Sufficiency (PASS);

(iii) Amounts received by a tenant in other publicly assisted programs which are specifically for or in reimbursement of out-of pocket expenses incurred (special equipment, clothing, transportation, child care, etc.) and which are made solely to allow participation in a specific program; or

(iv) A resident service stipend: this is a modest amount (not to exceed $200 per month) received by a public housing resident for performing a service for the HA, on a part-time

basis, that enhances the quality of life in public housing. This may include, but is not limited to fire patrol, hall monitoring, lawn maintenance and resident initiatives coordination. No resident may receive more than one such stipend during the same period of time; or

(v) Incremental earnings and benefits resulting to any family member from participation in qualifying State or local employment training programs (including training programs not affiliated with the local government) and training of a family member as resident management staff. Amounts excluded by this provision must be received under employment training programs with clearly defined goals and objectives, and are excluded only for the period during which the family member participates in the employment training program.

i. Temporary, non-recurring or sporadic income (including gifts);

j. Reparation payments paid by a foreign government pursuant to claims filed under the laws of that government by persons who were persecuted during the Nazi era;

k. Earnings in excess of $480 for each full-time student 18 years or older (excluding the head of household and spouse);

(i) Adoption assistance payments in excess of $480.00 per adopted child;

m. Deferred periodic amounts from supplemental security income and social security benefits that are received in a lump-sum amount or in prospective monthly amounts;

n. Amounts received by the family in the form of refunds or rebates under state or local law for property taxes paid on the dwelling unit;

o. Amounts paid by a State Agency to a family with a developmentally disabled family member living at home to offset the cost of services and equipment needed to keep the developmentally disabled family member at home;

p. Amounts specifically excluded by any other Federal statute from consideration as income for purposes of determining eligibility or benefits under a category of assistance programs that includes assistance under the 1937 Act. The following is a list of incomes that qualify for that exclusion:

(i) The value of the allotment provided to an eligible household under Food Stamp Act of 1977;

(ii) Payments to volunteers under the Domestic Volunteer Service Act of 1973 (employment through VISTA, Retired Senior Volunteer Program, Foster Grandparents Program,

youthful offender incarceration alternatives, senior companions); (See Regulations for comprehensive list)

(iii) Payments received under Alaska Native Claims Settlement Act;

(iv) Income derived from certain sub-marginal land of the United States that is held in trust for certain Indian tribes;

(v) Payments or allowances made under department of Health and Human Services' Low-Income Energy Assistance Program;

(vi) Payments received under programs funded in whole or in part under the Job Training Partnership Act;

(vii) Income derived from the disposition of funds of Grant River Band of Ottawa Indians;

(viii) The first $2,000 of per capita shares received from judgment funds awarded by the Indian Claims Commission or the Grant of Claims or from funds held in trust for an Indian tribe by the Secretary of Interior;

(ix) Amounts of scholarships funded under Title IV of the Higher Education Act of 1965, including awards under the Federal work-study program or under the BIA student assistance programs. These are made available to cover the cost of tuition, fees, books, equipment, materials, supplies, transportation and miscellaneous personal expenses of a student or an educational institution;

(x) Payments received from programs funded under Title V of the Older Americans Act of 1965;

(xi) Payments received after January 1, 1989 from the Agent Orange Settlement Fund or any other fund established pursuant to the settlement in the In Re Agent Orange product liability litigation, MDL No. 381 (E.D.N.Y.);

(xii) Payments received under the Maine Indian Claims Settlement Act of 1980 (Pub. L. 96-426, 94 Stat. 1785).

(xiii) The value of any childcare provided or reimbursed for under the Child Care and Development Block Grant Act of 1990.

(xiv) Earned income tax credit.

(xv) payments by the Indian claims Commission to the Confederated Tribes and Banks of Yakima Indian Nation or the Apache Tribe of Mescalero Reservation (Pub. L. 95-433);

(xvi) Allowances, earnings and payments to AmeriCorps participants under the National and Community Service Act of 1990 (42 U.S.C. 12637 (d));

(xvii) Any allowance paid under the provisions of 38 U.S.C. 1805 to a child suffering from spina bifida who is the child of a Vietnam veteran (38 U.S.C. 1805);

(xviii) Any amount of crime victim compensation (under the Victims of Crime Act) received through crime victim assistance (or payment or reimbursement of the cost of such assistance) as determined under the Victims of Crime Act because of the commission of a crime against the applicant under the Victims of Crime Act (42 U.S.C. 10602); and

(xiv) Allowances, earnings and payments to individuals participating in programs under the Workforce Investment Act of 1998 (29 U.S.C. 2931).

3. If it is not feasible to anticipate a level of income over a 12-month period, the income anticipated for shorter periods may be annualized, subject to re-determination at the end of the shorter period.

4. Any family receiving the reparation payments referred to in paragraph 2j of this section that has been requested to repay assistance under this chapter as a result of receipt of such payments shall not be required to make further repayments on or after April 23, 1993.

APPLICANT (Applicant Family)

A family that has applied for admission to a program, but is not yet a participant in the program.

AREA OF OPERATION

The recognized City of Cedar Rapids which shall not conflict with any other area of jurisdiction.

ASSETS

The values of (or equity) in the real property, stocks, bonds, savings accounts or certificates, stocks or merchandise or valuables and other forms of capital investments. (Does not include personal and household belongings and automobiles.) Assets shall include any asset disposed of at less than fair market value within the last two years.

CERTIFICATE

A document issued by an HA to a family selected for admission to the rental certificate program. The certificate describes the program, and the procedures for HA approval of a unit selected by the family. The certificate also states the obligations of the family under the program.

CHILD

A member of the family, other than the family head or spouse, who is under 18 years of age.

CHILD CARE EXPENSES

Amounts anticipated to be paid by the family for the care of children under 13 years of age during the period of which annual income is computed, but only where such care is necessary to enable a family member to be gainfully employed or to further his/her education. A child care deduction will not be allowed if an adult family member is capable and available to provide the child care. The amount deducted shall reflect reasonable charges for child care, and, in the case of child care necessary to permit employment, the amount deducted shall not exceed the amount of income received from such employment and only to the extent such amounts are not reimbursed.

To document childcare expenses for seeking employment a log must be submitted indicating names of companies visited.

CITIZEN

A citizen (by birth or naturalization) or national of the United States

CONTIGUOUS MSA

In portability, an MSA that shares a common boundary with the MSA in which the jurisdiction of the initial HA is located.

CONTINUOUSLY ASSISTED

An applicant is continuously assisted under the 1937 Housing Act if the family is already receiving assistance under any 1937 Housing Act Program when the family is admitted to the certificate or voucher program.

CONTRACT RENT

The total amount of rent specified in the Housing Assistance Payments Contract as payable by the HA and the tenant to the owner for an assisted unit. In the case of the rental of only a manufactured home space, Contract Rent is the total rent specified in the HAP Contract as payable by the HA and the tenant to the owner for the rental of the space, including fees or charges for management and maintenance services with respect to the space, but excluding utility charges for the manufactured home.

DECENT, SAFE AND SANITARY HOUSING

Housing that meets the Housing Quality Standards contained in the federal regulations or the requirements for Single Room Occupancy (SRO) Housing.

DEPENDENT

A member of the family household (excluding foster children, head of household, or spouse) who is under 18 years of age or is a disabled person or is a full-time student.

DISABILITY

1. Inability to engage in any substantial gainful activity by reason of any medically determinable physical or mental impairment which can be expected to result in death or which has lasted or can be expected to last for a continuous period of not less than 12 months; or

2. Blind and unable by reason for such blindness, to engage in substantial gainful activity requiring skills or abilities comparable to those of any gainful activity in which he has previously engaged with some regularity and over a substantial period of time.

DISABLED PERSON

A person who is under a disability as defined in Section 223 of the Social Security Act (42 U.S.C. 423), or who has a developmental disability as defined in section 102(7) of the Developmental Disabilities Assistance and Bill of Rights Act (42 U.S.C. 6001(7)) which defines a developmental disability as:

> "severe chronic disability that (a) is attributable to a mental or physical impairment or combination of mental and physical impairments; (b) is manifested before the person attains age twenty-two; (c) is likely to continue indefinitely; (d) results in substantial functional limitations in three or more of the following areas of major life activity: (1) self-care, (2) receptive and responsive language, (3) learning, (4) mobility, (5) self-direction, (6) capacity for independent living, and (7) economic self-sufficiency; and (e) reflects the person's need for a combination and sequence of special, interdisciplinary, or generic care, treatment, or other services which are of lifelong extended duration and are individually planned and coordinated."

DISPLACED FAMILY

A family in which each member, or whose sole member, is a person displaced by governmental action (this includes physical displacement from a unit under construction and funded by the rental rehabilitation program), or a person whose dwelling has been extensively damages or destroyed as a result of a disaster declared or otherwise formally recognized pursuant to Federal disaster relief laws. This definition is used to determine general program eligibility and eligibility for certain allowances when rent is calculated. See also the definition of Involuntarily Displaced (preference definition).

DISPLACEMENT BY GOVERNMENT ACTION

Activity carried on by an agency of the U.S. or by any state or local governmental body or agency in connection with code enforcement or public improvements or development program.

DISABILITY ASSISTANCE EXPENSES

Reasonable expenses that are anticipated during the period for which annual income is computed, for attendant care and auxiliary apparatus for a disabled family member and that are necessary to enable a family member (including the disabled member) to be employed, or provided that the expenses are neither paid to a member of the family nor reimbursed by an outside source.

DOMICILE

The legal residence of the household head or spouse as determined in accordance with State and local law.

DRUG-RELATED CRIMINAL ACTIVITY

Term means:

1. Drug-trafficking; or

2 Illegal use, or possession for personal use, of a controlled substance (as defined in section 102 of the Controlled Substances Act (21 U.S.C. 802.))

DRUG-TRAFFICKING

The illegal manufacture, sale or distribution, or the possession with intent to manufacture, sell or distribute, of a controlled substance (as defined in section 102 of the Controlled Substances Act (21 U.S.C. 802)).

ELDERLY FAMILY

A family whose head or spouse or whose sole member is an elderly, disabled person. It may include two or more elderly or disabled persons living together, or one or more of these persons living with one or more live-in aides.

ELDERLY PERSON

A person who is at least sixty-two (62) years of age.

EVIDENCE OF CITIZENSHIP OR ELIGIBLE IMMIGRATION STATUS

The documents which must be submitted to prove citizenship or eligible immigration status.

EXTREMELY LOW INCOME

30% or below of area median income.

EXCESS MEDICAL EXPENSES

Any medical expenses incurred by elderly families in excess of 3% of annual income which are not reimbursable from any other source.

FAIR MARKET RENT

The rent, including utilities (except telephone), ranges, refrigerators, and all maintenance, management, and other services, which as determined at least annually by HUD, would be required to be paid in order to obtain privately owned, existing decent, safe, and sanitary rental housing of modest (non-luxury) nature with suitable amenities. Separate Fair Market Rents shall be established for dwelling units of varying sizes (number of bedrooms).

FAIR MARKET RENT (MOBILE HOMES)

40% of the published 2 bedroom FMR.

FAMILY

A family is defined as:

1. Two or more persons sharing residency whose income and resources are available to meet the family's needs, where the person to be designatedhead of household meets the HA's definition of adult and who are either related by blood, marriage or operation of law, or who have evidence a stable family relationship over a period of time which shall not be less than one year; or

2. An Elderly Household whose head or spouse or sole member is elderly or disabled. The household may include one or more elderly or disabled persons living together or one or more such persons living with one another who is determined to be essential to their care or well being.

3. A single adult person, with no other children, who is pregnant or in the process of securing legal custody of any individual under the age of 18 years; or who shares joint custody of any individual under the age of 18 years at least 50% of the time; or

4. Any other single person.

FAMILY SELF-SUFFICIENCY (FSS Program)

The program established by an HA to promote self-sufficiency of assisted families, including the provision of supportive services

FAMILY SHARE

The portion of rent and utilities paid by the family.

FAMILY UNIFICATION PROGRAM

The program provides assistance to families for whom a lack of adequate, suitable housing is a primary factor in the separation, or potential for separation of the children, from their families. It can also be used if there is a delay in the discharge of children (preventing the children from returning home), due to lack of appropriate housing.

FAMILY UNIT SIZE

The appropriate number of bedrooms for a family. Family unit size is determined by the HA under the HA subsidy standards.

FULL-TIME STUDENT

A person who is carrying a subject load that is considered full time for day students under the standards and practices of the educational institution attended. An educational institution includes a vocational school with a diploma or certificate program, as well as an institution offering a college degree.

GROSS RENT

The total monthly cost of housing an eligible family, which is the sum of the Contract Rent and any utility allowance for the assisted unit. In the case of rental of only manufactured home space, gross rent also includes the family's monthly payment to amortize the purchase price of the manufactured home.

HEAD OF HOUSEHOLD

The adult member of the family who is the head of the household for purposes of determining income eligibility and rent.

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HOUSING AGENCY (HA)

A State, county, municipality or other governmental entity or public body (or agency or instrumentality thereof) authorized to engage in or assist in the development or operation of low-income housing.

HOUSING ASSISTANCE PAYMENT (HAP)

The monthly assistance payment by an HA. The total assistance payment consists of:

1. A payment to the owner for rent to owner under the family's lease.

2. An additional payment to the family if the total assistance payment exceeds the rent to owner. In the certificate program, the additional payment is called a "utility reimbursement".

HOUSING QUALITY STANDARDS (HQS)

The HUD minimum quality standards for housing assisted under the tenant-based program.

HOUSING PRESERVATION VOUCHERS

Families eligible to receive a voucher because of a mortgage prepayment or voluntary termination of a mortgage insurance contract.

INITIAL CONTRACT RENT

In the certificate program, the contract rent at the beginning of the initial lease term.

INITIAL HA

In portability, the term refers to both:

1. A HA that originally selected a family that subsequently decides to move out of the jurisdiction of the selecting HA.

2. A HA that absorbed a family that subsequently decides to move out of the jurisdiction of the absorbing HA.

INITIAL LEASE TERM

The initial term of the assisted lease. The initial lease term must be for at least one year.

INS

The U.S. Immigration & Naturalization Service.

JURISDICTION

The area in which the HA has authority under State and local law to administer the program.

LEASE

1. A written agreement between an owner and a tenant for the leasing of a dwelling unit to the tenant. The lease establishes the conditions for occupancy of the dwelling unit by a family with housing assistance payments under a HAP Contract between the owner and the HA.

2. In cooperative housing, a written agreement between a cooperative and a member of the cooperative. The agreement establishes the conditions for occupancy of the member's cooperative dwelling unit by the member's family with housing assistance payments to the cooperative under a HAP contract between the cooperative and the HA.

LIVE-IN AIDE

A person residing with an elderly or disabled person or persons solely for the purpose of providing medical care. The need for such care must be medically verified. Live-in aides are not counted as family members and their income is not included in the calculation of family income. The name of a live-in aide will be listed on the lease, and 50058. The notation "live-in aide" will be made on the calculation sheet for bedroom size determination purposes only. Tenant must request and receive approval for each and any live-in aide.

LOCAL PREFERENCE

A preference used by the HA to select among applicant families without regard to their federal preference status.

LOW-INCOME FAMILY

A family whose Annual Income does not exceed 80 percent of the median income for the area, as determined by HUD with adjustments for smaller and larger families.

LUMP-SUM BENEFIT

A payment of monthly benefits for a previous period which may be included as income (except such lump sums of Social Security shall not be counted as income). Only that portion of the payment attributable to the time the tenant resided continuously under the Section 8 Program may be counted as income.

MAINSTREAM DISABILITY

This program provides rent assistance to families/individuals who are disabled.

MEDICAL EXPENSES

For purposes of income determination for elderly persons or families, medical expense in excess of 3% of total family income, where these expenses are not compensated for, or are covered by insurance. Medical expenses include such items as medical insurance premiums, dental expenses, prescription and nonprescription medicines, etc.

MINOR

A person less than eighteen years of age (Head of household, spouse, or an unborn child may not be counted as a minor.)

MIXED FAMILY

A family whose members include those with citizenship or eligible immigration status, and those without citizenship or eligible immigration status.

NATIONAL

A person who owes permanent allegiance to the United States, for example, as a result of birth in a United States territory or possession.

NET FAMILY ASSETS

Net cash value after deducting reasonable costs that would be incurred in disposing of real property, savings, stocks, bonds, and other forms of capital investment excluding interests in Indian trust land and the equity in a housing cooperative unit or in a manufactured home in which the family resides.

NONCITIZEN

A person who is neither a citizen or national of the United States.

OWNER

Any person or entity with the legal right to lease or sublease a unit to a participant.

PARTICIPANT (participant family)

A family that has been admitted to the HA program, and is currently assisted in the program. The family becomes a participant on the effective date of the first HAP contract executed by the HA for the family (first day of initial lease term).

PAYMENT STANDARD

In the voucher program, an amount used by the HA to calculate the housing assistance payment for a family. Each payment standard amount is based on the fair market rent and must between 90% and 110% of the currently published FMR. The HA adopts a payment standard for each bedroom size and for each fair market rent area in the HA jurisdiction. The payment standard for a family is the maximum monthly subsidy payment.

PERMANENT HOUSING

Does not include homeless shelters, transitional housing and residential facilities.

PORTABILITY

Renting a dwelling unit with Section 8 tenant-based assistance outside the jurisdiction of the initial HA.

PREMISES

The building or complex in which the dwelling unit is located, including common areas and grounds.

PROJECT-BASED CERTIFICATES -

Rent subsidy tied to the rental unit. Certificate cannot be used for any other dwelling unit.

REASONABLE RENT

A rent to owner that is not more than either:

1. Rent charged for comparable units in the private unassisted market; or

2. Rent charged by the owner for a comparable assisted or unassisted unit in the building or premises.

RECEIVING HA

In portability, an HA that received a family selected for participation in the tenant-based program of another HA. The receiving HA issues a certificate or voucher, and provides program assistance to the family.

REMAINING FAMILY MEMBERS

The sole remaining family member after a reduction in family size shall be permitted to remain in housing if over the age of 18 and able to live independently.

RENT REASONABLENESS LIMITATION

The HA is required to certify for each Section 8 Existing unit assisted that the Contract Rent is reasonable in relation to comparable units on the private unassisted market and not in excess of rents currently being charged for comparable unassisted units owned by the same landlord.

RENT TO OWNER

The monthly rent payable to the owner under the lease. Rent to owner includes payment for any services, maintenance and utilities to be provided by the owner in accordance with the lease.

RESIDENCY PREFERENCE

An HA preference for admission of families that reside anywhere in a specified area, including families with a member who works or has been hired to work in the area ("residency preference area").

RESIDENT OF AREA

A family living in the HA's jurisdiction, working in the HA's jurisdiction or notified that they are hired to work in the HA's jurisdiction. The length of time the family has lived or worked in the jurisdiction may not be considered.

RESPONSIBLE ENTITY

The person or entity responsible for administering the restrictions on providing assistance to noncitizens with ineligible immigration status.

SECURITY DEPOSIT

An amount deposited by the tenant, with the owner, which is not in excess of private market practice, or in excess of amounts charged by the owner to unassisted tenants.

SINGLE PERSON

A person who lives alone or intends to live alone who does not qualify as an elderly family, displaced person or the remaining member of tenant family.

SPECIAL ADMISSION

Admission of an applicant that is not on the HA waiting list, or without considering the applicants waiting list position.

SPOUSE

Spouse refers to the marriage partner, either a husband or wife, who is someone you need to divorce in order to dissolve the relationship. It includes the partner in a common law marriage. It does not cover boyfriends, girlfriends, significant others, or "co-heads".

SUBSIDY STANDARDS

Standards established by an HA to determine the appropriate number of bedrooms and amount of subsidy for families of different sizes and compositions. See definition of "family unit size".

SUSPENSION

Stopping the clock on the term of a family's certificate of voucher, for such period as determined by the HA, from the time when the family submits a Request for Lease Approval to the HA, until the time when the HA approves or denies the request.

TENANT

The person or persons (other than a live-in aide) who execute the lease as lessee of the dwelling unit.

TENANT RENT

In the certificate program, total tenant payment minus and utility allowance.

TOTAL TENANT PAYMENT

The total amount the HUD rent formula requires the tenant to pay toward rent and utilities.

UTILITY ALLOWANCE

The HA's estimate of the average monthly utilities (except telephone) for an energy-conscious household. If all utilities are included in the rent, there is no utility allowance. Utility allowances vary by unit type and bedroom size.

UTILITY REIMBURSEMENT

In the certificate/voucher program, the amount, if any, by which any utility allowance for family-paid utilities or other housing services exceeds the total tenant payment.

VERY-LOW INCOME FAMILY

A Low-Income family whose Annual Income does not exceed 50 percent of the median income for the area, as determined by HUD, with adjustments for smaller and larger families.

VIOLENT CRIMINAL ACTIVITY

Any illegal criminal activity that has as one of its elements the use, attempted use, or threatened use of physical force against the person or property of another.

VOUCHER (rental voucher)

A document issued by an HA to a family selected for admission to the voucher program. The voucher describes the program, and the procedures for HA approval of a unit selected by the family. The voucher also states the obligations of the family under the program.

SECTION 8 ADMINISTRATIVE PLAN
INFORMAL REVIEW PROCEDURES
(For Applicants)

I. Applicability

A. The Housing Authority will provide an opportunity for an informal review regarding a decision denying assistance to an applicant, including a decision:

1. Denying placement on the waiting list.

2. Denying participation in the Section 8 Program.

B. The Housing Authority is not required to provide an opportunity for informal review:

1. To review discretionary administrative determinations by the Housing Authority, or to consider general policy issues or class grievances.

2. To review the Housing Authority's determination of the number of bedrooms determined under the standard established by the Housing Authority in accordance with HUD regulations.

3. To review the Housing Authority's determination that a unit located by a Certificate/Voucher holder does not comply with the Housing Authority's Housing Quality Standards established in accordance with appropriate HUD regulations, or the Housing Authority's determination not to approve a lease for the unit.

4. To review the Housing Authority's decision not to approve a request by a Certificate/Voucher holder for an extension of the term of the Certificate/Voucher.

C. Applicants are entitled to an informal hearing in cases where they are denied assistance for reasons based upon eligible immigration status. The rules in Appendix 7 and 7a apply in such cases.

II. Procedures

A. The Housing Authority shall give an applicant prompt written notice of a decision denying assistance to the applicant, including a decision denying placement on the official waiting list, issuance of Certificate of Family Participation, or voucher. The notice shall also state that the applicant may request an informal review of the decision, and shall describe how to obtain the informal review.

B. The applicant must submit a written request for an informal review within ten days of notification of the decision denying assistance.

C. If the request does not meet the criteria to be eligible for informal review, the applicant will be promptly notified in writing.

D. If the request does meet the criteria to be eligible for informal review, an informal review will be scheduled within ten days of the request.

E. The informal review shall be conducted by any person or persons designated by the Assisted Housing Manager other than a person who made or approved the decision under review or a subordinate of such person.

F. The applicant shall be given an opportunity to present written or oral objections to the Housing Authority's decision.

G. The Housing Authority shall notify the applicant in writing within 30 days of the final decision after the informal review, including a brief statement of the reasons for the final decision.

SECTION 8 ADMINISTRATIVE PLAN
INFORMAL HEARING PROCEDURES
(For Participants)

I. Applicability

A. *When an informal hearing is required*:

1. An HA must give a participant family an opportunity for an informal hearing to consider whether the following HA decisions relating to the individual circumstances of a participant family are in accordance with the law, HUD regulations and HA policies.
   (i) A determination of the family's annual or adjusted income, and the use of such income to compute the housing assistance payment.
   (ii) A determination of the appropriate utility allowance (if any) for tenant-paid utilities from the HA utility allowance schedule.
   (iii) A determination of the family unit size under the HA subsidy standards.
   (iv) A determination that a certificate/voucher program family is residing in a unit with a larger number of bedrooms than appropriate for the family unit size under the HA subsidy standards, or the HA determination to deny the family's request for an exception from the standards.
   (v) A determination to terminate assistance for a participant family because of the family's action or failure to act (see §982.552).
   (vi) A determination to terminate assistance because the participant family has been absent from the assisted unit for longer than the maximum period permitted under HA policy and HUD rules.
2. In the cases described in paragraphs (a)(1) (iv), (v) and (vi) of this section, the HA must give the opportunity for an informal hearing before the HA terminates housing assistance payments for the family under an outstanding HAP contract.

B. Pursuant to a federal court decision, the HA is also required to provide a participant family an opportunity for an informal hearing for any of the following:

1. Discretionary administrative determinations by the HA.
2. General policy issues or class grievances.
3. Establishment of the HA schedule of utility allowances for families in the program.
4. An HA determination not to approve an extension or suspension of a certificate or voucher term.
5. An HA determination not to approve a unit or lease.
6. An HA determination that an assisted unit is not in compliance with HQS.
7. An HA determination that the unit is not in accordance with HQS because of the family size.

8. A determination by the HA to exercise or not to exercise any right or remedy against the owner under a HAP contract.

C. *Notice to family*:

1. In the cases described in paragraphs above, the HA must give the family prompt written notice that the family may request a hearing. The notice must:
   (i) Contain a brief statement of reasons for the decision.
   (ii) State that if the family does not agree with the decision, the family may request an informal hearing on the decision, and
   (iii) State the deadline for the family to request an informal hearing.

D. *Expeditious hearing process:*

Where a hearing for a participant family is required under this section, the HA must proceed with the hearing in a reasonably expeditious manner upon the request of the family.

II. Procedures

A. *Discovery*:

1. *By family*. The family must be given the opportunity to examine before the HA hearing any HA documents that are directly relevant to the hearing. The family must be allowed to copy any such document at the family's expense. If the HA does not make the document available for examination on request of the family, the HA may not rely on the document at the hearing.
2. *By HA.* The HA hearing procedures may provide that the HA must be given the opportunity to examine at HA offices before the HA hearing any family documents that are directly relevant to the hearing. The HA must be allowed to copy any such document at the HA's expense. If the family does not make the document available for examination on request of the HA, the family may not rely on the document at the hearing.
3. *Documents.* The term "documents" includes records and regulations.

B. *Representation of family:*

At its own expense, the family may be represented by a lawyer or other representative.

C. *Hearing officer: Appointment and authority.*

1. The hearing may be conducted by any person or persons designated by the HA, other than a person who made or approved the decision under review or a subordinate of this person.
2. The person who conducts the hearing may regulate the conduct of the hearing in accordance with the HA hearing procedures.

D. *Evidence:*

The HA and the family must be given the opportunity to present evidence, and may question any witnesses. Evidence may be considered without regard to admissibility under the rules of evidence applicable to judicial proceedings.

E. *Issuance of decision:*

The person who conducts the hearing must issue a written decision, stating briefly the reasons for the decision. Factual determinations relating to the individual circumstances of the family shall be based on a preponderance of the evidence presented at the hearing. A copy of the hearing decision shall be furnished promptly to the family.

F. *Effect of decision:*

The HA is not bound by a hearing decision:

1. Concerning a matter for which the HA is not required to provide an opportunity for an informal hearing under this section, or that otherwise exceeds the authority of the person conducting the hearing under the HA hearing procedures.
2. Contrary to HUD regulations or requirements, or otherwise contrary to federal, State, or local law.
3. If the HA determines that it is not bound by a hearing decision, the HA must promptly notify the family of the determination, and of the reasons for the determination.

ACTION PLAN FOR THE CITY OF CEDAR RAPIDS, IOWA
FAMILY SELF-SUFFICIENCY PROGRAM
ADMINISTERED BY THE HOUSING SERVICES OFFICE
REVISED: October, 2004

INTRODUCTION:

The City of Cedar Rapids, Iowa Housing Services Office (herein referred to as the Housing Authority or HA) has been authorized to develop and administer a Family Self-Sufficiency (FSS) Program, pursuant to PART 984 CFR, as part of their FY93 funding allocation for 20 rental certificates and FY97 Family Unification Program allocations for 100 rental certificates. The HA has been authorized to administer a Section 8 Certificate/Voucher Program by the U.S. Housing Act of 1937 (and implemented by *PARTS 882 and 887 of 24 CFR*).

PURPOSE OF THE FSS PROGRAM:

"The purpose of the FSS program is to promote the development of local strategies to coordinate the use of public and Indian housing assistance and housing assistance under the Section 8 rental voucher programs with public and private resources, to enable families eligible to receive assistance under this program to achieve economic independence and self-sufficiency." *(Section 984.101(a))*

FSS PROGRAM OBJECTIVES:

The objectives of the FSS Program are to reduce the dependency of Section 8 tenant participants on welfare and other public assistance programs and enhance economic independence through community coordinated efforts including: high school diploma and higher education programs, job training, employment opportunities, personal social and life skill training, child care programs, personal financial management, counseling and related social service assistance.

DEFINITIONS:

Definitions as used in this Plan are outlined in PART 984.103 and PART 882 and 887 of 24 CFR.

Note: FSS family, family participant, FSS participants are used interchangeably throughout the text.

FSS PROGRAM ADMINISTRATION AND MANAGEMENT:

Project Coordinating Committee: The HA has established an FSS Project Coordinating Committee (PCC) as required in PART 984.202 of CFR. The PCC

will assist the FSS Program in securing commitments from public and private resources to implement the FSS Program. The PCC will serve as a governing body and provide direction in FSS program-related policies and procedures, including the adoption of the Action Plan and subsequent amendments, as necessary. Policies include, but are not limited to the following:

- Determination of suitable employment for FSS families
- Consequences of noncompliance with FSS Contract
- FSS Contract Extensions
- Unavailability of supportive services
- FSS Contract Modifications
- FSS Contract Completion
- FSS Contract Termination (for Program noncompliance)
- Option to terminate Section 8 Housing and supportive services assistance
- Transitional supportive service assistance
- FSS escrow accounts
- Section 8 residency and portability requirements relating to FSS programs
- Programs/projects to enhance family participation

PCC Membership: *The PCC is comprised of a broad representation of community public and private organizations. Members also include FSS participants and representatives from the Housing Authority. The following agencies have committed, through written Certifications of Support, to provide a representative to the PCC plus the additional supportive services listed:*

- *Cornerstone / Four Oaks – assistance with academics, life skills, interview referrals, employment related workshops (such as resume assistance, interview techniques), child care referrals, limited emergency financial and medical assistance, and family support services.*
- *HACAP (Hawkeye Area Community Action Program) – Life Skills workshops and training, transitional housing, Section 8 participating landlord, WIC, Head Start, emergency assistance for basic need items, family support, utility assistance, child care referral assistance.*
- *MAHP (MidAmerica Housing Partnership) – specialized educational assistance such as homeownership classes, financial management such as debt management, savings programs, Section 8 participating landlord.*
- *Iowa Department of Human Services*
- *Abbe Center for Community Mental Health – mental health counseling and therapy services, adult day treatment, community support services.*
- *ASAC (Area Substance Abuse Council) – counseling and therapy services*
- *Heart of Iowa – academic such as GED, high school, Life Skills training, support services such as child care assistance, counseling and therapy, family support, transportation and emergency assistance for basic needs*
- *Iowa Workforce Development – employer job referrals, job training / retention, career related assessment, resume assistance, interview training, access to*

Navigator Disability Assistance Program, veterans services, and access to a resource room.

- *Kirkwood Skills to Employment / Promised Jobs – academic (GED, high school, English proficiency), Life Skills workshops, tuition assistance, career assessment, employer referrals, vocational assistance, paid work experience, child care assistance, transportation reimbursement, emergency financial assistance, pre-employment workshops, physicals.*
- *Waypoint – Madge Phillips Center – Like Skills workshops, emergency assistance.*
- *Goodwill Industries – career related assessment, employer referrals, employment related workshops, vocational assistance, occupational skills training, supported community living services.*
- *House of Hope – Life Skills classes, academic assistance for GED, high school, college, career related referrals, counseling services, transportation assistance, some financial assistance.*
- *Partnership for Safe Families – counseling, transportation assistance, emergency assistance for basic needs items, family support, family team meetings.*
- *Cedar Rapids Community Schools – academics, alternative high school (Metro), family support, school supplies, specialized assistance for homeless families.*
- *Vocational Rehabilitation*
- *Cambridge Tempositions*

Contract For Administration: There will be no Contract for Administration of the FSS program. The FSS Program will be administered by the HA (City of Cedar Rapids, Iowa Housing Services Office).

Family Self-Sufficiency Activities and Supportive Services/Methods for Identification of Family Support Needs: The HA's Housing and Family Specialist shall provide FSS family participants with the following services based on their individual needs and stated goals.

♦ Assessment and Planning: Following completion of the Family Self-Sufficiency Assessment each head of the family will complete an Individual Training and Services Plan, resources and services to be utilized, and interim and final goals to complete the plan.

♦ Individualized Goal Planning: Each family will meet with a Housing and Family Specialist who is trained to assist the family in assessing their strengths and needs. The Housing and Family Specialist will then assist the family in developing a plan to accomplish their goals.

♦ The Housing and Family Specialist will make referrals to programs and services offered by community agencies, as appropriate to family's strengths, abilities and needs. Financial Consultation: The Department of Human Services (DHS) Income Maintenance Workers have access to information

regarding financial resources and eligibility requirements that participants can access.

♦ Educational Groups: Families in Family Self-Sufficiency will have access to group activities that are held at various service agencies. These activities may include parenting classes, domestic violence awareness programs, resume building assistance, career counseling, financial counseling, and other training or workshops.

♦ Escrow Account: The HA will work with each family participant in determining the amount of their escrow account and will determine completion of the FSS contract. A portion of the account may also be utilized prior to completion of the Family Participation contract if the family is meeting interim goals of their plan. The Housing and Family Specialist will first refer the family to other financial resources when possible.

FSS (Escrow) Account Management: The HA shall deposit the FSS account funds of all participating families into a single depository account. The HA shall maintain individual FSS family accounts and shall credit, at least annually, the amount of FSS credit determined by increases in earned income during the family's contract of participation. *FSS participants that are determined by the HA to be disabled, may not have the option of increasing their rent or earning escrow if they qualify for the Earned Income Disallowance.*

The HA will give the family a report on the amount in the families' escrow account at least once a year. The report will list any deductions made from the account for amounts due the HA before interest is calculated and distributed; the amount of interest earned during the year; and the total in the account at the end of the reporting period.

FSS Discretionary Loan Fund: The HA may establish a fund utilizing administrative fee reserve funds to provide emergency funds for those families participating in the FSS program. Said assistance shall be limited to emergency situations such as childcare, medical expenses not provided by private or public insurance plans, transportation needs, or educational needs not provided by scholarships, grants or other public or private funding resources. Referrals will be made through the FSS Housing and Family Specialist, and recommendations made to the *Assisted Housing Manager*. The HA shall have the option to provide the assistance in the form of a no or low interest loan in order to maintain the fund account. Pursuant to Section 982.155 of the 24 CFR, the HA has authorization to establish the maximum amount that may be charged against the administrative fee reserve without specific approval. The maximum for the FSS Discretionary Loan fund has been established at $2,500.00. The maximum loan amount per participant is $200.

FAMILY PARTICIPATION:

Participation Selection: The HA's policies for selecting FSS family participants are subject to the requirements described in section 984.203 of the Section 8 Family Self-Sufficiency Program and the Project Coordinating Committee's direction. FSS family participants shall be selected without regard to race, color, religion, sex, handicap, familial status, or national origin. Based on the existing funding availability and current HA staff capacity, 120 families will be selected to participate in the program.

General Selection Requirements:

- ♦ FSS participants must be approved tenants in the Section 8 Housing Assistance Payments Program.
- ♦ All potential FSS participants will receive information in the Section 8 Briefing folder about the FSS Program.
- ♦ All new Section 8 tenants will be invited to participate in the FSS Program at the time they sign their Section 8 Lease. Families on the Family Unification Program will be given a selection preference.
- ♦ FSS Applicants will be required to attend an orientation session and complete a Family Self-Sufficiency Assessment.
- ♦ The family's willingness to complete the obligations of the FSS Contract.
- ♦ The number of families participating in the FSS Program, may exceed the 120 mandatory slots, if there are eligible and interested families.

Incentives to Encourage Family Participation:

- ♦ HA will establish an escrow account for FSS participants when eligible.
- ♦ Opportunity to select services that will assist the family in developing the necessary skills and securing the resources to become self-sufficient.
- ♦ The opportunity to develop supportive relationships.
- ♦ The opportunity to receive individualized assistance and encouragement.
- ♦ Access to community employment, training and educational resources.

Contract of Participation: Each family selected is required to enter into a contract with the HA that outlines the participant's goals, individualized training and service plan, rights and responsibilities pursuant to the Section 8 FSS program requirements, resources and services provided and specific activities, including target dates, to be completed by the FSS program participant. The contract of participation shall require that the FSS family comply with the terms and conditions of the Section 8 program.

Rent Adjustments: FSS families must report all changes in family composition, status or income to the HA in accordance with the City of Cedar Rapids Section 8 Administrative Plan. Failure to do so within 10 days may result in a retroactive rent change.

Increases in the FSS family's earned income may not be considered as "income or resources" for the purposes of eligibility of the FSS family for other benefits, or amount of benefits payable to the FSS family, under any other program administered by HUD, unless the income of the FSS family equals or exceeds 80 percent of the median income of the area**.** *FSS families have a one-time option to delay an interim rent increase for a maximum period of 3 months.* FSS families may not defer a rent increase if the income increase is determined at lease renewal, if increase is due to zero income, *change of rental unit,* or change in family status. *Families determined by the HA to be disabled must defer rent increases according to the Earned Income Disallowance regulations.*

Escrow Account Disbursements: The HA will establish an escrow account for FSS families to serve as a "savings" for increased employment earnings. Funds shall be disbursed to the head of household when the FSS contract of participation has been completed (according to section 984.303 of the Family Self-Sufficiency Program regulations). The head of the FSS family must submit to the HA a certification that the contract has been successfully completed and that no member of the FSS family is a recipient of *cash* welfare assistance. The HA shall reduce the amount of escrow disbursed to the FSS family by the amount owed to the HA for balances due for discretionary loans or promissory notes.

FSS families may receive a portion, but not more than half of the balance, of their escrow account prior to completion of the contract of participation only if they meet interim goals and need the escrow funds to help complete the goals of the contract. The FSS participant shall submit a written request for the escrow funds, to the Housing and Family Specialist, along with documentation that the family is meeting interim goals and that the funds will be used to complete the contract of participation.

Employment obligation: Pursuant to Section 984.303 (4), the head of the FSS family shall be required under the contract of participation to seek and maintain suitable employment during the contract term (or extension thereof). Seek employment means that the head of household has applied for employment, attended job interviews and has otherwise followed through on employment opportunities. The determination of suitable employment shall be made by the HA considering the skills, education and job training of the head of household.

Term of Contract: The contract of FSS participation shall provide that participants be required to fulfill obligations (goals and related activities) to which they have committed no later than five (5) years after the effective date. Contract extensions shall be approved and granted in writing, if the HA, with concurrence of the PCC, finds that good cause exists for granting the extension. The FSS participant must submit a written request that describes the need for the extension and that circumstances beyond their control have prevented them from successfully completing the goals in the agreed term.

Consequences of noncompliance with the FSS Contract: The Contract of Participation shall specify that if the FSS family fails to comply with the terms and conditions of the contract which includes compliance with the assisted lease (pursuant to the Section 8 program, PART 882 and 887 of 24 CFR), the HA may:

1. Terminate the family's participation in the FSS Program,
2. Terminate or withhold the Family Section 8 assistance,
3. Process the loss of FSS escrow account: The family will not receive the funds in its FSS escrow account if:
   a) The contract of participation is terminated;
   b) The contract of participation is declared null and void; or
   c) The family has not met its family responsibilities within the timeframe specified in the contract.

PORTABILITY REQUIREMENTS FOR FAMILY PARTICIPANTS

Section 8 Residency Requirement: A family participating in the Section 8 program must lease an assisted unit, for a minimum period of 12 months after the effective date of the FSS Contract of Participation. Thereafter, the FSS family may move outside the jurisdiction with the regulations of 24CFR Part 982.

FSS Program and Portability: The original HA *may, at it's discretion,* approve continued FSS participation for a family porting to another jurisdiction, if the family demonstrates, to the satisfaction of the HA that they will be able to fulfill their responsibilities under the Contract of Participation. However*, the original HA may terminate the family's Contract of Participation if the family exercises portability to a jurisdiction that does not have an FSS program, or if the family is not accepted into the FSS program at the new HA.* If a family does not continue to participate in an FSS program, any remaining funds in their escrow account will be forfeited to the original HA. If the family remains in the FSS program, there will be only one Contract of Participation. Although not obligated to enroll the porting family, the receiving Housing Authority *may* authorize family participation in their FSS program. In this case, the initial Contract of Participation will be terminated and a new contract with the receiving Housing Authority will be executed*. Incoming portable FSS families will not begin to receive escrow credits to an escrow account until the effective date of the new FSS Contract of Participation.*

Escrow Account: Regardless of whether the relocating FSS family remains in the FSS program of the HA or enrolled in the receiving Housing Authority's FSS program, there will be only a single escrow account maintained by the HA until such time the family is absorbed by the receiving Housing Authority. When the FSS family is absorbed by the receiving Housing Authority and enters into a new FSS Contract of Participation, the family's escrow funds will be transferred to the receiving Housing Authority's escrow fund. In the event of forfeiture of the FSS

family’s escrow account, the funds in the account will revert to the Housing Authority maintaining the FSS account for the family.

CITY OF CEDAR RAPIDS POLICY FOR THE USE OF FAMILY SELF-SUFFICIENCY DISCRETIONARY FUNDS
REVISED: 4-1-99

Cedar Rapids Housing Services has developed a Family Self-Sufficiency Program to promote the development of local strategies to coordinate the use of Section 8 Housing Assistance with local and public resources to enable families to receive assistance under these programs to achieve economic independence and self-sufficiency. As stated in PART 982.155 of the conforming rule, the Housing Authority has "broad discretion to use administrative fee reserve funds for other housing purposes permitted by state and local law." Since the Family Self-Sufficiency Program (FSS) is directly linked to Section 8 program participants, a set aside fund has been established to meet the goals of the program. The policy and procedures on the use of said fund have been approved by Cedar Rapids Housing Authority and the FSS Project Coordinating Committee.

PURPOSE FOR THE DISCRETIONARY FUND – Limitations on the use: The purpose of the discretionary fund is to provide FSS Family Participants assistance to meet emergency situations when other personal and public resources are not available. Funds must be used to meet the goals of the FSS participant in attaining economic self-sufficiency. Funds will be limited to emergency child care needs, transportation costs (including minor repairs of personal vehicle), medical expenses not covered by private or public medical insurance plans, educational needs not covered by scholarships, grants or other public or private funding resources. The Housing Authority shall also utilize the Discretionary Fund to cover costs of Family Self-Sufficiency Program sponsored events, such as specialized training, information seminars or informal family gatherings.

ASSISTANCE – Terms and Conditions: Assistance will be in the form of a 0% interest loan not to exceed $200.00 per family participant in a twelve month period. A Promissory Note shall be signed by the participant which states that twelve (12) equal monthly payments shall begin thirty (30) days following the fund disbursement. The family shall also agree to pay all debts and obligations owed to the Housing Authority prior to the end of the family's FSS Contract of Participation. Unpaid discretionary fund loan obligations shall be collected from the escrow account when the FSS participant completes, or is terminated from the program.

PROCEDURE FOR REQUESTING DISCRETIONARY FUNDS: FSS family participants shall have the opportunity to access emergency funds to assist them in meeting their FSS program goals. The "Request for Assistance" (attached) shall be completed by the family participant with the help of the Housing and Family Specialist. Requests shall be made only when all personal, private and public financial resources have been sought. The family participant shall give a

description of the emergency and the amount of assistance required to remedy the situation. Verifications (receipts, bills, estimates, etc.) will be required whenever possible. Finally, the Housing and Family Specialist will review the family participant's progress in meeting their program goals, and make a recommendation regarding approval or disapproval.

If approved by the Assisted Housing Manager, the Housing and Family Specialist will prepare a "Promissory Note", and forward it along with a W-9 form, to the family participant to sign and return. Upon receipt of the signed Promissory Note and W-9 form, a check request will be processed and submitted to the Cedar Rapids Auditor's Office according to existing procedures. A check, payable to the family participant or to the vendor, will be available approximately 14 days from the date of the request for payment.

FINANCIAL MANAGEMENT – Pursuant to Section 982.155 of 24 CFR (Conforming Rule), the Housing Services Office has set a maximum limit for the Discretionary Fund at $2,500.00. Interest earned (program income) from the account shall be maintained by the Housing Services Office. The Housing Services Office shall maintain individual FSS family accounts tracking disbursements and loan repayments.

Loan repayments shall be made payable to the "City Treasurer's Office" and mailed to the Housing Services Office at 1211 6th St SW, Cedar Rapids, Iowa 52404. Housing Services staff shall deposit the repayments into the Discretionary Fund Account.