CHAPTER 5
REPORTING SECTION 8
EXISTING HOUSING CERTIFICATES
Form HUD-52491.3

5-1 CHAPTER OVERVIEW. This Chapter describes procedures for reporting Existing Housing Certificates. It specifically pertains to Existing Housing program activity of State Housing Agencies (HFDA) and Local Housing Authorities (PHAs/Non-HFDA) not acting as a State Housing Agency.

A. References in this Chapter to the Housing Funding Control systems pertain to systems which are officially designated by the Department for input by the Regional Accounting Directors (RADs) of Reservation and Contract data which are automatically interfaced daily to the Section 8 MIS. The Assisted Housing Accounting System (AHAS) and the Program Accounting System (PAS) are system examples.

B. State Code abbreviations, Field Office Codes, County Code(s), Locality Code(s), SMSA Code(s), Congressional District Code(s), and Central City Indicators are to be selected for reporting from the Headquarters' computer-generated Field Office reports of D71AAC-A and D71AAC-B, entitled "Geographic Code System Population and SMSA Report". For report samples, refer to appendices 1 and 2 of the User Guide for Geographic Code System, I-160.10 Rev.1. For information on these reports, contact the following Headquarters' organizations:

1. The Office of Information Policies and Systems, Systems Engineering Group, Project Management Staff, AIS.


5-2 FORM HUD-52491.3. The responsible Section 8 Program organizational staff member, after completion of each development stage on the form, is to initial, date, and submit the green copy (where applicable) to
the assigned program data entry staff member(s) for data entry to the Section 8 MIS. The assigned data entry staff member(s) is to initial and date the form upon completion of the data entry session. Refer to Figure 5-1 on the following page for an illustration of the form.

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CHAPTER 5
A. SUBPROGRAM TYPES

Certificates - Property Disposition
Certificates - Public Housing Demolition
Certificates - Section 23 Conversions
Certificates - Renewals (Fiscal Year 90+ (FY 90+))
Certificates - Opt-Outs (FY 90+)
Certificates - Homeownership Support (FY 90+) - Funds not appropriated. Replaced by (FY 91+)

Existing Housing Replacement Certificates

Certificates - Existing Housing Replacement Certificates (FY 91+)

These Certificates are for the replacement of Public Housing units that are lost through demolition or disposition.

Certificates - Regulars - (Non-HFDA and HFDA combined Non-PHA Owner)

Certificates - Rental Rehabilitation

Certificates - Project Self-Sufficiency

Certificates - Statewide (Fiscal Year 84 (FY 84) only)

B. FUNDING INCREMENT CONFIGURATIONS

1. EXISTING CERTIFICATES and COST AMENDMENTS (a fund increase amendment increment to an already funded increment)

   a. Positions 1 and 2: Federal Standard alpha State code applicable to the state in which the allocation area is located. Refer above to paragraph 5-1.B.
b. Positions 3 and 4: HUD Standard numeric code for the HUD Field Office having jurisdiction over the allocation area. Refer above to paragraph 5-1.B.

c. Position 5: The HUD Contractual Relationship will assist in determining whether an "H" or "E" is assigned for applications received from a state agency.

   (1) "E" = PHA/Non-HFDA (receipt of Form HUD-52515 (pursuant to Handbook 7420.3)

   (2) "H" = HFDA (receipt of Form HUD-52516 (pursuant to Handbook 7420.4);

d. Positions 6 through 8: The three-digit serialized number starting with "001" issued consecutively by the Field Office to identify the PHA (Non-HFDA)/HFDA or local housing agency) administering the Funding Increment.

   For Cost Amendments, this Code will be the same as the previously funded increment for which this is a cost Amendment.

e. Positions 9 through 11: A three-digit serialized number starting with "001" issued consecutively for each application associated with a PHA.

   For Cost Amendments, this is a three-digit number starting with "901" issued consecutively for each funding amendment for the PHA.

   Example: MA06H013001 - HFDA
           MA06E129001 - PHA (Local/State Housing Agency)
           MA06H013901 - Cost Amendment
           MA06E129901 - Cost Amendment

2. EXISTING STATEWIDE RENTAL REHABILITATION (FY 84 ONLY)

a. Positions 1 and 2: Federal Standard alpha State Code in which the allocation area is located. Refer above paragraph 5-1.B.
b. Positions 3 and 4: HUD Standard numeric code for the HUD Field Office having jurisdiction over the allocation area. Refer above to paragraph 5-1.B.

c. Position 5 through 11: "E999999"

Example: MA06E999999 (FY 84 only)

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5-4 APPLICATION RECEIVED
EXISTING CERTIFICATES
FORM HUD-52491.3 (FRAMES 3F1/3F2)

The Federal Standard numeric State Code (C1043) in the Section 8 MIS is computer-generated from positions 1 and 2 of the Funding/Project Number.

A. 3F1, Block 1: Date Received (MM/DD/YY) - (Example, 04/11/90).

1. For PHA/Local Housing Authority not acting as a State Agency. Enter the date the Application (Form HUD-52515) is received by the Field Office.

2. For HFDA. Enter the date the application (Form HUD-52516) is received by the Field Office.

3. For Property Disposition. Enter the date the Property Disposition Committee (PDC) Sales Authorization memorandum is received from Headquarters.

B. 3F1, Block 2: Total Assisted Units. Not applicable to Cost Amendments. Enter the total number of assisted units (elderly and family) on the Application.

C. 3F1, Block 3: Total Elderly Units. Enter the total number of units on the application. If none, leave blank.

D. 3F1, Block 4: Program Type. Select the code representing the application's method of development.

Check Only:
"E" = Existing Housing

E. 3F1, Block 5A: Project Area. Select the correct letter code representing the funding allocation or project area.

Check One:

"M" = Metropolitan Area
"N" = Non-Metropolitan Area

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F. 3F1, Block 5B: Section 8 subprogram Code. If single code, enter in first position, leave second position blank.

Enter the designated letter code as follows:

"A" = Certificates - Property Disposition
"B" = Certificates - Public Housing Demolition
"C" = Certificates - Section 23 Conversions
"E" = Certificates - Renewals (FY 90+)
"G" = Certificates - Opt-Outs (FY 90+)
"I" = Certificates - Housing Replacements (FY 91+)
"O" = Certificates - Regular (Non-HFDA and HFDA combined Non-PHA Owner)
"R" = Certificates - Rental Rehabilitation
"S" = Certificates - Project Self-Sufficiency
"X" = Certificates - Statewide (FY 84 only)

Note: "X" is computer-generated in the Insured Indicator (C1079) in the Section 8 MIS to identify Cost Amendments.

G. 3F1, Block 6: County(s). Do not report for Statewide. Enter the selected three-digit Federal Standard county code(s) as described above in paragraph 5-1.B.

1. If there are more than five counties involved, select the five counties that best represent the locations of the funding or project areas.
2. The first county entered should represent the county with the largest number of assisted and/or unassisted units.

3. The first county entered represents the Prime County Code (C1080) in the Section 8 MIS.

H. 3F1, Block 7: Locality Code(s). Do not report for Statewide. Required for Property Disposition. For all other programs, enter where applicable (refer to Handbook 7420.3 REV-2 CHG 4). Enter the four-digit place/locality code(s) selected as described above in paragraph 5-1.B.

1. If there are more than five localities involved, select the five localities that best represent the locations of the funding or project areas.

2. The first locality entered should represent the locality with the largest number of assisted and/or unassisted units.

3. The first locality represents the Prime Locality Code (C1041) in the Section 8 MIS.

I. 3F1, Block 8: Locality Name. Do not report for Statewide. Up to 25 characters, enter the "Place/County Name" corresponding to the first Locality Code entered in 3F1, Block 7.

Note: The Locality Name entered represents the Prime Locality Name (C1042) in the Section 8 MIS.

J. 3F1, Block 9: SMSA(s) (Standard Metropolitan Statistical Area(s)). Do not report for Statewide. Enter the four-digit
Federal Standard SMSA Code(s) corresponding to each Locality Code entered in 3F1, Block 7. Select the SMSA code as described above in paragraph 5-1.B.

1. If there are more than five SMSAs involved, select the SMSAs that best represent the locations of the funding or project areas in conjunction with the Locality Codes entered in 3F1, Block 7.

2. Enter "9999" if 50 percent or more of the units are not in an SMSA.

K. 3F1, Block 10: Central City. Do not report for Statewide. Select the item indicating whether or not the funding area is located within the central city of an SMSA determined as described above in paragraph 5-1.B.

Check One:

Yes

No

L. 3F2, Block 11: Congressional District(s). Do not report for Statewide. Enter the two-digit Federal Standard Congressional District Code(s), selected as described above in paragraph 5-1.B, representing the funding or project area(s).

1. If there are more than five congressional Districts, select the five that best represent the funding or project areas.

2. The first Congressional District entered should represent the District with the largest number of assisted and/or unassisted units.

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M. 3F2, Block 12: HUD Contractual Relationship. Do not report for Statewide. Select the code representing the entity with which HUD will sign an Annual Contributions Contract (ACC).

Check One:

"A" = State Housing Agency; an ACC is to be executed between HUD and the State Housing Agency.

"B" = Public Housing Agency (excluding State Agency); an ACC is to be executed between HUD and the Public Housing Agency.

Note: The HUD Contractual Relationship reported is used to determine the PHA-ADDRESS type code (C60) in the Section 8 MIS.

N. 3F2, Block 13: PHA Name. Do not report for Statewide. Up to 25 characters, enter the abbreviated name, not the corporate name of the PHA. Examples: Boston, HA; District of Columbia RLA; Mass. HFA; etc.

Note: The PHA Numbers (C59/C1049) are computer-generated in the Section 8 MIS from positions 1 and 2 and positions 6 through 8 of the Funding Number.

O. 3F2, Block 14: Housing Assistance Plan. Do not report for Statewide. Select the item indicating whether or not the area of the funding allocation has an approved Housing Assistance Plan.

Check One:

Yes

No

P. 3F2, Block 15: Located in Title VII or IV New Community.

1. The value of "N" is computer-generated in the Section 8 MIS data element New Community (C1059) for the following subprograms for which this data item need not to be reported:

- Existing Rental Rehabilitation
2. For all other Certificates, select the item indicating whether or not the funding area is in a Title VII or Title IV new community.

Check One:
Yes
No

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Q. 3F2, Block 16: Insured Indicator. Report only for Certificate Property Disposition and Section 23 Conversions. Select the item indicating whether or not a project carries HUD Mortgage Insurance.

Check One:
Yes
NO

Note: "X" is computer-generated in the Insured-Indicator element (C1079) in the Section 8 MIS to identify Cost Amendment increments.

R. 3F2, Block 17: Secretary/Held-Owned. Report only for Certificate Property Disposition and Section 23 Conversions.

Check One:
Yes - The application is for a HUD-held or HUD-owned property. For processing in the Section 8 MIS, "A" is to be entered on the 3F2 data entry screen by assigned data entry staff member(s).

No - The application is not for HUD-held or HUD-owned property. For processing in the Section 8
MIS, "D" is to be entered on the 3F2 data entry screen by the assigned data entry staff member(s).

Note: The Section 8 Program organizational staff member responsible for completing the Form HUD-52491.3 for the Existing Housing Certificate program, may write-in the appropriate "A" or "D" code alongside the checked "Yes" or "No" selection.

S. 3F2, Block 18: Owner's Name. Report only for Certificate Property Disposition. Enter the name of the firm which owns the project or the name of the firm's principal officer. Leave Blank, if not applicable.

T. 3F2, Block 19: Manager's Name. Report only if Owner's Name (Block 18) is reported for Certificate Property Disposition. Enter the name of the firm managing the property or the firm's principal officer.

U. 3F2, Block 20: FHA Project Number. Enter if "Yes" is selected for the Insured Indicator (3F2, Block 16) for Certificate Property Disposition.

1. An invalid FHA Number is defined as follows:

   All Xs
   All nines
   All zeros
   "None", or it is Not eight positions.
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2. A valid FHA Number is defined as follows:

   a. Positions 1-3: FHA Office prefix
   b. Positions 4-8: FHA Case Number
      (1) Positions 4-5: Section of the Housing Act
serial

(2) Positions 6-8: Consecutive
number within the Field Office;
or

(1) Positions 4-6: Section of the
Housing Act

(2) Positions 7-8: Consecutive
number within the Field Office.

V. 3F2, Block 21: Prime Census Tract/Enumeration Districts.
Report only for Certificate Property Disposition and
Section 23 Conversions. Enter the Census Tract
or Enumeration District designated by Field Office Fair
Housing and Equal Opportunity (FH&EO) personnel.
If not provided by FH&EO, leave blank. Refer to
appendix 1, Reporting Project Census Tract/Enumeration District.

1. Census Tracts:
a. Positions 1 through 4: enter the
census tract number with leading zeroes.
b. Positions 5 and 6: enter the census
tract suffix. If none, enter "00".
Examples:

| Census Tract #1 | = "0001" . "00" |
| Census Tract #25 | = "0025" . "00" |
| Census Tract #1104.10 | = "1104" . "10" |

2. Enumeration Districts.
a. Positions 1 through 4: enter
enumeration district number with leading zeroes.
b. Position 5: enter the letter suffix
of the enumeration district. If no
enter "X".

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c. Position 6: enter the letter "E".

Examples:

Enumeration
District #1 = "0001", "XE"

Enumeration
District #25 = "0025", "XE"

Enumeration
District #104A = "0104", "AE"

W. 3F2, Block 22: Total Project Units. Report only for Existing Certificate Property Disposition.

1. Enter the total number of units in the project, assisted and unassisted. If there are no unassisted units, enter the Total Assisted Units from Block 2.

2. Required to be reported at the Application Received stage.

3. The Percent of Total Units Assisted (C1078) in the Section 8 MIS is computed by dividing current Reserved Total Assisted Units (C1020) by the Total Project Units being reported.

5-5 TERMINATION BEFORE RESERVATION EXISTING CERTIFICATES. Refer to appendix 5, Termination Before Reservation.

5-6 APPLICATION APPROVED and RESERVATION EXISTING CERTIFICATES. The application approved development stage is automatically interfaced to the Section 8 MIS from the Reservation/Funding data input by the Regional Accounting Division (RAD) to the appropriate Housing Funding Control systems. Refer to appendix 2, Reporting Section 8 Fund Reservations/Amendments.

5-7 HAP LIST APPROVED EXISTING CERTIFICATES
FORM HUD-52491.3 (FRAME 3F2)

A. 3F2: Project Number. Copy the funding increment number exactly as
it appears at the top of the form.

B. 3F2: HAP List Approved Date. Enter the date (MM/DD/YY) that Form HUD-5041-C was signed by the Field Office manager.

C. LST: Enter data from Form HUD-5041-C, refer to appendix 3, Reporting ACC/HAP Contract list.

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5-8 ANNUAL CONTRIBUTIONS CONTRACT (ACC) EXISTING CERTIFICATES. The date (signature date, not effective date) of the obligatory Annual Contributions Contract (ACC) executed between the PHA and HUD is reported by the RAD to the appropriate Housing Funding Control system, from which it is automatically interfaced to the Section 8 MIS. Refer to appendix 4, Reporting Section 8 Obligatory Contracts.

5-9 REPORTING ADDRESSES EXISTING CERTIFICATES. Refer to appendix 8, Reporting Addresses. PHA and Managing Agent Addresses are required at ACC Contract.

5-10 PROGRAM UTILIZATION (OCCUPANCY) EXISTING CERTIFICATES FORM HUD-52683 (MGT FRAME). For Reporting Procedures, refer to Handbook 7420.7 CHG 4, Chapters 3 and 12. Within the requirements of an Annual Contributions Contract (ACC), the PHA and/or private owner shall submit occupancy data to HUD which describes the extent of program participation by characteristics of assisted families and financial data which discloses how annual contributions were spent.

For each set of units (funding increment) under the ACC, PHAs and/or private owners are to prepare and submit to HUD Field Offices on a project-by-project basis (i.e., for each funding increment under the PHA's ACC) occupancy data on Form HUD-52683, Report on Program Utilization. PHAs and/or private owners shall prepare at least two report copies, submitting one copy to the HUD Field Office and keeping one copy for its records.

A. REPORTING FREQUENCY (Refer to Handbook 7420.3 REV 2 CHG-3)

1. Quarterly Reporting. The report is to be first submitted
of the end of the quarter during which the ACC was initially executed or amended to incorporate a new funding increment.

Thereafter, it is to be submitted as of the end of each subsequent quarter (even if there is no change from the previous quarter report) until ninety-five percent of the units in the funding increment (i.e. authorized by ACC) are under lease (HAP Contract).

2. Annual Reporting. Once ninety-five percent of the units in the funding increment (i.e. authorized by the ACC) are under lease (HAP Contract), reporting on Form HUD-52683 is to be annually as of September 30 to be received by HUD Field Office by October 10. Once annual reporting has begun, reporting on Form HUD-52683 is to continue annually, even if the assisted units under lease drop below ninety-five percent of units in the funding increment.

Should the funding increment reach ninety-five percent occupancy during a quarter other than the quarter ending September 30, that quarterly report must be submitted, but no further reporting is required until September 30 of that year.

If ninety-five percent occupancy is reached during the quarter ending September 30, the report is to be submitted as of September 30 as a quarterly report.

3. Field Office Report Receipt. The reports are to be submitted to and received by the HUD Field Office by the 10th of the month following the quarter/year covered by the report period.

4. Section 8 MIS Data Entry. The Field Office organization responsible for the Section 8 program(s) should forward the report, upon receipt, to the assigned program data entry
staff member(s) for entering to the Section 8 MIS during the month following the quarter/year covered by the report period.

Example: Reporting Period - June 30, 1991
        Section 8 MIS Data Entry - July 1, 1991 and after

B. FORM HUD-52683. Refer to Figure 5-2 on the following page for an illustration of the form.

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C. SPECIFIC OCCUPANCY REPORTING INSTRUCTIONS

EXISTING CERTIFICATES

FORM HUD-52683 (MGT FRAME)

52683(MGT) 2b: Initial Lease Date. Enter the effective date
(MM/DD/YY - Example, 04/11/90) of the first lease executed between a certificate holder and an owner. Enter this date only if this is the initial report for the project or if the initial lease was executed during the reporting period, otherwise, leave blank.

52683(MGT) 2c: Occupancy Report Date. Enter date (MM/DD/YY - Example, 06/30/90) which is the as of end-of-month date that the project units under lease are reported.

52683(MGT) 3: Project Number. Enter the eleven character assigned funding increment/project number.

52683(MGT)Line D: Units Under Budget. Leave blank for Certificates.

52683(MGT)Line E: Certificates Outstanding. Enter the number of Certificates held by families searching for units and those already under contract (leased). Does not include certificates that have expired or have been terminated.

52683(MGT)Line F: Total Assisted Leased. Enter the total number of units currently under a signed lease to certificate holders.

52683(MGT)Line G: Total Elderly Leased. Enter the total number of units currently under signed lease and occupied by an elderly, disabled, or handicapped.

D. SECTION 8 MIS RETRIEVAL. For ease of retrieval of the latest occupancy data, the project level data items of Current Occupancy

Date (C1081), Current Total Assisted Units (C1082), and the
Total Elderly Leased (C1083) are valued in the databases each time occupancy data is reported.

E. SECTION 8 MIS COMPLETED LEASE UP (CLU). When the Total Number of Units Under Lease to Assisted Tenants are equal to or greater than 95 percent of the Total Reserved Assisted Units (C1020), the project elements of CLU-Date (C1065), CLU-Assisted (c1066), and CLU-Elderly (C1067) are valued from the Occupancy Report date, Total Assisted Leased, and Total Elderly Leased.

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5-11 MANAGEMENT REVIEWS

EXISTING CERTIFICATES

FORM HUD-52491.7 (FRAME MGT); Non-Insured and Non-202/8 Projects Only

A. REPORTING MANAGEMENT REVIEWS. The responsible Section 8 program organization of the Field Office is to report to the Section 8 MIS the initial (original) management review within six months after the initial execution of the ACC. A second review shall be conducted one year after the initial review. Subsequent reviews are reported every two years after the second review regardless of whether or not new units have been added to the program (refer to Handbook 7420.3 REV-2 CHG-4, CHAPTER 5).

B. FOR EXISTING CERTIFICATES. The PHA is reviewed, not the project(s), which are funding increments. Should the PHA have only one funding increment, management review data need be entered into the Section 8 MIS for any one non-insured funding increment/project for a given PHA. Therefore, the Field Office should select a non-insured funding increment/project for an ACC has been executed and each time a PHA is reviewed, the same funding increment/project number should be used to update.
the management review information in the Section 8 MIS.

C. Form HUD-52491.7. The form is designed for entering six annual reviews or a given PHA. Therefore, the original form should reflect each of the subsequent annual reviews, with a copy forwarded to the assigned program data entry staff member(s) who is to enter only the last entry. Refer to Figure 5-3 on the following page for an illustration of the form.

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**GRAPHICS MATERIAL IN ORIGINAL DOCUMENT OMITTED**

Figure 5-3

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D. SPECIFIC MANAGEMENT REVIEW REPORTING INSTRUCTIONS
EXISTING CERTIFICATES
FORM HUD-52491.7 (MGT FRAME)

52491.7(MGT): Project Number. Enter the eleven character selected PHA review funding/increment project number.

52491.7(MGT): Original Management Review Date. Enter date (MM/DD/YY - Example, 04/11/90) which is the date six months after the ACC execution for the funding increment being used for the PHA review.

52491.7(MGT): Annual Management Review Date. Enter date (MM/DD/YY - Example, 04/11/91) which is the review date for once a year or every two years subsequent to the original review date.

Note: Field Offices may elect to use the first issued PHA funding increment number for the original and subsequent reporting of PHA review dates. In this instance, if the first funding increment issued for a PHA becomes terminated, expired, defunded, or opted-out in the Section 8 MIS, both the original and/or subsequent annual review dates that were reported to the now inactive increment are to be reported to the next active sequentially issued PHA funding increment number.

5-12 TERMINATION/INACTIVATING AFTER RESERVATION: EXISTING CERTIFICATES.
Refer to appendix 6, Termination/Inactivating After Reservation.

5-13 REINSTATEMENT OF TERMINATED PROJECTS: EXISTING CERTIFICATES.
Refer to appendix 7, Reinstatement of Terminated Proposals/Applications.

5-14 DATA CORRECTIONS TO SECTION 8 MIS. Refer to appendix 9, Data Corrections to the Section 8 MIS.

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