

[Home \(/home\\_pha.cfm\)](#) / [Rehab / Construction \(rcc\\_milestone\\_c.cfm?pid=406\)](#)

PROPERTY NAME

RAD PIC:



PHA Name:

Property Name:

New Property Name:

Conversion Type:

Actual Close Date:

# Units Converting:

RAD Status:

Reserved Units:  Portfolio  Multiphase  CAT CHAP

**RAD Completion Certification Due**

**Date:** Email [resourcedesk@radresource.net](mailto:resourcedesk@radresource.net) for assistance.

*You cannot submit this milestone until all items marked with ★ are completed. Fields highlighted in yellow are remaining items that must be completed.*

**Property Name**

★Owner Entity Name

★Owner Contact Name

★Owner Contact Email

★Owner Contact Phone

**Effective Date of HAP Contract**



☒ All of the above is accurate as-is OK ☒ I have updated the above information and it is accurate.

### OWNERSHIP CERTIFICATION



Check to certify★

1. Owner certifies that the RAD Resource Desk Transaction Log Sources & Uses > Post Conversion column has been reviewed and updated, as necessary, and contains the final Sources & Uses, including all permanent financing and any changes resulting from an increase or decrease in the Scope of Work. Click [HERE \(translog\\_postclose.cfm?pid=406&pc=1\)](#) to view/update the final Sources & Uses.

Please check to certify or provide details of the deviation below

2. Owner certifies that all items shown in the Scope of Work attached to the RAD Conversion Commitment (RCC) have been completed, except as described below.

Please check to certify or provide details of the deviation below

★Date Work Completed:

Amount of Rehab/Construction as of RAD Closing:

Actual Amount, if different:

If there were any deviations from the original Scope of Work (increase or decrease), describe:

Work for this project exceeded \$2,000 per unit, please upload a third-party completion certification.

[View Template \(Template\\_ThirdPartyCert\\_final.docx\)](#)

Choose File No file chosen

Add File

3. Owner certifies that owner has made the initial deposit to the Replacement Reserve account in the amount of \$225,000.00, except as described below.

Please check to certify or provide details of the deviation below

If the owner has not made the initial deposit, describe below:

4. Owner certifies that there are no liens on the property OR that all liens (including mechanic's liens) have been released and that there are no liens placed on the covered property aside from those approved by HUD and outlined in the RCC, or as described below.

Please check to certify or provide details of the deviation below

If there are any liens on the property not approved by HUD, describe below:

5. Input the number of RAD units abated for lead-based paint hazards as a result of the RAD Scope of Work completed. Do not include any abatement work done to non-RAD units or work done to units outside of the RAD Scope of Work.

## ★RIGHT TO RETURN



A core feature of the RAD program is that any resident has a right to return to the property after the RAD conversion. For the most updated guidance please see section 1.4.A.5(ii) of the RAD Notice and the RAD Fair Housing, Civil Rights, and Relocation Notice. Permanent involuntary displacement of public housing or Section 8 assisted residents may not occur as a result of a project's conversion of assistance and each resident must be able to exercise his or her right to return. However, a resident can opt to voluntarily and permanently relocate by accepting an Alternative Housing Option from the PHA or project owner. Please complete the following Right to Return questions. If all public housing units covered by the CHAP were vacant at the time of CHAP issuance, click the below box and skip this section. Otherwise, this section is applicable to all projects, regardless of whether or not there was relocation as a result of repairs/construction.

All Public Housing units covered by the CHAP were vacant as of the date of CHAP issuance. Skip this section.

1. Number of Public Housing households living at the Project at the time of CHAP issuance (01/06/2014) (cannot be 0):

2. Number of Public Housing move-ins between CHAP issuance and HAP effective date:

3. Moved out between CHAP issuance and the HAP effective date:

4. Evicted between CHAP issuance and the HAP effective date:

5. Total Households Eligible for the Right of Return (Line 1 + Line 2 - Line 3 - Line 4):

0

6. Of the households identified in Line 5 above, how many:

6a. Returned to the covered project following conversion, including those that were able to remain at the property and those temporarily relocated due to rehab:

6b. Voluntarily accepted Alternative Housing Options in lieu of returning to the covered project following conversion:

7. Total households not included above (Line 5 - Line 6a - Line 6b):

0

★Please explain any discrepancies or abnormalities in the data provided above:

Please provide details on why the number of residents who returned to the covered project following conversion is less than 90% of all Households Eligible for the Right of Return.

**SECTION 3 (FORM 60002)**



[View Section 3 Instructions \(Instructions\\_Sect3.pdf\)](#)

★Disbursement Agency/Project Owner:

★Address:

★City

★State

★Zip Code

★Tax ID Number:

★Contact Person

★Phone:

★Email:

Property ID:

Conversion Type:

Property Name:

Property Address:

PHA ID:

Amount of Rehab/Construction as of RAD Closing:

Transaction Sources:

Actual Amount, if different:

Public Housing Operating Reserves:

Reporting Period Begin:

Prior Year Public Housing Capital Funds:

Reporting Period End:

Replacement Housing Factor:

\$0.00

HOME Funds:

\$0.00

New Construction:

No

CDBG Funds:

\$0.00

1. ★Did the expenditure of these funds result in new hires for your agency or your contractors?

Empty text input field with a dropdown arrow on the right.

2. ★Did the expenditure of these funds result in any covered contracts?

Empty text input field with a dropdown arrow on the right.

**BEST EFFORTS TO COMPLY**



**Section 3 Recruitment**

- Recruited Section 3 residents through: local advertising media, signs prominently displayed at the project site, contacts with community organizations and public or private agencies operating within the metropolitan area (or nonmetropolitan county) in which the Section 3 covered program or project is located, or similar methods.

**Training or Employment of Section 3 Residents**

- Participated in a HUD program or other program which promotes the training or employment of Section 3 residents.

**Promoting Section 3 Businesses**

- Participated in a HUD program or other program which promotes the award of contracts to business concerns that meet the definition of a Section 3 business concern.

**Promoting Section 3 Businesses**

- Coordinating with Youthbuild Programs administered in the metropolitan area in which the Section 3 covered project is located.

Efforts for achieving compliance, barriers encountered, etc.

Empty text input field with a diagonal slash icon in the bottom right corner.

**Certification Statement**

I, \_\_\_\_\_, certify that I have the authority to submit this information to HUD and further certify under penalty of perjury under 28 U.S.C. Section 1746 that the statements and information contained herein: (1) meet the regulatory requirements of the Housing and Urban Development Act of 1968 as set forth at 24 CFR Section 135; and (2) are, to the best of my knowledge, truthful and accurate.

Save & Return Later

Submit Section 3 & Completion Certification to HUD