

Application Checklist

for Approval as a
Housing Counseling Agency

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

Applicant's Name and Address :

Instructions: This form is used to determine the acceptability of the Preliminary Application and the Final Application required by Handbook 7610.1. Check the appropriate Yes or No entry for each item. Most "No"-checked items require correction by the applicant before HUD can approve the preliminary or final application. HUD may make exceptions to "No" items if the data is provided although it is not provided in the format requested by the application form. HUD will not make exceptions for items marked "No" if the required information or submission is missing from the application. Prepare review comments on separate sheets and attach them to this form. Document any corrective action that removes an application deficiency.

An applicant may use the checklist to check its submissions prior to sending them to HUD but **should not** send a copy of the checklist to HUD. HUD will discard any of these forms received from an applicant.

Preliminary Application - HUD Review	Date Received by HUD:				
	Yes	No		Yes	No
1. Is the applicant located in your Office's jurisdiction? If "No," do not review the application. Return it to the applicant and inform them of the correct HUD Office.	<input type="checkbox"/>	<input type="checkbox"/>	10. Did the applicant submit a list of ZIP code areas and a map outlining those areas and indicating its location(s)?	<input type="checkbox"/>	<input type="checkbox"/>
2. Did you receive an original and one copy?	<input type="checkbox"/>	<input type="checkbox"/>	11. If the applicant plans to serve people who do not speak English fluently, did the applicant submit evidence that it has staff or interpreters who fluently speak the clients' native languages? If the applicant does not plan to serve non English-speaking clients, check NA.	<input type="checkbox"/>	<input type="checkbox"/>
3. Does at least one copy contain an original signature?	<input type="checkbox"/>	<input type="checkbox"/>	12. Did the applicant submit Section B, Assurances and Signatures with an original signature?	NA <input type="checkbox"/>	<input type="checkbox"/>
4. Did the applicant also submit the Final Application along with the Preliminary Application? If "Yes," do not review it. Return it to the applicant.	<input type="checkbox"/>	<input type="checkbox"/>	Pay close attention to any information or indication that the applicant cannot comply with these assurances, especially those relating to civil rights and discrimination as well as conflict of interest. If any doubt arises in your mind, obtain additional information from the applicant.		
5. Did the applicant send items not required by HUD Handbook 7610.1? If "Yes," you may discard those items.	<input type="checkbox"/>	<input type="checkbox"/>	13. Are all required information items completed on Section B?	<input type="checkbox"/>	<input type="checkbox"/>
6. Did the applicant submit a document that supports its claim to be a nonprofit entity? Does the document include the name, address, and telephone number of the legal authority that granted nonprofit status?	<input type="checkbox"/>	<input type="checkbox"/>	14. The mere presence of each required document or entry is not sufficient evidence to approve a Preliminary Application. Items must be complete, accurate, readable, and of a quality that leaves no doubt in the mind of the reviewer. Check your review decision: Approve <input type="checkbox"/> Disapprove <input type="checkbox"/> Whether you Approve or Disapprove, see Chapter 5 of Handbook 7610.1 for further instructions.		
7. Did the applicant attach a copy of its charter, by-laws or similar document that authorizes the organization to provide housing counseling?	<input type="checkbox"/>	<input type="checkbox"/>	Signature of HUD Reviewer _____ Date of the Review _____		
8. If the applicant is a unit of local, county, or State government, did the applicant submit a copy of a document that authorizes it to provide housing counseling? If applicant is not governmental, check NA.	<input type="checkbox"/>	<input type="checkbox"/>	Supervisor's Concurrence Signature _____ Date of Concurrence _____		
9. Did the applicant submit a description of its experience and record of achievement in providing housing counseling or similar services to the target community? Is the statement acceptable?	<input type="checkbox"/>	<input type="checkbox"/>			

Final Application - HUD Review	Date Received by HUD:				
	Yes	No		Yes	No
1. Did your office grant approval to the applicant's Preliminary Application and did you request the applicant to submit this Final Application? If "No," do not review this Final Application. Return it to the applicant with a written explanation.	<input type="checkbox"/>	<input type="checkbox"/>	If "No," proceed with the review of this Final Application, but do not approve it until the required information is submitted by the applicant.		
2. Did you conduct a pre-application conference with the applicant after approving their preliminary application? If "No," and the lack of the conference was HUD's fault , immediately arrange for the conference. Do not review this final application until an acceptable conference is held. If "No," and the lack of the conference was the applicant's fault , do not review this final application until the applicant participates in a conference. Notify the applicant in writing if you have not already done so.	<input type="checkbox"/>	<input type="checkbox"/>	4. Does the summary cover sheet indicate in general terms how the counseling plan meshes the target population's housing needs and problems with the resources available to the applicant? As you review the detailed information provided by the applicant, ensure yourself that the unity of these factors as expressed on the summary sheet appear reasonable in the counseling plan.	<input type="checkbox"/>	<input type="checkbox"/>
3. Does the final application contain information regarding all four components of target area, housing needs and problems, resources, and housing counseling plan?	<input type="checkbox"/>	<input type="checkbox"/>	5. Does the application meet the following criteria:		
			a. typewritten or letter-quality printing?	<input type="checkbox"/>	<input type="checkbox"/>
			b. letter-size paper 8 1/2 X 11" (except for copies of documents on legal-size paper)?	<input type="checkbox"/>	<input type="checkbox"/>
			c. Outline format rather than long narrative paragraphs?	<input type="checkbox"/>	<input type="checkbox"/>
			d. Detailed but concise?	<input type="checkbox"/>	<input type="checkbox"/>
			e. One copy ?	<input type="checkbox"/>	<input type="checkbox"/>

	Yes	No		Yes	No
6. Did the applicant submit a concise but complete narrative description of the target area?	<input type="checkbox"/>	<input type="checkbox"/>	22. Did the applicant include only "on-hand" funding--that is, funds actually on hand with the applicant or available in the near future based on written commitments from the sources?	<input type="checkbox"/>	<input type="checkbox"/>
Does it include such items as size of the population, social-economic factors, racial and ethnic make-up of the population, condition of housing?	<input type="checkbox"/>	<input type="checkbox"/>	Note to the Reviewer. If the applicant has mingled "on-hand" funding with those they hope or will seek, ignore that aspect of the submission. Request the applicant to resubmit this information. Under no circumstance is a reviewer to consider hoped for or sought but not received funding.		
Do you feel you have a good idea of the nature of the target area after reading the applicant's description of it?	<input type="checkbox"/>	<input type="checkbox"/>	23. Did the applicant submit a copy of its current housing counseling budget and a list of the sources that underwrite that budget?	<input type="checkbox"/>	<input type="checkbox"/>
7. Did the applicant provide a statement of its reasons for selecting the target area, and is it a convincing statement?	<input type="checkbox"/>	<input type="checkbox"/>	24. If the applicant plans to charge counseling fees, did it submit a statement that it is in compliance with para. 6-2, Counseling Fees, of Handbook 7610.1?	<input type="checkbox"/>	<input type="checkbox"/>
8. Does the applicant's proposed target area overlap with other counseling agency areas?	<input type="checkbox"/>	<input type="checkbox"/>	25. Did the applicant submit a list of the names, addresses, and major purposes of the community resources the applicant uses in its counseling program?	<input type="checkbox"/>	<input type="checkbox"/>
If "Yes," did the applicant submit an acceptable justification for overlapping other agency areas?	<input type="checkbox"/>	<input type="checkbox"/>	Does this include the specific types of services and assistance and the extent of those resources?	<input type="checkbox"/>	<input type="checkbox"/>
9. If you requested a revised map from the applicant, did they submit an acceptable one?	<input type="checkbox"/>	<input type="checkbox"/>	26. Note to the Reviewer. The review of the applicant's housing counseling plan is usually the critical aspect of the review. The plan should bring together into a workable and cohesive counseling program the information regarding (a) the target area, (b) the housing needs and housing problems of the target population, and (c) the resources actually available to the applicant for meeting the needs of its clients. The reviewer must be able to answer the following questions in the affirmative without any reservation about the applicant's ability to deliver the counseling services it proposes.		
If you did not request a revised map, check NA.	NA <input type="checkbox"/>		a. Does the applicant's housing counseling plan represent a workable balance between the scope of what it proposes and the resources it possesses to implement it's proposal?	<input type="checkbox"/>	<input type="checkbox"/>
10. Did the applicant submit an acceptable statement of the housing needs and problems of the target population?	<input type="checkbox"/>	<input type="checkbox"/>	b. If "Yes," proceed to item c. below. If "No," you must disapprove the application. The applicant may appeal your decision to disapprove or may submit a revised application.		
An acceptable submission must comply with Handbook 7610.1 definition of "housing need" and "housing problem."			c. Does the counseling plan reflect a working knowledge of HUD's concept of housing counseling as set forth in Handbook 7610.1?	<input type="checkbox"/>	<input type="checkbox"/>
Is the statement specific and does it cite the sources upon which the statement is based?	<input type="checkbox"/>	<input type="checkbox"/>	d. If "Yes," proceed to item e. below. If "No," you must disapprove the application. The applicant may appeal your decision to disapprove or may submit a revised application.		
11. Does the applicant separate resources into "Applicant" resources and "community" resources?	<input type="checkbox"/>	<input type="checkbox"/>	e. Does the counseling plan reflect a working knowledge of HUD housing programs applicable to the target area and population?	<input type="checkbox"/>	<input type="checkbox"/>
12. Is there also a breakout by staff, facilities, and funding?	<input type="checkbox"/>	<input type="checkbox"/>	f. If "Yes" to question e., as well as a. and c., you may approve the application. If "No" to question e., you must disapprove the application. The applicant may appeal your decision to disapprove or may submit a revised application.		
13. Is a dossier included for the counseling supervisor, each counselor, and each support clerical staff?	<input type="checkbox"/>	<input type="checkbox"/>	g. Does the counseling plan reflect a working knowledge of Federal, State, and local fair housing laws and authorities?	<input type="checkbox"/>	<input type="checkbox"/>
14. Is each staff person's position title, duties, and paid-or-volunteer status indicated?	<input type="checkbox"/>	<input type="checkbox"/>	27. Check your review decision: Approve <input type="checkbox"/> Disapprove <input type="checkbox"/>		
15. Is each counselor's knowledge of HUD and community housing programs indicated?	<input type="checkbox"/>	<input type="checkbox"/>	If you Disapprove the application, attach a separate sheet or sheets setting forth your reasons for this decision.		
16. Is a description of the counseling facility included?	<input type="checkbox"/>	<input type="checkbox"/>			
17. Does the facility description indicate privacy provisions?	<input type="checkbox"/>	<input type="checkbox"/>			
18. Does the facility provide for handicapped person access?	<input type="checkbox"/>	<input type="checkbox"/>			
19. Is it indicated whether public transportation is within not more than a 15 minute walk from the facility?	<input type="checkbox"/>	<input type="checkbox"/>			
Note to the Reviewer. If public transportation is not readily available and its absence would pose a hardship on potential clients within the target area, this might constitute a reason for disapproving the application; however, take into consideration the applicant's proposed method, if any, for overcoming this problem. For example, in an area where transportation by private automobile is a generally accepted or essential mode of transportation, but a client lacks an automobile, the agency might propose to overcome this hurdle by providing counseling over the telephone--provided it is done at no cost to the client.					
20. Did the applicant indicate whether it owns or rents its facility?	<input type="checkbox"/>	<input type="checkbox"/>			
Note to the Reviewer. If the applicant rents its facility, that might not be important unless other factors in the application indicate instability in the applicant's location in the target area. Discount a rental answer unless other factors contribute to an unstable position for the applicant.					
21. Did the applicant list the sources and amounts of funding from each source?	<input type="checkbox"/>	<input type="checkbox"/>			
Signature of HUD Reviewer	Date of the Review		Supervisor's Concurrence Signature	Date of Concurrence	