

**Use Restriction Agreement
Compliance Review**

**U.S. Department of Housing
and Urban Development
Office of Housing
Federal Housing Commissioner**

**OMB Approval No. 2502-0577
Expiration Date: 06/30/2021**

Public Reporting Burden for this collection of information is estimated to average 2 hours per response. The purpose of this form is to ensure owner compliance with the executed Use Restriction Agreement. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the Reports Management Officer, Office of Information Policies and Systems, U.S. Department of Housing and Urban Development, Washington, D.C. 20410-3600 and to the Office of Management and Budget, Paperwork Reduction Project, Washington, D.C. 20503. Do not send this completed form to either of the above addresses. This agency may not collect this information, and you are not required to complete this form, unless it displays a currently valid OMB control number.

This information collection is authorized by Section 250 of the National Housing Act, Section 223(f)(3) of the National Housing Act, and Section 219 of the 1999 Appropriations Act. This information is used to ensure that units are maintained and used solely as rental housing in accordance with the terms of the Use Agreement through the original maturity date of the mortgage. This information is also monitored by HUD (via form HUD-90075) to ensure compliance with the executed and recorded Use Agreement. No assurance of confidentiality is provided.

General Instructions: This form is used only to review use restricted units. This form consists of three sections (Sections I, II, and III). Section I - Use Agreement Review is completed by HUD (or its representative) during the compliance review of the Use Agreement. Section II(a) - Summary of Tenant File Review is completed by HUD (or its representative) after the compliance review of the use restricted unit tenant files Section II(b) - Tenant File Review Worksheet. Section III - Tenant Survey is completed by tenants residing in the use restricted units. **Reviewer must attach additional sheets to document additional observations and comments.**

SECTION I – Use Agreement Review

| | | | |
|----------------------------------------------------------------------------------|---------------------------------------------------------|-------------------------------------------------------------------|------------------------------------------------------|
| Date of On-site Review: | Reviewed by: (Name and Title): | Name of Project: | |
| REMS ID Number: | Project FHA Number: (or former) | Project Address: | |
| Name of Contact at Property: | Total Number of Units | Use Restriction Agreement Effective Date: | Use Agreement Restriction Agreement Expiration Date: |
| Contact Telephone Number: | Number of Units Restricted by Use Restriction Agreement | | |
| Owner information: Name: Address: Telephone Number: | | Management information: Name: Address: Telephone Number: | |
| Indicate “Yes” or “No” for the following: | | YES | NO |
| 1. Does the owner/agent have a copy of the Use Agreement? | | | |
| 2. Was the Use Agreement recorded? a. If yes, enter recordation jurisdiction: | | | |
| 3. Are the HUD and Owner Use Agreement Restrictions Identical? | | | |
| Comments: | | | |

Section II(a) – Summary of Tenant File Review

| | | |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------|---------------------------------------|
| Instructions: HUD (or its representative) will conduct a random sampling of the restricted units and review a minimum of 30% of the total restricted units. Complete this section and make a determination of compliance based on a review of the use restricted unit tenant files. | | |
| Number of Use Restricted Units = | Minimum File Sample = | Total Number of Deficiencies = |
| | | |

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|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <p>Comments:</p> |
| <p>Use Agreement Compliance Determination:</p> <p> <input type="checkbox"/> Owner is in compliance with the Use Agreement <input type="checkbox"/> Owner is not in compliance with the Use Agreement </p> |

Section II(b) – Tenant File Review Worksheet

Instructions: This tenant file review worksheet must be copied and completed for each use restricted unit tenant file reviewed. HUD (or it's representative) will reevaluate the results of all tenant file review worksheets and complete Section II(a), Summary of Tenant File Review.

| | | | |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------|---------------------|--|
| Project Name: | | Project Address: | |
| Family Name: | Unit Number: | Date File Reviewed: | |
| Bedroom Size: <input type="checkbox"/> 0 Bedroom <input type="checkbox"/> 1 Bedroom <input type="checkbox"/> 2 Bedroom <input type="checkbox"/> 3 Bedroom <input type="checkbox"/> 4 Bedroom <input type="checkbox"/> 5 or more Bedrooms | | | |
| 1. Is the household income eligible? | Yes <input type="checkbox"/> No <input type="checkbox"/> | Comments: | |
| 2. What is the household composition? | | Comments: | |
| Number of Adults: Number of Children: Yes <input type="checkbox"/> No <input type="checkbox"/> | | | |
| 3. Is the unit size appropriate for household? | Yes <input type="checkbox"/> No <input type="checkbox"/> | Comments: | |
| 4. Does the unit appear to be maintained in decent, safe, and sanitary condition? | Yes <input type="checkbox"/> No <input type="checkbox"/> | Comments: | |
| If no, list deficiencies: | | | |
| Additional Comments: | | | |

| | |
|------------------------------------------------------------------------------|----------------------------------------------------------------------------------|
| File Review Finding: | |
| Tenant File is in Compliance with the Use Agreement <input type="checkbox"/> | Tenant File is not in Compliance with the Use Agreement <input type="checkbox"/> |

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Section III – Tenant Survey

Instructions: This tenant survey will be used as part of HUD’s evaluation of property services. Your input is valued greatly, so please take a few moments to fill out the form below. Please rate the following general services as Excellent, Fair, or Poor.

| Services | Excellent | Fair | Poor |
|---------------------------------------------------------|------------------|-------------|-------------|
| Unit Maintenance Response | | | |
| Unit Emergency Maintenance Response | | | |
| Cleanliness of Common Areas (Halls, Parking Lots, etc.) | | | |
| Maintenance of Common Areas (Hall, Parking Lots, etc.) | | | |
| Management Response to Tenant Concerns | | | |
| Overall Satisfaction with Management of Property | | | |
| Overall Satisfaction with Unit | | | |

Tenant Comments: