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Introduction: Public Housing Management Certification Program

COURSE LEARNING OUTCOMES

- Explain and apply HUD regulations and guidance in order to gain the skills needed to effectively manage public housing developments.
- Upon completion of Public Housing Management, you should be able to:
 - Describe the key components of project-based management (PBM)
 - Define the roles, relationships, and functions of the board of commissioners, management, and staff in a public housing authority (PHA)
 - Recognize key civil rights and fair housing obligations of PHAs
 - Analyze proper policies and practices related to reasonable accommodation
 - Identify basic program eligibility factors
 - Describe policies and procedures for creating and maintaining waiting lists
 - Recognize the importance, functions, and requirements of screening for suitability
 - Calculate correct annual income under various scenarios
 - Calculate adjusted income, total tenant payment, tenant rent, and utility reimbursement payments
 - Recognize the minimum HUD requirements for the public housing lease
 - Identify the HUD requirements and PHA policy options pertaining to interim reexaminations
 - Identify PHA grounds for termination of tenancy, including provisions for drug-related and other criminal activity and noncompliance with community service requirements

Notes

- Design a practical and effective community service program
- Recognize how to develop an overall budgeting process and monitor actual-to-budget performance
- Identify the three categories of maintenance required in public housing and evaluate and prioritize maintenance needs based on these categories
- Apply a system of inventory control, including recording and monitoring expendable and nonexpendable inventory
- Recognize key elements of the capital fund
- List key components of a risk management assessment
- Identify the Public Housing Assessment System (PHAS) indicators and documentation requirements

PURPOSE OF PHM CERTIFICATION

- The overall goal of the Public Housing Management Certification program is to improve the quality of PHA management.
- The seven objectives set by HUD for the certification of public housing personnel are:
 1. Establish minimum qualification standards to be met as conditions for employment in housing manager and assistant housing manager positions.
 2. Provide PHAs with a reliable and convenient method for determining whether individuals meet minimum qualification standards for employment.
 3. Provide individuals interested in employment as housing managers with well-defined standards for professional development.
 4. Encourage qualified or potentially qualified individuals to work in the public housing field.

Notes

5. Protect the rights of individual applicants and employees.
 6. Enhance the professional prestige of public housing management by assuring a high degree of professional competence.
 7. Assure that the tenants served receive competent management service.
- All persons who are responsible for the day-to-day management and operation of low-income public housing are considered to be housing managers.

BEYOND THE REGULATORY REQUIREMENT

Reaching for Excellence as a PHM

- The Public Housing Management Certification Program by Nan McKay & Associates, Inc. (NMA) provides more than an opportunity for participants to attain personal and professional growth empowering them to make a difference in their community and in their job.
- The PHM course and test provide a foundation including:
 - Training to improve skills and performance on the job
 - Education to inspire continued expansion of knowledge, skills, and abilities.
- Through skill development and continued professional growth after this course and test, the public housing manager can positively impact the housing agency, the community, and the housing industry.
- A public housing manager manages a facility that adds to neighborhood aesthetics and generates a community feeling. In addition, the manager serves as a community leader of people who help residents achieve a higher standard of living which in turn enhances the neighborhood.

Notes

- The PHM certification program gives participants a perspective on:
 - Their clients: the residents.
 - Their customer: the management of their agency.
- To better serve the resident clients, managers will gain insight into the “big picture” of their agency, housing, and the community in this certification program. They will enhance knowledge and skills in order to fit together all the PHA departments and services, thereby, providing more effective client service.
- To better serve the management customers, participants will gain a perspective on the requirements for successful housing program management. Managers will enhance their knowledge and skills in order to achieve personal and professional success. This success in turn improves the overall quality of management in a PHA.
- Managers will understand how to implement and manage required Reform Act provisions.
- Managers will analyze best practices and innovative strategies to make their public housing programs a financially viable asset in their communities.

Notes

- Ultimately, this program enhances the personal power of the public housing manager. Participants enhance their confidence to function independently in their positions. This program is intended to promote these values leading to personal power:
 - **Empowerment** to perform confidently and competently.
 - **Self-reliance** to bring the “big picture” into daily performance.
 - **Service** to maintain a focus on meeting the needs of clients and customers.
 - **Collaboration** to reinforce the benefits of bringing diverse people, ideas, and services together.
 - **Integrity** to reinforce the human aspects of the PHA and fairness.
 - **Excellence**, the essential ingredient to go beyond what is merely expected in order to make a difference.

ONLINE RESOURCES

- Resources and references relevant to this course are available for download at PHMgmtresources.nanmckay.com. The materials may be accessed and downloaded as often as needed. Additional HUD references can be also found on the NMA References site at: <http://nmareferences.com>.

Notes

UNIT 1 Roles and Responsibilities of the Public Housing Manager

LEARNING OUTCOMES

- Upon completion of this chapter, you should be able to:
 - Identify and explain key functions of the manager
 - Describe the key components of project-based management (PBM)
 - Distinguish between the internal and external relationships in which the manager works

Notes

POST-TEST FOR UNIT 1

1. Public housing management is modeled on HUD's multifamily industry. The two components of this model are:
 - a. Project-based management and HUD
 - b. Project-based management and asset management
 - c. Project-based management and PHAS
 - d. HUD and the PHA
 - e. The internal and external environment
2. The manager's ability to work closely with community-based service providers is important because:
 - a. Community-based service providers are competitors of the public housing program
 - b. The PHA has a contractual relationship with community agencies through the cooperation agreement
 - c. With welfare time limits, community services are critical in helping families build knowledge, skills, and abilities
 - d. Community-based agencies report to HUD
 - e. None of the above
3. It is important for a PHA to work with the judicial system because:
 - a. Laws are passed by the judiciary branch
 - b. Hearings must be presided over by a judge or magistrate
 - c. The judicial system develops public housing regulations
 - d. It is important that judges and magistrates understand the mandates of the public housing program
4. The executive director is an internal customer of the public housing manager.
 - a. True
 - b. False
5. As an administrator, the public housing manager is responsible for building all the following internal relationships *except*:
 - a. The executive director
 - b. The maintenance director
 - c. The Department of Housing and Urban Development
 - d. Board of commissioners
 - e. Public housing staff

Notes

UNIT 2 Organization and Administration of PHAs and Programs

LEARNING OUTCOMES

- Upon completion of this chapter, you should be able to:
 - Identify in general terms the laws that created and shaped public housing
 - Recognize how the public housing authority is related to Congress and the U.S. Department of Housing and Urban Development, including their respective functions
 - Define the roles, relationships, and functions of the board of commissioners, management, and staff in a PHA

Notes

POST-TEST FOR UNIT 2

1. The public housing program is a tenant-based subsidy program
 - a. True
 - b. False
2. The PHA plan replaces the admissions and continued occupancy policy.
 - a. True
 - b. False
3. All the following are written by HUD *except*:
 - a. Regulations
 - b. Handbooks
 - c. PHA policies
 - d. Notices
4. The contract between the city and the PHA is called the PILOT agreement.
 - a. True
 - b. False
5. The contract between the PHA and HUD is called the annual contributions contract.
 - a. True
 - b. False
6. HUD's response to comments from the public can be found:
 - a. In the appropriate HUD handbook
 - b. In the rule summary
 - c. In the preamble of a final rule
 - d. In the CFR
7. What legal document from HUD requires that the PHA follow HUD rules?
 - a. Annual contributions contract (ACC)
 - b. Admissions and continued occupancy policy
 - c. Cooperation agreement
 - d. PILOT agreement
 - e. None of the above
8. Congress required state enabling legislation to create local public housing through the Housing Act of 1937.
 - a. True
 - b. False
9. Who is responsible for the supervision of staff?
 - a. HUD
 - b. City council
 - c. Executive director
 - d. Board of commissioners
10. The Admissions and continued occupancy policy must be approved by:
 - a. Negotiated rule making committee
 - b. The mayor
 - c. HUD
 - d. The resident advisory board
 - e. The board of commissioners

11. The laws relevant to public housing are made by HUD.
 - a. True
 - b. False
12. The number of commissioners and their method of appointment are regulated by HUD.
 - a. True
 - b. False
13. Regulations published as proposed rules:
 - a. Must be implemented immediately
 - b. Are for comment only
 - c. Must be implemented within 60 days
 - d. Should be implemented by the end of the comment period
 - e. None of the above
14. The executive director of a PHA reports to:

15. The primary role of HUD headquarters is to:
 - a. Write regulations to interpret and implement housing laws
 - b. Approve legislation
 - c. Write housing legislation
 - d. Allocate funds to OMB
 - e. Enforce the Public Housing Assessment System
16. HUD's budget is established by:

17. HUD requires PHAs to submit certifications, PIC documents, and the PHA plan.
 - a. True
 - b. False
18. Mandatory HUD references include all the following *except*:
 - a. HUD regulations
 - b. Current HUD notice
 - c. HUD guidebooks
 - d. HUD required form
19. PHAs are required to follow HUD guidance because it is "safe harbor."
 - a. True
 - b. False
20. Court decisions are important for all the following *except*:
 - a. Court decisions interpret the application of laws
 - b. Court decisions set new laws at the local level
 - c. Court decisions set legal precedent on landlord-tenant law
 - d. Understanding court decisions can help the PHA avoid legal challenges

21. The ACOP:
 - a. Must be included in its entirety in the PHA plan
 - b. Must be revised at least annually
 - c. Is replaced by the PHA plan
 - d. Is a supporting document to the PHA plan
 - e. Supersedes HUD regulations
22. PHAs (public housing authorities) have a contractual relationship with:
 - a. Congress
 - b. HUD
 - c. The state
 - d. The city
 - e. Both b and d
23. The contract between HUD and the PHA is the:
 - a. Cooperation agreement
 - b. MOU
 - c. Annual contributions contract (ACC)
 - d. Voluntary compliance agreement
 - e. Consent decree
24. One of the criteria for successful conversion to project-based and asset management is that the PHA must identify its nonperforming properties.
 - a. True
 - b. False
25. Congress:
 - a. Passes housing laws
 - b. Has a contract with PHAs
 - c. Establishes HUD's budget
 - d. Establishes each PHA's budget
 - e. Both a and c
26. The public housing program:
 - a. Is a project-based program
 - b. Is a tenant-based subsidy program
 - c. Must follow federal laws but not state laws
 - d. None of the above
27. The contract between the PHA and the public housing tenants is the:
 - a. Annual contributions contract (ACC)
 - b. Cooperation agreement
 - c. Lease
 - d. PILOT
 - e. ACOP

Notes

UNIT 3 Managing Non-discrimination Compliance

LEARNING OUTCOMES

- Upon completion of this chapter, you should be able to:
 - Recognize key civil rights and fair housing obligations of PHAs
 - Apply the principles of fair housing obligations to avoid discriminatory behavior
 - Distinguish between the HUD definition of disabled used for purposes of eligibility and the definition of disabled used for purposes of reasonable accommodation
 - Analyze proper policies and practices related to reasonable accommodation

Notes

Learning Activity 3-1: Reasonable Accommodation

- How to approach reasonable accommodations
 - Manner in which PHA will respond to request
 - Decision-making process
 - Time period for implementation
 - Procedure for handling confidential information

***Evaluate the following requests for “reasonable accommodation.”
What steps do you take?***

1. A resident requests a reserved parking space based on the resident’s disability. The PHA staff fears that if they grant one request, they will be faced with numerous requests of a similar nature in the future. In other words, the PHA believes that a “damaging precedent” will be set by agreeing to the accommodation request.

2. In the case above, the resident making the fourth request for reserved parking, requests that her name be placed on a waiting list for reserved parking.

3. A public housing development has open yard space. Each household has an individual clothesline behind the unit. A resident who uses a wheelchair full-time cannot reach his clothesline and requests that it be lowered. The PHA is concerned that children running by could be injured by the clothesline.

4. A very elderly applicant wants to move into public housing. The PHA is concerned that the applicant is too frail to live independently.

5. Who can be held liable if the PHA is found to have engaged in a prohibited practice?

6. How does a PHA respond to a fair housing complaint?

POST-TEST FOR UNIT 3

1. For purposes of reasonable accommodation, the definition of “disability”:
 - a. Is the same definition used by HUD for eligibility/allowances of a disabled family
 - b. Is defined by the PHA in the ACOP
 - c. Is more broadly defined than the HUD definition
 - d. Is not defined
2. To provide reasonable accommodation, the PHA needs to know:
 - a. The nature and severity of a person’s disability
 - b. The details about a disability
 - c. Enough to verify the necessity of a request for a reasonable accommodation
 - d. What a qualified physician has to say about the nature of the disability
3. A reasonable accommodation:
 - a. Allows a person with a disability to meet essential requirements of the lease
 - b. Requires the PHA to reduce or waive essential program requirements
 - c. Must be defined exactly in the ACOP
4. Accommodations are not considered reasonable if:
 - a. They are inconvenient for the housing authority
 - b. They impose undue administrative and financial burdens on the public housing program
 - c. They require alteration of the unit in any way
 - d. If the applicant or tenant is not mobility impaired
5. The housing authority should document requests for reasonable accommodation:
 - a. Only if accommodation is approved
 - b. In all cases, including the considerations and response of the housing authority, even if denied
 - c. Only if required by FHEO
 - d. Only in cases of physical disability

6. A person with a disability:
 - a. Must be afforded the exact same opportunity to that afforded to others
 - b. May not sue for discrimination under ADA if he or she is no longer disabled
 - c. Is given opportunity equal to others only if he or she meets the HUD definition of disability
 - d. Must be afforded an opportunity equal to that afforded to others
7. Before the applicant or tenant requests an accommodation, the PHA should offer a specific accommodation when the disability is noticed.
 - a. True
 - b. False
8. Receipt of SSI is proof that a person is disabled and requires a particular accommodation.
 - a. True
 - b. False
9. In deciding whether to grant a request for a reasonable accommodation, the PHA can require a third-party verification from a competent professional that the accommodation will allow equal access to the program.
 - a. True
 - b. False
10. PHAs must determine the severity of a disability before granting a request for an accommodation.
 - a. True
 - b. False
11. It is acceptable for a PHA to keep confidential medical records in a tenant's file as long as the tenant volunteers the information.
 - a. True
 - b. False
12. A public housing resident, Sandy Clark, requests that grab bars be installed in her shower stall. Ms. Clark's disability is obvious or otherwise known to the PHA, and the need for the accommodation is readily apparent or known. The PHA:
 - a. May require verification of the nexus from a competent third-party who is knowledgeable about the situation
 - b. May not request any additional information
 - c. Must require third-party verification, in order to ensure consistency and compliance
 - d. May establish policy for any of the above options

13. Under a PHA's Limited English Proficiency (LEP) requirements:
 - a. PHAs are not required to have a Language Assistance Plan (LAP)
 - b. The PHA must hire bilingual staff for any language group of 1,000 persons or 5 percent of the eligible population in the jurisdiction
 - c. The PHA must provide written translation for key documents in any language spoken by an LEP individual
 - d. The PHA must offer interpretation, free of charge, for any language requested
14. An elderly family with a minor child may not reside in a mixed population or designated elderly development even if they have been awarded custody of the child.
 - a. True
 - b. False
15. An elderly person with a minor child may be offered a unit in:
 - a. A general occupancy development
 - b. A mixed population development
 - c. A designated elderly development
 - d. a, b, and c
 - e. Only where there are two-bedroom units available

SAMPLE FORMS

Notice of Right to Reasonable Accommodation

If you have a disability and as a result of your disability you need:

- A change in the rules or policies to give you an equal opportunity to take part in or use the facilities of the public housing program,
- A change in the way we communicate with you or give you information,
- A modification to your public housing unit, or
- A transfer to another public housing unit,

you may ask for this kind of change, which is called a reasonable accommodation.

If you can show that you have a disability and if your request is reasonable (does not pose “an undue financial or administrative burden”), we will try to grant your request.

We will give you an answer within 10 calendar/working days unless there is a problem getting the information we need or unless you agree to a longer time. We will let you know if we need more information or verification from you or if we would like to talk to you about other ways to meet your needs.

If we turn down your request, we will explain the reasons, and you can give us more information if you think that will help.

If you need help filling out a ***Request for a Reasonable Accommodation*** form or if you want to give us your request in some other way, we can help you.

You can get a ***Request for a Reasonable Accommodation*** form at the front desk of the housing agency.

Note: All information you provide will be kept confidential and will be used only to help you have an equal opportunity to participate in the public housing program.

PUBLIC HOUSING OR OTHER PHA-OWNED PROPERTY

Request for Reasonable Accommodation or Physical Modification

(THIS FORM IS AVAILABLE IN LARGER FONT OR ALTERNATIVE FORMAT UPON REQUEST)

PLEASE PRINT CLEARLY

Head of Household: _____ TDD/Phone: _____

Address: _____ State/Zip: _____

Currently, I am:

- ☐ An applicant on the waiting list for
 ☐ Public Housing ☐ Other PHA-owned property
☐ Currently living in Public Housing or other PHA-owned property

Household member who needs accommodation: _____

The household member above has a disability because they have a physical, mental or emotional impairment that limits one or more major life activities or has a record of having such an impairment.

Please fill out all the following information regarding the individual who needs the accommodation(s). Please *DO NOT* submit medical records or tell us about the nature or severity of your disability.

The purpose of an accommodation is to remove or relieve a barrier posed by the disability-related limitation. As a result of this disability, I am requesting the following reasonable accommodation(s) from the PHA for the disabled household member listed above.

Please answer the following questions.

1. The person with a disability is requesting a **service or assistance animal**. Please answer the questions below.

1.a. Is the animal (a dog) required because of a disability?

☐ Yes. If "Yes", answer question 1.b. below.

☐ No. If "No, this is a request for a pet.

1.b. Has the dog been trained to do work or tasks that assist or help you with the limitation(s) posed by your disability? Some examples are guiding individuals who are blind or have low vision, alerting individuals who are deaf or hard of hearing to sounds, providing protection or rescue assistance, pulling a wheelchair, fetching items, or alerting persons to impending seizures.

☐ Yes.

☐ No. If "No, go to question #2.

1.c. What work or tasks has the dog been trained to do? Note that the PHA is not asking for proof or certification of training.

2. ☐ As a result of this disability, the household member needs an assistance animal. *Please note that verification may be required.*

3. ☐ The household member **needs a live-in aide**. *A daily in-home worker or rotating shifts are not equally effective as a reasonable accommodation. Please note that verification may be required.*

4. As a result of this disability, the household member needs the following reasonable accommodation(s) from the PHA. Please check one or more boxes below.

☐ Special unit features ☐ Physical modifications to unit ☐ Physical modifications to common areas

☐ Transfer to another unit that meets my disability-related needs ☐ Other _____

☐ Extra bedroom for medical equipment. *Please note that, if necessary, a PHA inspector may view the equipment to confirm that all sleeping and living spaces are not adequate as an accommodation.*

If necessary, please explain what you need. **Do not provide information about the nature of your disability.**

5. ☐ The household member needs a change in a rule, policy or procedure. (Note that fundamental requirements must still be met). Please specify the necessary change.

2

I understand that the information obtained by the PHA will be kept completely confidential and used solely to make a determination on my reasonable accommodation request.

FRAUD AND FALSE STATEMENTS

Title 18, Section 1001 of the U.S. Code states that a person who knowingly and willingly makes false and fraudulent statements to any department of the United States Government, including the Department of Housing and Urban Development (HUD), a public housing authority (PHA), and any owner (or employee of HUD, the PHA, or the owner) may be subject to penalties that include fines and/or imprisonment.

I certify by signing below that all the information provided above is true, accurate and complete to the best of my knowledge.

Signature

Date

For PHA Use ONLY: PHA Certification

- ☐ I certify that this individual's disability is obvious or otherwise known to the PHA and no further verification is required.
- ☐ I certify that this individual's need for the accommodation is readily apparent or known to the PHA and no further verification is required.

Signature of PHA Official

Date

Approval of PHA 504 Coordinator

Date

AUTHORIZATION

I/we authorize the PHA to verify that the above-referenced household member has a disability and that the accommodation(s) requested is necessary in order to remove or alleviate barriers to housing. To verify this information, the housing authority may contact the below-named professional who is knowledgeable about my situation and competent to render a professional opinion. I understand the information the housing authority obtains will be kept completely confidential and used solely to evaluate the request.

This authorization is requested because third-party verification may be needed.

Name of Professional: _____

Field of Practice: _____ Agency/Clinic/Facility: _____

Email: _____ Phone: (____) _____

Address: _____

X _____

Signature of household member needing the accommodation (only if 18 years
of age or older)

Date

**** If the household member needing the accommodation(s) is under 18 years of age, are you the parent or guardian of household member needing the accommodation? ☐ Yes ☐ No**

X _____

Signature of head of household or authorized guardian **

Date

Please return this form as promptly as possible so that the PHA can make a determination on this request.

Property Manager/PHA Representative

Date

Phone

Email

Address
Phone:
FAX:
TTY:
Website:

HOUSING AUTHORITY

VERIFICATION OF NEED FOR REASONABLE ACCOMMODATION

PUBLIC HOUSING PROGRAM

Please do not send or attach medical records

Individual Requesting Accommodation _____

Name of PHA Head of Household: _____

Dear Knowledgeable Professional:

Please read this form completely – the information provided here is very important. The individual listed above has identified themselves as being disabled under the Fair Housing Act and has asked for an accommodation from the PHA to meet housing-related needs necessary in order to remove, alleviate, or mitigate barriers to their housing or housing programs due to their disability-related limitations.

You have been authorized to release information to us regarding the individual's need for an accommodation. That authorization is attached.

The PHA grants reasonable accommodation requests based, if necessary, on verification of need from a professional who is knowledgeable about the individual's situation and competent to render an opinion. Such verification may be from a physician, other medical or non-medical service agency professional, or other knowledgeable professional. Verification could include but not be limited to:

- Verification that the person is a qualifying person with disabilities.
- Verification that there is a relationship ("nexus") between the nature of the person's disabilities and the accommodation requested.
- Verification that the accommodation is necessary for the person to have equal opportunity to participate in or access the PHA's programs and services.

Please complete and return this form to the PHA. ***Confidential medical records will not be accepted.***

If you are not able to verify the information requested in this form, the PHA will notify the family and they may request verification from another professional or licensed practitioner.

If you have any questions, or would like further information, please feel free to contact me at:

PHA Representative

Date

Title

Email

Phone

Section I – Verification of Disability

☐ It is NOT necessary for you to fill out this Section. Please proceed to Section II.

☐ Please complete this Section before proceeding to Section II.

An “individual with a disability” is any person who has a physical, mental or emotional impairment that limits one or more life activities, such as caring for one’s self, performing manual tasks, walking, seeing, hearing, speaking, breathing, learning, and working.

The term “physical or mental impairment” includes, but is not limited to, such diseases and conditions as orthopedic, visual, speech and hearing impairments, cerebral palsy, autism, epilepsy, muscular dystrophy, multiple sclerosis, cancer, heart disease, diabetes, mental retardation, emotional illness, drug addiction and alcoholism. The definition of an “individual with a disability” does *not* include a person whose current use of alcohol or drugs is the barrier that prevents the person from participating in PHA’s housing program and services. (A more detailed definition is provided in the Code of Federal Regulations at 24 CFR 8.3, which PHA staff would be glad to provide to you.)

Does the person named above qualify as an “individual with a disability,” according to this definition?

☐ Yes ☐ No ☐ Unable to verify Initials _____

Section II – Verification of Need for Requested Accommodation

Please do not include medical records

I am knowledgeable about this individual's situation.

☐ Yes ☐ No

Special Unit Features Due to Disability

IMPORTANT: Please fill out this section if the disabled household member needs a unit, facilities and/or common area with specific features due to his or her disability.

The following information is requested solely for the purposes of identifying the unit (size, type, and design) that most appropriately meets the needs of the disabled household member. The PHA will make every effort to make the appropriate modifications or identify an appropriate unit based on your professional opinion and assessment.

Please check only those accommodations that are necessary due to limitations posed by the disability.

In my professional assessment of the disabled individual's needs, I certify that:

- ☐ The disabled household member needs a **wheelchair-accessible unit**.
- ☐ The disabled household member needs features for the vision-impaired and/or hearing-impaired, as specified: _____
- ☐ The disabled household member **DOES NOT** need a wheelchair-accessible unit but needs a unit or common area with certain physical features. The features required are checked off below with an explanation given on the following page.
 - ☐ Maximum number of stairs to reach the unit: _____
 - ☐ Maximum distance to walk between the unit and nearest elevator: _____
 - ☐ A first floor unit or a unit located in an elevator-equipped building is required.
 - ☐ Single level unit ☐ Tub grab bars ☐ Toilet grab bars ☐ Handheld shower
 - ☐ Other _____
 - ☐ Extra bedroom for medical equipment. *Note: if necessary, a PHA inspector may view the equipment to confirm that all sleeping and living spaces are not adequate as an accommodation.*
- ☐ The disabled household member requires a unit in a specific or alternative location due to a disability. *Please explain what the alternative location is.*

Other

- ☐ The disabled individual **requires a live-in aide**. A daily in-home worker or rotating shifts are not adequate to provide an opportunity equal to that afforded others.
- ☐ The household member **needs an assistance animal**. An assistance animal alleviates or removes a disability-related limitation. An example of an assistance animal is providing emotional support to persons with disabilities who have a disability-related need for such support.
- ☐ The household member **requires a change in a policy or procedure as a direct result of their disability** in order to be afforded an equal housing opportunity. Please explain what change in policy or procedure is being requested.

CERTIFICATION

Based on your professional opinion and assessment of needs, please **check only one** of the following:

- ☐ **I certify** that the enclosed request for an accommodation is necessary for the disabled household member, as a result of their disability-related limitations, in order to have an equal housing opportunity.

OR

- ☐ **I cannot certify** that the enclosed request is necessary for the disabled household member, as a result of their disability-related limitations, in order to have an equal housing opportunity.

Please certify below:

- ☐ This certification is true and accurate to the best of my professional judgment.

Professional's Signature

Date

Name (Please print clearly)

Title of professional

Agency or Clinic, if applicable

Complete Address

(_____) _____
Phone

(_____) _____
Fax

Email

Please return form to: [PHA] as soon as possible.

ATTN: _____

Title: _____

Address: _____

(_____) _____
Phone

(_____) _____
Fax

Email

Live-In Aide Statement of Understanding

Unit Number: _____

STATEMENT OF LIVE-IN ATTENDANT

I understand that I am living at _____
and am enjoying the benefits of the public housing program solely because of my
employment with _____ .
(Resident)

I agree to follow all terms in the public housing lease, as well as the rules and regulations
of the public housing program. I acknowledge that it is also my responsibility to maintain
the unit in a safe and sanitary manner.

I understand that I will be allowed to remain in the unit only as long as I am employed by
the above-named person. If, under any circumstances, I am found to be in violation of
the lease agreement or house rules, my employer will terminate my services and require
that I vacate the premises immediately.

I understand that if my employer moves out of public housing, is evicted, abandons the
unit, or dies, I am not entitled to any benefits or continued housing.

Live-in Attendant Date

Resident Date

Address Phone

Housing Authority Staff Date

NOTE: Social Security card (if you have one) and picture I.D. must be provided.

UNIT 4 Eligibility

LEARNING OUTCOMES

- Upon completion of this chapter, you should be able to:
 - Describe the application process in general terms
 - Identify basic program eligibility factors
 - Recall how and why local preferences are established
 - Recognize the principles of a public housing authority's occupancy standards
 - Describe policies and procedures for how waiting lists are created and maintained

Certification of Disability

To: _____ RE: _____

_____ SS#: _____

Basis for claiming disability: _____

The above-named person is applying for participation in a federally assisted housing program operated by the housing authority. To determine the applicant's eligibility, we must verify that he/she is disabled as defined by the U.S. Department of Housing and Urban Development (HUD). HUD regulations define *disability* as follows. Thank you for your assistance.

- A. 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 in the case of an individual who has attained the age of 55 and is blind and unable by reason of such blindness to engage in substantial gainful activity requiring skills or ability comparable to those of any gainful activity in which he/she has previously engaged with some regularity and over a substantial period of time.
- B. Severe chronic disability that:
 - 1. Is attributable to a mental or physical impairment or combination of mental and physical impairments;
 - 2. Is manifested before the person attains age 22;
 - 3. Is likely to continue indefinitely;
 - 4. Results in substantial functional limitations in three or more of the following areas of major life activity: (a) self-care, (b) receptive and expressive language, (c) learning, (d) mobility, (e) self-direction, (f) capacity for independent living, (g) economic self-sufficiency;
 - 5. Reflects the person's need for a combination and sequence of special, interdisciplinary, or generic care, treatment, or other services which are of lifelong or extended duration and are individually planned and coordinated.
- C. A person with a physical or mental impairment that:
 - 1. Is expected to be of a long-continued and indefinite duration,
 - 2. Substantially impedes his/her ability to live independently, and
 - 3. Is of such a nature that such ability could be improved by more suitable housing conditions.
- D. Federal law now states that a person is not considered disabled for eligibility purposes solely on the basis of any drug or alcohol dependence. Individuals whose alcohol or drug addiction is a factor material to their disability are excluded from the definition. Individuals are considered disabled if the disabling mental or physical limitations would persist if the drug or alcohol abuse discontinued.

Housing Authority Representative _____ Date _____

I hereby authorize the release of any information pertaining to this request and will appreciate it if you will complete and return to the Housing Authority the following certification.

Applicant's Signature: _____

Date: _____

Certification of Disability

_____ ☐ is ☐ is not disabled according to the HUD definition.

Applicable definition(s): ☐ A ☐ B ☐ C Please describe: _____

_____ Estimated length of disability period: _____

Person certifying (*print name*): _____ Occupation: _____

Signature Professional Title Date

Return to: _____

POST-TEST FOR UNIT 4

1. The PHA determines the size unit most appropriate for the family based on:
 - a. Family's request
 - b. PHA's occupancy standards
 - c. HUD's occupancy ranges
 - d. Federal preference status
2. A mixed population development must give equal preference to elderly families and disabled families.
 - a. True
 - b. False
3. The very low-income limit is used to determine income eligibility for public housing.
 - a. True
 - b. False
4. A live-in aide is a person who resides with persons who are elderly and/or have a disability, and:
 - a. Is approved by the PHA
 - b. Is determined to be essential to the care and well-being of the elderly/disabled person
 - c. Who would not otherwise be living in the unit
 - d. May be a relative of the person
 - e. All of the above
5. Which of the following is **not** a HUD requirement for initial program eligibility purposes?
 - a. All family members must be citizens or eligible noncitizens
 - b. Families must be income eligible for the program
 - c. All family members age 18 and over must sign form HUD-9886
 - d. Disclosure of Social Security numbers for all household members is required except for noncontending persons
6. If everyone else moves out of the public housing unit except one adult, the PHA must accept the one family member as the remaining member if:
 - a. The family member was on the lease
 - b. The family was paying flat rent and not subject to income reexamination for another two years
 - c. The family member signed the lease
 - d. The family occupied a unit with less than three bedrooms

7. Which statement is **not** true about the use of preferences?
 - a. A PHA may adopt the former federal preferences as local preferences
 - b. Preferences for working families do not require HUD approval
 - c. Date and time can be used as the selection method
 - d. A PHA may adopt a residency requirement
8. Under the noncitizen rule, a family that consists of a head and spouse that are not citizens or eligible immigrants and two children who are citizens would be considered:
 - a. An ineligible family because either the head or spouse must be eligible
 - b. A fully eligible family
 - c. A mixed family
 - d. None of the above
9. A mixed population development:
 - a. Is designed for families comprised of citizens or eligible noncitizens and those without citizenship or eligible noncitizen status
 - b. May set a minimum age, but not below 50, for the admission of persons with disabilities
 - c. Is a project where some residents pay income-based rent and some pay market rent
 - d. None of the above
10. In deciding whether to approve a request for a live-in aide, the PHA should set reasonable policies, which could include all the following **except**:
 - a. Signing of a live-in aide addendum
 - b. Screening for suitability
 - c. Determining whether to transfer to a larger unit with the addition of a live-in aide
 - d. Precluding live-in aides with family members
11. Mildred Castle lives in a one-bedroom unit at PHA's public housing mixed population (elderly/disabled) development, Hillside View. All the bedrooms at Hillside View are one-bedroom units. Ms. Castle informs the PHA that she is getting custody of her four-year-old granddaughter, Eva. The PHA:
 - a. Must establish policy to require that Ms. Castle transfer to a general occupancy (family) development because of the presence of a minor child
 - b. May not establish policy to require Ms. Castle to transfer to a general occupancy development because of the presence of a minor child
 - c. May establish policy to require that Ms. Castle transfer to a general occupancy development because of the presence of a minor child
 - d. May require Ms. Castle to transfer to a two-bedroom unit at another development.
 - e. a and d

12. The PHA must add to its definition of family... “regardless of gender identity, sexual orientation, or marital status.”
 - a. True
 - b. False
13. If the PHA determines that an application appears to be ineligible for the public housing program, the PHA must send the family a written notice, specifying the reasons for the determination, with an opportunity for informal hearing.
 - a. True
 - b. False
14. HUD defines *disabled family* as a family in which:
 - a. Any family member meets the HUD definition of disabled
 - b. Head of household, spouse, or cohead meet the HUD definition of disabled
 - c. Any family member meets the Fair Housing Act (FHA) definition of disabled used for reasonable accommodation
 - d. Head of household, spouse, or cohead meets the Fair Housing Act (FHA) definition of disabled used for reasonable accommodation
 - e. HUD does not define *disabled family*

Notes

UNIT 5 Tenant Selection

LEARNING OUTCOMES

- Upon completion of this chapter, you should be able to:
 - Explain the income targeting requirement
 - Discuss deconcentration of poverty and income mixing
 - Identify and apply screening criteria for drug-related and other criminal activity
 - Recognize the importance, functions, and requirements of screening for suitability

TENANT SELECTION POLICIES**Fungibility**

- “Fungibility” is the term HUD uses to describe the “credits,” or limited extent to which provisions allow targeting requirements in public housing and tenant-based assistance to be interchangeable or *fungible*.
- Fungibility provisions allow a PHA with both a tenant-based and a public housing program to admit less than 40 percent of “extremely low-income” families to public housing in a fiscal year to the extent, in its tenant-based program, the PHA has provided more than 75 percent of newly available vouchers, including those resulting from turnover, to extremely low-income families (the family’s annual income does not exceed the higher of the federal poverty level or 30 percent of area median income).
- The PHA may then lower its admission of extremely low-income families into public housing by the number it exceeded its required 75 percent tenant-based admissions of extremely low-income families.

Maximum Number of Credits

- Fungibility “credits” only can be used to drop the annual requirement for housing extremely low-income families below 40 percent of newly available units in public housing, by the *lesser* of the following amounts.
 1. Ten percent of the families initially given Section 8 tenant-based assistance (HCV) during the year, or
 2. The number of families other than extremely low-income families who have been admitted to public housing in developments located in census tracts having a poverty rate of 30 percent or more

Notes

- Fungibility floor: in any fiscal year, at least 30 percent of PHA admissions to public housing must be to extremely low-income families, despite the availability of fungibility credits.

Example of Threshold Criteria and Fungibility Credits

- Assume Anytown PHA has both an HCV program and a PH program. In the applicable fiscal year they exceeded their 75 percent requirement of extremely low-income family tenant-based admissions by 10 percent, which in their case means an additional 35 vouchers.
- According to the regulation they could lower their forty percent PH admissions of extremely low income families by 35, and bring in 35 families of higher income.
- However, the regulations require that the fungibility credits used to drop the annual 40 percent requirement for housing extremely low-income families be the *lesser* of the following amounts.
 1. Anytown PHA admits 300 families to the HCV program in the fiscal year.
 - Therefore, 10 percent, i.e., 30 families of higher income could possibly be admitted into public housing over and above the already-allowed 60 percent (100 percent minus 40 percent required “extremely low-income” admissions); or

Notes

2. Anytown PHA has 25 public housing units located in census tracts where the poverty rate is 30 percent or more, which became *available and were occupied* by families other than extremely low-income families during the fiscal year.

- This means the annual requirement of 40 percent of extremely low-income families could be reduced by the actual number of units (25) and 25 families of higher incomes could possibly be admitted into public housing over and above the 60 percent already allowed.
- Based on the situation above, the *lowest* of the number of units listed above would be number 2, which is 25.
- Although the PHA exceeded by 10 percent its annual requirement of 75 percent admission of extremely low-income families (which for Anytown meant an additional 35 vouchers), the lowest the PHA could reduce its annual requirement of public housing admissions of extremely low-income families below the required 40 percent, would be by 25 units.

Example of Limitation on Credits

- In any fiscal year, no less than 30 percent of a PHA's admissions to public housing units must be extremely low-income families.
 - Anytown PHA has 300 public housing units become available in the fiscal year.
 - Thirty percent of the 300 units becoming available in the FY would be 90.
- Therefore, regardless of the actual numbers derived from 1 and 2 above, no less than 90 extremely low-income families must be admitted to the PHA's public housing units in the fiscal year.

METHOD FOR ACHIEVING DECONCENTRATION

- ***NOTE:** Following is the methodology without adjusting for unit size. PHAs may adjust income for unit size in accordance with procedures prescribed by HUD in PIH Notice 2001-4.*

Step 1: Determine PHA-wide family income

- Determine on an annual basis the average income of all families residing in developments subject to the deconcentration requirement.
 - The PHA may use median income instead of average, provided that the PHA includes a written explanation justifying the use of median income in the PHA plan.

Step 2: Determine average income of each development

- Determine the average income of all families residing in each covered development.

Step 3: Determine whether each covered development falls above, within or below the established income range

- The established income range is from 85 to 115 percent (inclusive) of the average family income (the PHA-wide average income for covered developments as defined in Step 1), except that the upper limit should never be less than the income at which a family would be defined as an extremely low-income family under 24 CFR 5.603(b) (The family's annual income does not exceed the higher of the federal poverty level or 30 percent of area median income).

Notes

- The final rule published on August 6, 2002 revised the definition of the EIR to read:
 - 85 percent of PHA-wide average income to the greater of:
 - 115 percent of PHA-wide average income, or
 - The highest income at which a family would be defined as extremely low-income (the higher of the federal poverty level or 30 percent of the area median income)
- The final rule ensures that developments with average income at or below extremely low-income cannot be considered “higher income developments.”
 - Moving lower income families into these developments will not result in deconcentration
 - These developments are included within the EIR

Step 4: Determine whether or not developments outside the EIR are consistent with local goals and strategies in the PHA Plan

- The PHA may explain or justify the income profile for these developments as being consistent with and furthering two sets of goals:
 - Goals of deconcentration of poverty and income mixing (bringing higher income tenants into lower income developments and vice versa); and
 - Local goals and strategies contained in the PHA plan.

Notes

- Elements of explanations or justifications that may satisfy these requirements may include (but are not limited to) the following:
 - The covered development or developments are subject to consent decrees or other resident selection and admission plans mandated by court action;
 - The covered development or developments are of the PHA's programs, strategies, or activities specifically authorized by statute, such as:
 - Mixed finance developments;
 - Homeownership programs;
 - Self-sufficiency strategies; or
 - Other strategies designed to deconcentrate poverty, promote income mixing, increase the incomes of residents, or the income mix is otherwise subject to individual review and approval by HUD;
 - The covered development's or developments' size, location, and/or configuration promote income deconcentration, such as scattered site or small developments;
 - The income characteristics of the covered development or developments are sufficiently explained by other circumstances.

Step 5: Determine Deconcentration Policy

- Where the income profile for a covered development is not explained or justified in the PHA Plan, the PHA should include in its admission policy its specific policy for deconcentration of poverty and income mixing to applicable covered developments.

Notes

- The PHA's deconcentration policy may include, but is not limited to:
 - Providing incentives to encourage families with incomes below the EIR to accept units in developments above the EIR or vice versa, including:
 - Rent incentives;
 - Affirmative marketing plans; or
 - Added amenities.
 - Targeting investment and capital improvements;
 - Establishing a preference for admission of working families in developments below the EIR;
 - Skipping a family on the waiting list to reach another family in an effort to further the goals of the PHA's deconcentration policy;
 - Providing other strategies permitted by statute and determined by the PHA in consultation with residents and the community through the PHA annual plan process.

Sample Letter

(date)

I am in the process of offering housing to applicants who have been approved for our public housing program.

Please drive by and advise me no later than (date and time) whether you are interested in this housing unit. If you do not respond by the date/time specified, the unit will be offered to another applicant. PLEASE DO NOT DISTURB THE PRESENT OCCUPANTS OR THE NEIGHBORS.

This is for a three-bedroom, upstairs unit that is expected to become available on approximately (date). This availability may be changed or canceled if the unit is not vacated and/or refurbished as scheduled. Lack of a firm availability date should be considered when giving notice to landlords, making moving arrangements, etc.

If you do not respond, the offer will be counted as a refusal. If you are offered a unit and can demonstrate that you were unable to respond for serious, approvable, reasons, this offer will not be counted as a refusal.

Sincerely,

Housing Manager

POST-TEST FOR UNIT 5

1. The purpose of deconcentration is:
 - a. To target 40 percent of new admissions each year to very low-income families
 - b. To provide for a healthy mix of incomes in public housing
 - c. To promote the Family Self-Sufficiency program in public housing
 - d. To provide a varied mix of bedroom sizes in public housing developments
2. The requirement for a PHA to deconcentrate poverty in public housing supersedes the income targeting requirement.
 - a. True
 - b. False
3. The Fair Housing Act applies to PHA decisions to deny based on criminal activity. This means that:
 - a. The PHA may establish policy to deny admission for any criminal activity
 - b. PHA policies must distinguish between criminal activity that poses a risk or threat and that which does not
 - c. PHA policies may waive the statutory regulations that require denial of admission
 - d. The PHA must deny admission for all criminal activity
4. The PHA's obligation to deny admission to sex offenders subject to lifetime sex offender registration can be waived on a case-by-case basis contingent upon successful completion of rehabilitation.
 - a. True
 - b. False
5. In screening for suitability, the PHA should consider all but the following:
 - a. Nature and severity of a mental illness
 - b. History of disturbing the neighbors
 - c. History of destroying property
 - d. History of meeting financial obligations, especially rent
 - e. Criminal activity, especially involving violence or illegal drugs
6. HUD requires that the PHA permanently deny admission to persons convicted of producing or manufacturing any illegal drug on the premises of assisted housing.
 - a. True
 - b. False
7. PHAs can use site-based waiting lists if in the PHA plan.
 - a. True
 - b. False

8. Before denying admission based on criminal records, the PHA must provide the subject of record and the applicant a copy of the criminal record at the informal hearing.
 - a. True
 - b. False
9. The income targeting requirement for public housing is:
 - a. 75 percent of all new admissions each fiscal year must be to extremely low-income families
 - b. 40 percent of all new admissions each fiscal year must be to extremely low-income families
 - c. 75 percent of all new admissions each fiscal year must be to very low-income families
 - d. 40 percent of all new admissions each fiscal year must be to very low-income families
 - e. Up to PHA policy
10. The Fair Housing Act is applicable to PHA adverse decisions, such as decisions to deny admission and decisions to terminate.
 - a. True
 - b. False

Notes

UNIT 6 Income

LEARNING OUTCOMES

- Upon completion of this chapter, you should be able to:
 - Calculate correct annual income under various scenarios
 - Identify and calculate the value of various types of assets
 - Apply correct allowances in determining adjusted income
 - Apply the HUD-verification hierarchy

Notes

INCOME INCLUSIONS

CFR Reference	Income Inclusion	Notes:
5.609(b)(1)	Employment income	Gross, prior to payroll deductions. Includes overtime, commissions, fees, tips, bonuses
5.609(b)(2)	Net income of a business/profession	Gross income minus typical expenses (may need to help families make register)
5.609(b)(3)	Interest, dividends, and net income from real or personal property	e.g., interest on savings, net income from rental property
5.609(b)(4) & (b)(7)	Periodic payments	
	- Social Security	Gross SS prior to Medicare deduction
	- Annuities	
	- Pensions	
	- Alimony	Alimony/child support: count amounts awarded unless verification of income not provided. PHA policy – may require certification or otherwise show have filed with enforcement agency
5.609(b)(5)	- Child support	
	Payments in lieu of earnings	
	- Unemployment	Figure for entire year when income for other weeks is unknown
	- Workers compensation	
5.609(b)(6)	- Severance pay	
	Public assistance	Normal calculation except for 3 as-paid states: NH, VT, NY
	- SSI	
	- General assistance	
5.609(b)(8)	- TANF	
	Military pay	Except for special pay when exposed to hostile fire
5.609(b)(7)	Regular contributions and gifts	Key word: regular Mom gave me \$10 for birthday – no Mom gives me \$10/mo. to pay phone – yes

Summary Chart of Income Excluded Under HUD Regulations

CFR Reference	Income Exclusion	Notes:
5.609(c)(1)	Employment income of minors	Employment income <u>only</u> – Benefit income is counted.
5.609(c)(2)	Foster child or foster adult care payments	Foster children have been placed by court in foster home – special payment – temporary, not permanent. Foster adults are usually individuals with disabilities, unrelated to the tenant family, and are unable to live alone.
PIH 2012-1	Kinship Guardian Assistant Payments (Kin-GAP) and other similar guardianship payments	These payments serve as an alternative to foster care and are now interpreted as equivalent to foster care payments. Children classified as foster children.
5.609(c)(3)	Lump-sum assets	Such as VA disability, SSI, and SS deferred payments. Inheritances, etc.
5.609(c)(4)	Medical reimbursements	Amounts received by family specifically for cost of medical expenses.
5.609(c)(5)	Live-in aide income	
5.609(c)(6)	Student financial assistance	Full amount of financial assistance paid directly to student or educational institution.
5.609(c)(7)	Hostile fire pay	Part of military pay excluded.
5.609(c)(8)	HUD-funded training programs	Capital Fund grant tenant training programs.
5.609(c)(8)	PASS income (SSI recipients)	Disregard while disregarded by SSI.
5.609(c)(8)	Reimbursement of out-of-pocket expenses from publicly assisted programs	Childcare, transportation to participate in welfare job training programs, for example.
5.609(c)(8)	Resident services stipend	Can't exceed \$200/mo. Must be for performing part-time service to PHA/owner to enhance quality of life in the development.
5.609(c)(9)	Casual, sporadic income	\$10 for birthday present.
PIH 2017-05	Temporary income payments from the U.S. Census Bureau.	<i>Temporary</i> is defined as employment lasting no longer than 180 days and not culminating in permanent employment. Employer verification of employment dates and income must be maintained in the tenant file.

Public Housing Management

Income

CFR Reference	Income Exclusion	Notes:
5.609(c)(10)	Holocaust reparation payments	Special exception
5.609(c)(11)	Earnings in excess of \$480 for each adult full-time student	Students 18 or older, excluding head and spouse
5.609(c)(12)	Adoption assistance payments in excess of \$480 per adopted child	
5.609(c)(8)	Incremental earnings/benefits from state/local employment training programs	
5.609(c)(14)	Deferred periodic amounts from SSI and SS benefits received in a lump sum or prospective monthly amounts or VA disability benefits received in a lump sum or prospective monthly amounts	
5.609(c)(15)	Under state or local law	Refunds/rebates for property taxes on dwelling
5.609(c)(16)	Disability care payments	Amounts paid by the state to offset costs of keeping a developmentally disabled family member at home
960.255	Self-sufficiency incentives – Disallowance of increase in annual income	Earned income disallowance
5.609(c)(17)	Other federal statutes	See FR notice, May 20, 2014

Summary Chart of Federally-Mandated Exclusions (FR Notice 5/20/14)

Reference	Income Exclusion	Notes:
25 USC 459(e)	Food stamp allotments	Cash or coupons
	Domestic Volunteer Services Act of 1973	RSVP, VISTA, foster grandparents, senior companions
	HHS's Low-Income Home Energy Assistance Program	Called HEAP – federal program to help pay utility bills
	WIA (now WIOA)	Workforce Investment Act (replaced by Workforce Innovation and Opportunity Act)
	AmeriCorps	AmeriCorps living allowance
	Grants/Scholarships under Title IV of Higher Educational Act of 1965.	Totally excluded – includes federal work/study, Pell grants
	Programs funded under Title V of Older Americans Act	Senior Community Service in Employment Program
	Agent Orange Settlement Fund payments	Vietnam War court case
	Reimbursement costs under the Child Care and Development Block Grant Act of 1990	Childcare paid for/reimbursed with these funds
	Earned income tax credit refunds	Specialized credit on taxes – all IRS refunds excluded
	Alaska Native Claims Settlement Act	Specialized Indian Tribe exclusions
	Income from land of US held in trust for certain Indian tribes	
	Maine Indian Claim Settlement of 1980	
	Grand River Band of Ottawa Indians	
	First \$2,000 per capita shares from funds held in trust for an Indian tribe by Secretary of Interior	
	Crime Victims Compensation	Victims of Crime Act
	Benefits under the School Lunch Act and Child Nutrition Act of 1966	Includes WIC
	Deferred disability benefits from Dept. of Veterans Affairs	Received as a lump sum or in prospective monthly amounts

Public Housing Management

Income

Reference	Income Exclusion	Notes:
	Any amounts in an “individual development account” as provided by the Assets for Independence Act, as amended in 2002 Payments to children of Vietnam veterans born with spina bifida, children of women Vietnam veterans born with certain birth defects, and children of certain Korean service veterans born with spina bifida Assistance received under the Robert T. Stafford Disaster Relief and Emergency Assistance Act and similar disaster assistance	

Notes

Learning Activity 6-1: Annual Income

Mrs. Anna Jones works full-time in a bakery. She makes \$7.25 per hour.

Task

- Complete section 7 of the HUD-50058 form following to calculate her total annual income.

Head of household name Jones	Social Security Number	Date modified (mm/dd/yyyy)
-------------------------------------	------------------------	----------------------------

6. Assets

6a. Family member name	No.	6b. Type of asset	6c. Calculation (PHA use)	6d. Cash value of asset	6e. Anticipated Income
				\$	\$
				\$	\$
				\$	\$
				\$	\$
				\$	\$
				\$	\$
				\$	\$
				\$	\$
6f, 6g. Column totals				\$	6g. \$
6h. Passbook rate (written as decimal)					0. 6h.
6i. Imputed asset income: 6f X 6h (if 6f is \$5,000 or less, put 0)				\$	6i.
6j. Final asset income: larger of 6g or 6i				\$	6j.

7. Income

7a. Family member name	No.	7b. Income Code	7c. Calculation (PHA use)	7d. Dollars per year	7e. Income exclusions	7f. Income after exclusions (7d minus 7e)
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
7g. Column total						\$ 7g.
7h. Reserved						
7i. Total annual income: 6j + 7g						\$ 7i.

7b: Income Codes Wages: B = own business F = federal wage HA = PHA wage M = military pay W = other wage	Welfare: G = general assistance IW = annual imputed welfare income T = TANF assistance SS/SSI/Pensions: P = pension S = SSI SS = Social Security	Other Income Sources: C = child support E = medical reimbursement I = Indian trust/per capita N = other nonwage sources U = unemployment benefits
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Summary Chart of Asset Inclusions and Exclusions

INCLUSIONS	Notes
Savings account	Current balance or avg. monthly balance for prior "X" months Certain exceptions apply for ABLE accounts
Checking account	Current balance or avg. monthly balance for prior "X" months
Stocks and bonds	Broker's fee
Savings certificates, money market funds, other investments	Penalty for early withdrawal Income on market value Withdrawals from ABLE accounts are excluded
Equity in real property	Must get to cash value
Trusts available to household	If unavailable and irrevocable, don't count
IRA, Keogh, retirement accounts	Penalty for early withdrawal
Company retirement pensions	Only count if can withdraw funds while working; when accessible, becomes an asset
Assets which allow unrestricted access (or savings accounts)	May be owned by more than one person
Lump-sum receipts such as inheritances, capital gains, lottery winnings, cash from sale of assets, insurance settlements, Social Security and SSI lump sums, and lump-sum or prospective monthly amounts for any deferred disability benefits from the Department of Veterans Affairs (VA)	Must be retained and verifiable
Personal property held as an investment	Gems, jewelry, coin collections, antique cars
Cash value of life insurance policies	Cash surrender value
Imputed assets – assets disposed of for less than market value w/in prior 2 yrs	Exceptions: foreclosure, bankruptcy, and divorce where court determines value

EXCLUSIONS

Personal property	Car, clothes, etc.
Assets not accessible by family	Irrevocable trusts
Assets part of business or farming operation	Example: Avon products purchased with intent to sell
Interest and distributions from ABLE accounts	
Interests in Indian trust land	
Family Self-Sufficiency escrow accounts	
EID individual savings accounts	

Notes

Learning Activity 6-2: Income from Assets

- Mrs. Anna Jones has a savings account with a current balance of \$400. She will earn 2.3 percent interest on the account. The PHA passbook rate is 0.75 percent.

Task

1. Complete section 6 of the HUD-50058 form to calculate her final asset income (6j).
2. Using the information already included on the 50058 form, calculate her total annual income (7i).

Head of household name Jones	Social Security Number	Date modified (mm/dd/yyyy)
-------------------------------------	------------------------	----------------------------

6. Assets

6a. Family member name	No.	6b. Type of asset	6c. Calculation (PHA use)	6d. Cash value of asset	6e. Anticipated Income
				\$	\$
				\$	\$
				\$	\$
				\$	\$
				\$	\$
				\$	\$
				\$	\$
				\$	\$
6f, 6g. Column totals				\$	6g. \$
6h. Passbook rate (written as decimal)					0. 6h.
6i. Imputed asset income: 6f X 6h (if 6f is \$5,000 or less, put 0)				\$	6i.
6j. Final asset income: larger of 6g or 6i				\$	6j.

7. Income

7a. Family member name	No.	7b. Income Code	7c. Calculation (PHA use)	7d. Dollars per year	7e. Income exclusions	7f. Income after exclusions (7d minus 7e)
Anna	1	W	7.25 x 2080	\$ 15,080	\$	\$ 15,080
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
7g. Column total						\$ 15,080 7g.
7h. Reserved						
7i. Total annual income: 6j + 7g						\$ 7i.

7b: Income Codes Wages: B = own business F = federal wage HA = PHA wage M = military pay W = other wage	Welfare: G = general assistance IW = annual imputed welfare income T = TANF assistance SS/SSI/Pensions: P = pension S = SSI SS = Social Security	Other Income Sources: C = child support E = medical reimbursement I = Indian trust/per capita N = other nonwage sources U = unemployment benefits
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*Notes***Learning Activity 6-3: Assets and Asset Income**

- Mrs. Anna Jones received an inheritance of \$6,000 which she has put into stocks. The broker fee if she were to sell the stock is \$480. She is expected to earn a 2 percent dividend on the stock this year. The PHA passbook rate in her area is 0.75 percent.

Task

1. List her assets in section 6 of the HUD-50058 form and compute final asset income (6j).
2. Using the information already included on the 50058 form, compute her total annual income (7i).

Head of household name Jones	Social Security Number	Date modified (mm/dd/yyyy)
-------------------------------------	------------------------	----------------------------

6. Assets

6a. Family member name	No.	6b. Type of asset	6c. Calculation (PHA use)	6d. Cash value of asset	6e. Anticipated Income
Anna	1	Savings	400 x .023	\$ 400	\$ 9
				\$	\$
				\$	\$
				\$	\$
				\$	\$
				\$	\$
				\$	\$
				\$	\$
6f, 6g. Column totals				\$ 6f.	\$ 6g.
6h. Passbook rate (written as decimal)					0. 6h.
6i. Imputed asset income: 6f X 6h (if 6f is \$5,000 or less, put 0)				\$	6i.
6j. Final asset income: larger of 6g or 6i				\$	6j.

7. Income

7a. Family member name	No.	7b. Income Code	7c. Calculation (PHA use)	7d. Dollars per year	7e. Income exclusions	7f. Income after exclusions (7d minus 7e)
Anna	1	W	7.25 x 2080	\$ 15,080	\$	\$ 15,080
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
7g. Column total						\$ 15,080 7g.
7h. Reserved						
7i. Total annual income: 6j + 7g						\$ 7i.

7b: Income Codes Wages: B = own business F = federal wage HA = PHA wage M = military pay W = other wage	Welfare: G = general assistance IW = annual imputed welfare income T = TANF assistance SS/SSI/Pensions: P = pension S = SSI SS = Social Security	Other Income Sources: C = child support E = medical reimbursement I = Indian trust/per capita N = other nonwage sources U = unemployment benefits
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Notes

Learning Activity 6-4: Cash Value of Assets

- A resident owns a house valued at \$45,000. There is an outstanding mortgage balance of \$29,000. If the resident were to sell, there would be a realtor commission of \$3,600 and closing costs of \$450. What is the cash value of the asset?

Market Value	_____
Less HUD Asset Expenses:	
Broker Fee	_____
Legal Fee	_____
Settlement Costs	_____
Penalty for Early Withdrawal	_____
Less Mortgage Balance	_____
Cash Value	_____

Instructions

- Obtain the market value of the asset.
- Subtract the allowable HUD asset expenses, which could include:
 - Broker fee
 - Legal fees
 - Settlement costs
 - Penalty for early withdrawal of the invested asset
- Subtract mortgage balance the family owes (if any) on the asset.

Learning Activity 6-5: Imputed Assets

- John Q. Tenant is a person with a disability and could no longer maintain his home.
- In preparing to move into public housing, Mr. Tenant just “sold” the house to his son for \$10,000. His son assumed the mortgage which has a balance of \$15,000. The house is appraised at \$50,000. Mr. Tenant’s son paid all transfer costs. What is the imputed value of the asset?

Date Disposed	_____
Market Value	_____
Less HUD Asset Expenses:	
Broker Fee	_____
Legal Fee	_____
Settlement Costs	_____
Penalty for Early Withdrawal	_____
Less Mortgage Balance	_____
Less Amount Received	_____
Imputed Asset Cash Value	_____

Instructions

- Obtain the Market Value of the asset.
- Subtract the allowable HUD Asset Expenses, which could include:
 - Broker fee
 - Legal fees
 - Settlement costs
 - Penalty for early withdrawal of the invested asset
- Subtract any mortgage balance the family owes on the asset.
- Subtract any amount the family received in payment for receipt of the asset.

Notes

Learning Activity 6-6: Dependent and Child Care Allowances

- Mrs. Bernice Smith's annual income is \$10,717. Her work income is \$10,525.
- Mrs. Smith has two children, both under 12 years of age. She is paying \$50 per week child care for them.

Task

- Complete section 8 of the HUD-50058 to get adjusted annual income (8y).

Head of household name Smith	Social Security Number	Date modified (mm/dd/yyyy)
-------------------------------------	------------------------	----------------------------

8. Expected Income Per Year

8a.	Total annual income: copy from 7i	\$	8a.	
Permissible Deductions (Public Housing Only. If Section 8, Skip to 8f or 8q)				
8b.	Family member name	No.	8c. Type of permissible deduction	8d. Amount
				\$
				\$
				\$
				\$
				\$
				\$
8e.	Total permissible deductions (sum of column 8d)			\$ 8e.
If head/spouse/co-head is under 62 and no family member is disabled, skip to 8q				
8f.	Medical/disability threshold: 8a X 0.03			\$ 8f.
8g.	Total annual unreimbursed disability assistance expense (if no disability expenses, skip to 8k)			\$ 8g.
8h.	Maximum disability allowance: If 8g minus 8f is positive or zero, put amount			\$ 8h.
	If negative and head/spouse/co-head is under 62 and not disabled, put 0			\$ 8h.
	If negative and head/spouse/co-head is elderly or disabled, copy from 8g			\$ 8h.
8i.	Earnings in 7d made possible by disability assistance expense			\$ 8i.
8j.	Allowable disability assistance expense: lower of 8h or 8i (if 8g is less than 8f and head/spouse/co-head elderly or disabled, copy from 8h)			\$ 8j.
8k.	Total annual unreimbursed medical expenses (if head/spouse/co-head under 62 and not disabled, put 0)			\$ 8k.
8m.	Total annual disability assistance and medical expense: 8j + 8k (if no disability expenses, copy from 8k)			\$ 8m.
8n.	Medical/disability assistance allowance:	If no disability assistance expenses or if 8g is less than 8f, put 8m minus 8f (if 8m minus 8f is negative, put zero)		\$ 8n.
		If disability assistance expenses and 8g is greater than or equal to 8f, copy from 8m		\$ 8n.
8p.	Elderly/disability allowance (default = \$400)			\$ 8p.
8q.	Number of dependents (people under 18, or with disability, or full-time student. Do not count head of household, spouse, co-head, foster child/adult, or live-in aide.)			\$ 8q.
8r.	Allowance per dependent (default = \$480)			\$ 8r.
8s.	Dependent allowance: 8q X 8r			\$ 8s.
8t.	Total annual unreimbursed childcare costs			\$ 8t.
8x.	Total allowances: 8e + 8n + 8p + 8s + 8t			\$ 8x.
8y.	Adjusted annual income: 8a minus 8x (if 8x is larger, put 0)			\$ 8y.

Notes

Learning Activity 6-7: Medical Allowance

- Family name: Korbel
- Head 64
- Spouse 63
- Annual income \$12,000
- Total medical expenses \$1,500

\$	12,000	Annual Income
x	.03	3%
<hr/>		
\$	360	3% of Annual Income

\$	1,500	Total Medical Expenses
–	360	3% of Annual Income
<hr/>		
\$	1,140	Allowable Medical Expenses

Task

- Using the information provided, complete section 8 of the HUD-50058 form to calculate total allowances (8x) and adjusted annual income (8y).

Head of household name	Korbel	Social Security Number	Date modified (mm/dd/yyyy)
------------------------	---------------	------------------------	----------------------------

8. Expected Income Per Year

8a.	Total annual income: copy from 7i	\$	8a.	
Permissible Deductions (Public Housing Only. If Section 8, Skip to 8f or 8q)				
8b.	Family member name	No.	8c. Type of permissible deduction	8d. Amount
				\$
				\$
				\$
				\$
				\$
				\$
8e.	Total permissible deductions (sum of column 8d)			\$ 8e.
If head/spouse/co-head is under 62 and no family member is disabled, skip to 8q				
8f.	Medical/disability threshold: 8a X 0.03			\$ 8f.
8g.	Total annual unreimbursed disability assistance expense (if no disability expenses, skip to 8k)			\$ 8g.
8h.	Maximum disability allowance: If 8g minus 8f is positive or zero, put amount			\$ 8h.
	If negative and head/spouse/co-head is under 62 and not disabled, put 0			\$ 8h.
	If negative and head/spouse/co-head is elderly or disabled, copy from 8g			\$ 8h.
8i.	Earnings in 7d made possible by disability assistance expense			\$ 8i.
8j.	Allowable disability assistance expense: lower of 8h or 8i (if 8g is less than 8f and head/spouse/co-head elderly or disabled, copy from 8h)			\$ 8j.
8k.	Total annual unreimbursed medical expenses (if head/spouse/co-head under 62 and not disabled, put 0)			\$ 8k.
8m.	Total annual disability assistance and medical expense: 8j + 8k (if no disability expenses, copy from 8k)			\$ 8m.
8n.	Medical/disability assistance allowance:	If no disability assistance expenses or if 8g is less than 8f, put 8m minus 8f (if 8m minus 8f is negative, put zero)		\$ 8n.
		If disability assistance expenses and 8g is greater than or equal to 8f, copy from 8m		\$ 8n.
8p.	Elderly/disability allowance (default = \$400)			\$ 8p.
8q.	Number of dependents (people under 18, or with disability, or full-time student. Do not count head of household, spouse, co-head, foster child/adult, or live-in aide.)			\$ 8q.
8r.	Allowance per dependent (default = \$480)			\$ 8r.
8s.	Dependent allowance: 8q X 8r			\$ 8s.
8t.	Total annual unreimbursed childcare costs			\$ 8t.
8x.	Total allowances: 8e + 8n + 8p + 8s + 8t			\$ 8x.
8y.	Adjusted annual income: 8a minus 8x (if 8x is larger, put 0)			\$ 8y.

Notes

Learning Activity 6-8: Disability Assistance Expense Allowance

- Family name: Norton
- Head: 36 Earned income: \$12,000
- Spouse 35 Earned income: \$10,000
- Son 15 (has a disability)
- Assuming \$3,500 expenses/year for care of the son (enables spouse to work), calculate allowable disability assistance.

Disability Assistance Allowance:

\$	_____	Annual Income
x	_____	
	.03	
\$	_____	3% of Annual Income

\$	_____	Expenses for care of son
-	_____	3% of Annual Income
\$	_____	Allowable Disability Assistance Expenses

Head of household name	Norton	Social Security Number	Date modified (mm/dd/yyyy)
------------------------	---------------	------------------------	----------------------------

8. Expected Income Per Year

8a.	Total annual income: copy from 7i	\$	8a.
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Permissible Deductions (Public Housing Only. If Section 8, Skip to 8f or 8q)

8b.	Family member name	No.	8c.	Type of permissible deduction	8d.	Amount
					\$	
					\$	
					\$	
					\$	
					\$	
					\$	

8e.	Total permissible deductions (sum of column 8d)	\$	8e.
-----	---	----	-----

If head/spouse/co-head is under 62 and no family member is disabled, skip to 8q

8f.	Medical/disability threshold: 8a X 0.03	\$	8f.
8g.	Total annual unreimbursed disability assistance expense (if no disability expenses, skip to 8k)	\$	8g.
8h.	Maximum disability allowance: If 8g minus 8f is positive or zero, put amount	\$	8h.
	If negative and head/spouse/co-head is under 62 and not disabled, put 0	\$	8h.
	If negative and head/spouse/co-head is elderly or disabled, copy from 8g	\$	8h.
8i.	Earnings in 7d made possible by disability assistance expense	\$	8i.
8j.	Allowable disability assistance expense: lower of 8h or 8i (if 8g is less than 8f and head/spouse/co-head elderly or disabled, copy from 8h)	\$	8j.
8k.	Total annual unreimbursed medical expenses (if head/spouse/co-head under 62 and not disabled, put 0)	\$	8k.
8m.	Total annual disability assistance and medical expense: 8j + 8k (if no disability expenses, copy from 8k)	\$	8m.
8n.	Medical/disability assistance allowance:		
	If no disability assistance expenses or if 8g is less than 8f, put 8m minus 8f (if 8m minus 8f is negative, put zero)	\$	8n.
	If disability assistance expenses and 8g is greater than or equal to 8f, copy from 8m	\$	8n.
8p.	Elderly/disability allowance (default = \$400)	\$	8p.
8q.	Number of dependents (people under 18, or with disability, or full-time student. Do not count head of household, spouse, co-head, foster child/adult, or live-in aide.)	\$	8q.
8r.	Allowance per dependent (default = \$480)	\$	8r.
8s.	Dependent allowance: 8q X 8r	\$	8s.
8t.	Total annual unreimbursed childcare costs	\$	8t.
8x.	Total allowances: 8e + 8n + 8p + 8s + 8t	\$	8x.
8y.	Adjusted annual income: 8a minus 8x (if 8x is larger, put 0)	\$	8y.

Notes

Learning Activity 6-9: Imputed Welfare Income

- Susan Perkins was receiving \$462 per month in TANF.
- She reported to the PHA that her TANF benefits were reduced to \$296.
- The PHA verified with the local welfare agency that Ms. Perkins' TANF was sanctioned due to failure to comply with a TANF economic self-sufficiency requirement.

Task

- Complete Section 7 of the HUD-50058 to indicate annual income.

Head of household name Perkins	Social Security Number	Date modified (mm/dd/yyyy)
---------------------------------------	------------------------	----------------------------

6. Assets

6a. Family member name	No.	6b. Type of asset	6c. Calculation (PHA use)	6d. Cash value of asset	6e. Anticipated Income
				\$	\$
				\$	\$
				\$	\$
				\$	\$
				\$	\$
				\$	\$
				\$	\$
				\$	\$
6f, 6g. Column totals				\$	6g. \$
6h. Passbook rate (written as decimal)					0. 6h.
6i. Imputed asset income: 6f X 6h (if 6f is \$5,000 or less, put 0)				\$	6i.
6j. Final asset income: larger of 6g or 6i				\$	6j.

7. Income

7a. Family member name	No.	7b. Income Code	7c. Calculation (PHA use)	7d. Dollars per year	7e. Income exclusions	7f. Income after exclusions (7d minus 7e)
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
7g. Column total						\$ 7g.
7h. Reserved						
7i. Total annual income: 6j + 7g						\$ 7i.

7b: Income Codes Wages: B = own business F = federal wage HA = PHA wage M = military pay W = other wage	Welfare: G = general assistance IW = annual imputed welfare income T = TANF assistance SS/SSI/Pensions: P = pension S = SSI SS = Social Security	Other Income Sources: C = child support E = medical reimbursement I = Indian trust/per capita N = other nonwage sources U = unemployment benefits
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Learning Activity 6-10: Income Changes from Welfare

- The amount of imputed welfare income is offset by the amount of additional income a family receives that begins after the sanction was imposed
 - When additional income is at least equal to the imputed welfare income, the imputed income is reduced to zero

First example:

- Family receives \$500 in TANF. Due to failure to cooperate with TANF job training requirement, \$100 is sanctioned. The family is now receiving \$400.

The PHA counts _____ in imputed welfare income

Second example:

- Family receives \$600 in TANF. Due to welfare fraud, \$250 is sanctioned. The family is now receiving \$350.

The PHA counts _____ in imputed welfare income

- Then the head of household begins working and earns \$160/month.

The PHA now counts _____ in imputed welfare income

- The head of household begins to work more hours and earns \$300/month. Now that the additional income is at least equal to the imputed welfare income,

The imputed welfare income is _____

POST-TEST FOR UNIT 6

1. The definition of elderly is:

2. Lump-sum receipts to family assets not included as income are:
 - a. Inheritances
 - b. Lump sum representing deferred periodic payments of SS and SSI
 - c. Worker's compensation deferred periodic payments
 - d. Health and accident insurance settlement
 - e. a, b, and d above
3. A dependent is defined as any household member under 18 years of age, age 18 or older who has a disability, or a full-time student regardless of age.
 - a. True
 - b. False
4. Annual income minus allowances for dependents, elderly/disabled family status, child care, medical, and disability assistance expenses is:

5. Never counted as dependents are:
 1. _____
 2. _____
 3. _____
 4. _____
6. If assets are valued at more than \$5,000, imputed income from assets:
 - a. Is included in the calculation of annual income
 - b. Is calculated using a passbook rate of 5.5 percent
 - c. Is not used if actual income from assets is greater
7. Which income is used to determine annual income?
 - a. Anticipated income using current circumstances
 - b. Last year's income
 - c. Last six month's rent
8. To convert semi monthly wages to annual income, multiply by:
 - a. 26
 - b. 52
 - c. 24
 - d. 12

9. The following income of a minor would be included as income to the household:
 - a. Wages
 - b. Social Security
 - c. Interest on savings account
 - d. Both a and b
 - e. Both b and c
10. When net family assets are \$5,000 or less, income from assets is based on:
 - a. Actual income from assets
 - b. Greater of imputed income or actual income
 - c. Imputed income
11. What restrictions are placed on child care?
 - a. Deduction allowed when care allows an adult member of the family to work.
 - b. Deduction allowed when care allows an adult member of the family to attend school or vocational training.
 - c. Must be reasonable.
 - d. Must not be reimbursed by another source.
 - e. All the above
12. Disability assistance expenses are allowed:
 - a. To allow a person with a disability or other adult to attend school or work.
 - b. Only for elderly families
 - c. Medical expense of family member with disability.
 - d. Both a and c above
 - e. None of the above
13. According to the PHA's ACOP, which of the following can be included in calculation of total medical expenses for a qualified family?
 - a. Both prescription and nonprescription medicine
 - b. Cost of medical and life insurance premiums
 - c. Transportation related to treatment
 - d. Eyeglasses and hearing aids
 - e. a, c, and d above
 - f. All of the above
14. The dependent allowance is:
 - a. \$400 per family
 - b. \$480 per family
 - c. \$480 per dependent
15. The value of food stamps would be included in determining annual income.
 - a. True
 - b. False

16. The elderly family allowance is \$400 per person age 62 or over.
 - a. True
 - b. False
17. The medical expense allowance is permitted only for families in which the head, spouse, or cohead is at least 62 or disabled.
 - a. True
 - b. False
18. Annual income is defined as “income after allowances.”
 - a. True
 - b. False
19. Earned income in excess of \$480 of full-time students 18 and older (not head/spouse/cohead) is not to be included in income.
 - a. True
 - b. False
20. All income and gifts received from persons outside the household must be counted as annual income.
 - a. True
 - b. False
21. Lump-sum receipts are always counted as income.
 - a. True
 - b. False
22. Foster children are counted when giving the dependent allowance.
 - a. True
 - b. False
23. Child care for children age 13 and under can be included in determining total child care allowances.
 - a. True
 - b. False
24. Only elderly families can receive an allowance for disability assistance expenses.
 - a. True
 - b. False
25. Disability assistance expenses may be deducted if they enable a family member to work or attend school.
 - a. True
 - b. False
26. Cost of Medicare premiums is to be included in calculating total medical expense if the family is eligible for medical expenses.
 - a. True
 - b. False

27. If any family member is age 62+, or a person with a disability, the family will receive the elderly/disabled family allowance of \$400.
- True
 - False
28. Income of a 17-year-old mother of one child, who has dropped out of school to work but is living with her parents is counted in determining annual income.
- True
 - False
29. Interest received on the savings account of a minor child does not count as income.
- True
 - False
30. If a family member qualifies for the EID, they have a total of how many months in which to receive the 12-month full exclusion and the 12-month phase-in exclusion?
- 48 months
 - 24 months, as long as the family member continues to work
 - 24 months, regardless of whether the family member continues to work or not
 - Up to PHA policy
31. Tammi Reynolds becomes qualified for the EID on January 4, 2018. Her EID begins February 1, 2018. She loses her job on July 18, 2018. She goes back to school and earns her associate degree. She is then hired at a better job on August 20, 2019. What does the PHA do?
- Use her total earned income now
 - Resume her initial exclusion period
 - Move her into the phase-in exclusion period
 - Any of the above, up to PHA policy
32. Family-provided documents such as paystubs and award letters are not considered third-party verification.
- True
 - False

UNIT 7 Rent Calculations

LEARNING OUTCOMES

- Upon completion of this chapter, you should be able to:
 - Calculate the total tenant payment, tenant rent, and utility reimbursement payment
 - Recognize the methodology for establishing flat rents for public housing units
 - Explain how to apply ceiling rents and flat rents

Notes

Learning Activity 7-1: Rent Calculation

- Using the information provided, complete sections 8, 9, and 10a through 10f of the following HUD-50058 forms for the following family:

Korbel

- Annual Income: \$12,000
- Adjusted Income: \$10,460
- PHA's Minimum TTP \$25
- Utility Allowance: \$50
- Flat Rent \$500

Head of household name	Korbel	Social Security Number	Date modified (mm/dd/yyyy)
------------------------	---------------	------------------------	----------------------------

8. Expected Income Per Year

8a.	Total annual income: copy from 7i	\$	8a.	
Permissible Deductions (Public Housing Only. If Section 8, Skip to 8f or 8q)				
8b.	Family member name	No.	8c. Type of permissible deduction	8d. Amount
				\$
				\$
				\$
				\$
				\$
				\$
8e.	Total permissible deductions (sum of column 8d)			\$ 8e.
If head/spouse/co-head is under 62 and no family member is disabled, skip to 8q				
8f.	Medical/disability threshold: 8a X 0.03			\$ 8f.
8g.	Total annual unreimbursed disability assistance expense (if no disability expenses, skip to 8k)			\$ 8g.
8h.	Maximum disability allowance: If 8g minus 8f is positive or zero, put amount			\$ 8h.
	If negative and head/spouse/co-head is under 62 and not disabled, put 0			\$ 8h.
	If negative and head/spouse/co-head is elderly or disabled, copy from 8g			\$ 8h.
8i.	Earnings in 7d made possible by disability assistance expense			\$ 8i.
8j.	Allowable disability assistance expense: lower of 8h or 8i (if 8g is less than 8f and head/spouse/co-head elderly or disabled, copy from 8h)			\$ 8j.
8k.	Total annual unreimbursed medical expenses (if head/spouse/co-head under 62 and not disabled, put 0)			\$ 8k.
8m.	Total annual disability assistance and medical expense: 8j + 8k (if no disability expenses, copy from 8k)			\$ 8m.
8n.	Medical/disability assistance allowance:	If no disability assistance expenses or if 8g is less than 8f, put 8m minus 8f (if 8m minus 8f is negative, put zero)		\$ 8n.
		If disability assistance expenses and 8g is greater than or equal to 8f, copy from 8m		\$ 8n.
8p.	Elderly/disability allowance (default = \$400)			\$ 8p.
8q.	Number of dependents (people under 18, or with disability, or full-time student. Do not count head of household, spouse, co-head, foster child/adult, or live-in aide.)			\$ 8q.
8r.	Allowance per dependent (default = \$480)			\$ 8r.
8s.	Dependent allowance: 8q X 8r			\$ 8s.
8t.	Total annual unreimbursed childcare costs			\$ 8t.
8x.	Total allowances: 8e + 8n + 8p + 8s + 8t			\$ 8x.
8y.	Adjusted annual income: 8a minus 8x (if 8x is larger, put 0)			\$ 8y.

Head of household name	Korbel	Social Security Number	Date modified (mm/dd/yyyy)
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9. Total Tenant Payment (TTP)

9a.	Total monthly income: $8a \div 12$	\$	9a.
9c.	TTP if based on annual income: $9a \times 0.10$	\$	9c.
9d.	Adjusted monthly income: $8y \div 12$	\$	9d.
9e.	Percentage of adjusted monthly income: use 30% for Section 8		9e.
9f.	TTP if based on adjusted annual income: $(9d \times 9e) \div 100$	\$	9f.
9g.	Welfare rent per month (if none, put 0)	\$	9g.
9h.	Minimum rent (if waived, put 0)	\$	9h.
9i.	Enhanced Voucher minimum rent	\$	9i.
9j.	TTP, highest of lines 9c, 9f, 9g, 9h, or 9i	\$	9j.
9k.	Most recent TTP	\$	9k.
9m.	Qualify for minimum rent hardship exemption? (Y or N)	\$	9m.

Head of household name	Korbel	Social Security Number	Date modified (mm/dd/yyyy)
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10. Public Housing and Turnkey III

10a.	TTP: copy from 9j	\$	10a.
10b.	Unit's flat rent (see Instruction Booklet for prorated flat rent calculation)	\$	10b.

Income Based Rent Calculation (if prorated rent, skip to 10h)

10c.	Income based ceiling rent, if any	\$	10c.
10d.	Lower of TTP or income based ceiling rent (if no income based ceiling rent, put 10a)	\$	10d.
10e.	Utility allowance, if any	\$	10e.
10f.	Tenant rent: 10d minus 10e	If positive or 0, put tenant rent	\$ 10f.
		If negative, credit tenant	\$ 10f.

Income Based Prorated Rent Calculation (if not prorated, skip to 10u)

10h.	Public Housing maximum rent	\$	10h.
10i.	Family maximum subsidy: 10h minus 10a	\$	10i.
10j.	Total number eligible		10j.
10k.	Total number in family		10k.
10n.	Eligible subsidy (10i ÷ 10k) X 10j	\$	10n.
10p.	Mixed family TTP: 10h minus 10n	\$	10p.
10r.	Utility allowance, if any	\$	10r.
10s.	Mixed family tenant rent: 10p minus 10r	If positive or 0, put tenant rent	\$ 10s.
		If negative, credit tenant	\$ 10s.

Type of Rent

10u.	Type of rent selected:	<input type="checkbox"/> Income based	<input type="checkbox"/> Flat
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Notes

Learning Activity 7-2: Rent Calculation

- Using the information provided, complete sections 8, 9, and 10a through 10f of the following HUD-50058 forms for the following family:

Waters

- | | |
|----------------------|---------|
| - Annual Income: | \$3,600 |
| - Adjusted Income: | \$808 |
| - PHA's Minimum TTP | \$25 |
| - Utility Allowance: | \$90 |
| - Flat Rent | \$500 |

Head of household name Waters	Social Security Number	Date modified (mm/dd/yyyy)
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8. Expected Income Per Year

8a.	Total annual income: copy from 7i	\$	8a.	
Permissible Deductions (Public Housing Only. If Section 8, Skip to 8f or 8q)				
8b.	Family member name	No.	8c. Type of permissible deduction	8d. Amount
				\$
				\$
				\$
				\$
				\$
				\$
8e.	Total permissible deductions (sum of column 8d)			\$ 8e.
If head/spouse/co-head is under 62 and no family member is disabled, skip to 8q				
8f.	Medical/disability threshold: 8a X 0.03			\$ 8f.
8g.	Total annual unreimbursed disability assistance expense (if no disability expenses, skip to 8k)			\$ 8g.
8h.	Maximum disability allowance: If 8g minus 8f is positive or zero, put amount			\$ 8h.
	If negative and head/spouse/co-head is under 62 and not disabled, put 0			\$ 8h.
	If negative and head/spouse/co-head is elderly or disabled, copy from 8g			\$ 8h.
8i.	Earnings in 7d made possible by disability assistance expense			\$ 8i.
8j.	Allowable disability assistance expense: lower of 8h or 8i (if 8g is less than 8f and head/spouse/co-head elderly or disabled, copy from 8h)			\$ 8j.
8k.	Total annual unreimbursed medical expenses (if head/spouse/co-head under 62 and not disabled, put 0)			\$ 8k.
8m.	Total annual disability assistance and medical expense: 8j + 8k (if no disability expenses, copy from 8k)			\$ 8m.
8n.	Medical/disability assistance allowance:	If no disability assistance expenses or if 8g is less than 8f, put 8m minus 8f (if 8m minus 8f is negative, put zero)		\$ 8n.
		If disability assistance expenses and 8g is greater than or equal to 8f, copy from 8m		\$ 8n.
8p.	Elderly/disability allowance (default = \$400)			\$ 8p.
8q.	Number of dependents (people under 18, or with disability, or full-time student. Do not count head of household, spouse, co-head, foster child/adult, or live-in aide.)			\$ 8q.
8r.	Allowance per dependent (default = \$480)			\$ 8r.
8s.	Dependent allowance: 8q X 8r			\$ 8s.
8t.	Total annual unreimbursed childcare costs			\$ 8t.
8x.	Total allowances: 8e + 8n + 8p + 8s + 8t			\$ 8x.
8y.	Adjusted annual income: 8a minus 8x (if 8x is larger, put 0)			\$ 8y.

Head of household name Waters	Social Security Number	Date modified (mm/dd/yyyy)
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9. Total Tenant Payment (TTP)

9a. Total monthly income: $8a \div 12$	\$	9a.
9c. TTP if based on annual income: $9a \times 0.10$	\$	9c.
9d. Adjusted monthly income: $8y \div 12$	\$	9d.
9e. Percentage of adjusted monthly income: use 30% for Section 8		9e.
9f. TTP if based on adjusted annual income: $(9d \times 9e) \div 100$	\$	9f.
9g. Welfare rent per month (if none, put 0)	\$	9g.
9h. Minimum rent (if waived, put 0)	\$	9h.
9i. Enhanced Voucher minimum rent	\$	9i.
9j. TTP, highest of lines 9c, 9f, 9g, 9h, or 9i	\$	9j.
9k. Most recent TTP	\$	9k.
9m. Qualify for minimum rent hardship exemption? (Y or N)	\$	9m.

Head of household name	Waters	Social Security Number	Date modified (mm/dd/yyyy)
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10. Public Housing and Turnkey III

10a.	TTP: copy from 9j	\$	10a.
10b.	Unit's flat rent (see Instruction Booklet for prorated flat rent calculation)	\$	10b.

Income Based Rent Calculation (if prorated rent, skip to 10h)

10c.	Income based ceiling rent, if any	\$	10c.
10d.	Lower of TTP or income based ceiling rent (if no income based ceiling rent, put 10a)	\$	10d.
10e.	Utility allowance, if any	\$	10e.
10f.	Tenant rent: 10d minus 10e	If positive or 0, put tenant rent	\$ 10f.
		If negative, credit tenant	\$ 10f.

Income Based Prorated Rent Calculation (if not prorated, skip to 10u)

10h.	Public Housing maximum rent	\$	10h.
10i.	Family maximum subsidy: 10h minus 10a	\$	10i.
10j.	Total number eligible		10j.
10k.	Total number in family		10k.
10n.	Eligible subsidy (10i ÷ 10k) X 10j	\$	10n.
10p.	Mixed family TTP: 10h minus 10n	\$	10p.
10r.	Utility allowance, if any	\$	10r.
10s.	Mixed family tenant rent: 10p minus 10r	If positive or 0, put tenant rent	\$ 10s.
		If negative, credit tenant	\$ 10s.

Type of Rent

10u.	Type of rent selected:	<input type="checkbox"/> Income based	<input type="checkbox"/> Flat
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Notes

Learning Activity 7-3: Flat Rents and Family Choice in Rental Payments

- Assume the Burns family has chosen to pay flat rent (NOT ceiling rent) for the unit. Using the following information, complete lines 10a through 10f of the HUD-50058.
 - TTP: \$562
 - Flat rent: \$550

Head of household name Burns	Social Security Number	Date modified (mm/dd/yyyy)
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10. Public Housing and Turnkey III

10a. TTP: copy from 9j	\$	10a.
10b. Unit's flat rent (see Instruction Booklet for prorated flat rent calculation)	\$	10b.

Income Based Rent Calculation (if prorated rent, skip to 10h)

10c. Income based ceiling rent, if any	\$	10c.
10d. Lower of TTP or income based ceiling rent (if no income based ceiling rent, put 10a)	\$	10d.
10e. Utility allowance, if any	\$	10e.
10f. Tenant rent: 10d minus 10e	If positive or 0, put tenant rent	\$ 10f.
	If negative, credit tenant	\$ 10f.

Income Based Prorated Rent Calculation (if not prorated, skip to 10u)

10h. Public Housing maximum rent	\$	10h.
10i. Family maximum subsidy: 10h minus 10a	\$	10i.
10j. Total number eligible		10j.
10k. Total number in family		10k.
10n. Eligible subsidy (10i ÷ 10k) X 10j	\$	10n.
10p. Mixed family TTP: 10h minus 10n	\$	10p.
10r. Utility allowance, if any	\$	10r.
10s. Mixed family tenant rent: 10p minus 10r	If positive or 0, put tenant rent	\$ 10s.
	If negative, credit tenant	\$ 10s.

Type of Rent

10u. Type of rent selected:	<input type="checkbox"/> Income based	<input type="checkbox"/> Flat
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Learning Activity 7-4: EID Calculation – Davis Family

Task

- Answer the following questions:

Laurie Davis has been employed part-time at a coffee shop for three years while attending school part-time. Her last 50058 indicated that she earned \$2,600 per year at the coffee shop. Minimum wage in the PHA's jurisdiction is \$7.25 per hour.

On 5/20/18, Ms. Davis reports to the PHA that she finished her school program and has a job earning \$526 bi-weekly at a print shop. She left her job at the coffee house.

1. Does Ms. Davis qualify for the earned income disallowance?

2. If Ms. Davis qualifies for the earned income disallowance, what is her baseline or pre-qualifying income?

3. If Ms. Davis qualifies for the earned income disallowance, when would her earned income disallowance begin?

4. If Ms. Davis qualifies for the earned income disallowance, and assuming she had an interruption in employment for four months, when would her phase-in exclusion period begin?

Learning Activity 7-5: EID Calculation – Tepper Family

Task

- Calculate the amount of the EID family member's earnings to be included in annual income.

Sylvia Tepper and her four-year-old son have been on TANF, receiving \$399 monthly. On 6/20/18, she calls the PHA to report that she was hired at a print shop, earning \$11,520 annually, and her TANF income stops. PHA policy calls for a 50 percent exclusion during the phase-in period.

1. Ms. Tepper's baseline or pre-qualifying income was:

2. Ms. Tepper's earned income disallowance would begin on:

3. Calculate on the earned income disallowance worksheet.

Earned Income Disallowance Calculation

(HCV: only for persons with disabilities)

This form applies to family members eligible for EID on or after 5/9/16.

Family Name _____

Family Member _____

- How much is the EID family member's pre-qualifying (baseline) income?
(ALL income of EID family member, including asset income, prior to
qualifying event):

--

Step 1: Calculate the full exclusion amount

A1. Enter EARNED income of EID family member	\$	
A2: Earned income, if any, included in pre-qualifying income		
A3: Increase in earned income (A1 – A2). If 0 or negative, STOP. Do not exclude any earned income.		
B. Enter other income of EID family member (including income from assets)		
C. Total annual income of EID family member (A1 + B)		
D. Enter pre-qualifying income (baseline)	\$	
E. Full exclusion (C minus D, but no more than A3). If amount exceeds A3, enter amount from A3. (First 12 months)	= \$	
F. Enter percentage excluded for the second 12-month period per PHA policy		
G. Calculate exclusion for second 12-month period (E x F)	= \$	

Step 2: Determine EID family member's wages after exclusion

H. Enter EID family member's earnings (HUD 50058, 7d):	\$	
I. Enter exclusion from E or G, as applicable (HUD 50058, 7e):	\$	
J. EID family member's earned income after exclusions (HUD 50058, 7f): (H minus I)	= \$	

HUD Form 50058

7a. Family member name	No.	7b. Income Code	7c. Calculation (PHA use)	7d. Dollars per year	7e. Income exclusions	7f. Income after exclusions (7d minus 7e)
7g. Column total						

Part 2

- On 7/1/19, the PHA begins the phase-in exclusion period, after giving Ms. Tepper a 30-day notice to increase rent. PHA policy calls for a 50 percent exclusion during the phase-in period. Her income is the same.

1. Calculate her income during the phase-in exclusion period.

Earned Income Disallowance Calculation

(HCV: only for persons with disabilities)

This form applies to family members eligible for EID on or after 5/9/16.

Family Name _____

Family Member _____

- How much is the EID family member's pre-qualifying (baseline) income? (ALL income of EID family member, including asset income, prior to qualifying event):

--

Step 1: Calculate the full exclusion amount

A1. Enter EARNED income of EID family member	\$	
A2: Earned income, if any, included in pre-qualifying income		
A3: Increase in earned income (A1 – A2). If 0 or negative, STOP. Do not exclude any earned income.		
B. Enter other income of EID family member (including income from assets)		
C. Total annual income of EID family member (A1 + B)		
D. Enter pre-qualifying income (baseline)	\$	
E. Full exclusion (C minus D, but no more than A3). If amount exceeds A3, enter amount from A3. (First 12-months)	= \$	
F. Enter percentage excluded for the second 12-month period per PHA policy		
G. Calculate exclusion for second 12-month period (E x F)	= \$	

Step 2: Determine EID family member's wages after exclusion

H. Enter EID family member's earnings (HUD 50058, 7d):	\$	
I. Enter exclusion from E or G, as applicable (HUD 50058, 7e):	\$	
J. EID family member's earned income after exclusions (HUD 50058, 7f): (H minus I)	= \$	

HUD Form 50058

7a. Family member name	No.	7b. Income Code	7c. Calculation (PHA use)	7d. Dollars per year	7e. Income exclusions	7f. Income after exclusions (7d minus 7e)
7g. Column total						

Part 3

- On 10/1/19, Ms. Tepper reports that she has been promoted to a print shop supervisor, earning \$16,320 annually. The PHA gives 30-day notice to increase rent.

1. Calculate Ms. Tepper's earned income disallowance effective 12/1/19.

Earned Income Disallowance Calculation

(HCV: only for persons with disabilities)

This form applies to family members eligible for EID on or after 5/9/16.

Family Name _____

Family Member _____

- How much is the EID family member's pre-qualifying (baseline) income? (ALL income of EID family member, including asset income, prior to qualifying event):

--

Step 1: Calculate the full exclusion amount

A1. Enter EARNED income of EID family member	\$	
A2: Earned income, if any, included in pre-qualifying income		
A3: Increase in earned income (A1 – A2). If 0 or negative, STOP. Do not exclude any earned income.		
B. Enter other income of EID family member (including income from assets)		
C. Total annual income of EID family member (A1 + B)		
D. Enter pre-qualifying income (baseline)	\$	
E. Full exclusion (C minus D, but no more than A3). If amount exceeds A3, enter amount from A3. (First 12-months)	= \$	
F. Enter percentage excluded for the second 12-month period per PHA policy		
G. Calculate exclusion for second 12-month period (E x F)	= \$	

Step 2: Determine EID family member's wages after exclusion

H. Enter EID family member's earnings (HUD 50058, 7d):	\$	
I. Enter exclusion from E or G, as applicable (HUD 50058, 7e):	\$	
J. EID family member's earned income after exclusions (HUD 50058, 7f): (H minus I)	= \$	

HUD Form 50058

7a. Family member name	No.	7b. Income Code	7c. Calculation (PHA use)	7d. Dollars per year	7e. Income exclusions	7f. Income after exclusions (7d minus 7e)
7g. Column total						

Learning Activity 7-6: EID Calculation – Chappel Family

Task

- Cliff Chappel was unemployed for five months, receiving unemployment insurance benefits (UIB) of \$688 monthly, reflected on his most recent 50058. In October 2018, he reported that while finishing his electrician apprenticeship he began earning \$1,055 monthly. UIB ends.
 1. Mr. Chappel's baseline or prequalifying income was:

 2. His earned income disallowance begins on:

 3. Mr. Chappel continues in the job. His phase-in exclusion period begins on:

- On January 12, 2020, he reports to the PHA that he has been promoted to journeyman electrician and now earns \$2,075 monthly. The PHA has chosen to use 50 percent for the phase-in exclusion. The PHA gives proper notice to increase rent. Calculate his income.

Earned Income Disallowance Calculation

(HCV: only for persons with disabilities)

This form applies to family members eligible for EID on or after 5/9/16.

Family Name _____

Family Member _____

- How much is the EID family member's pre-qualifying (baseline) income?
(ALL income of EID family member, including asset income, prior to
qualifying event):

--

Step 1: Calculate the full exclusion amount

A1. Enter EARNED income of EID family member	\$	
A2: Earned income, if any, included in pre-qualifying income		
A3: Increase in earned income (A1 – A2). If 0 or negative, STOP. Do not exclude any earned income.		
B. Enter other income of EID family member (including income from assets)		
C. Total annual income of EID family member (A1 + B)		
D. Enter pre-qualifying income (baseline)	\$	
E. Full exclusion (C minus D, but no more than A3). If amount exceeds A3, enter amount from A3. (First 12 months)	= \$	
F. Enter percentage excluded for the second 12-month period per PHA policy		
G. Calculate exclusion for second 12-month period (E x F)	= \$	

Step 2: Determine EID family member's wages after exclusion

H. Enter EID family member's earnings (HUD 50058, 7d):	\$	
I. Enter exclusion from E or G, as applicable (HUD 50058, 7e):	\$	
J. EID family member's earned income after exclusions (HUD 50058, 7f): (H minus I)	= \$	

HUD Form 50058

7a. Family member name	No.	7b. Income Code	7c. Calculation (PHA use)	7d. Dollars per year	7e. Income exclusions	7f. Income after exclusions (7d minus 7e)
7g. Column total						

Learning Activity 7-7: Earned Income Disallowance and Childcare

- It is May 10, 2018. Paul Holiday, a public housing tenant, reports to you that he is working full-time, making \$8.00 per hour. He also pays \$4,000 in child care.
- You have just been hired to work at this PHA. You look in the file and see the following documentation:
- This family consists of William Holiday, aged 63, his adult son Paul, and Paul's eight-year-old son, Danny. William, the head of household, receives \$1,000 per month in pension income.
- Paul received TANF of \$300 monthly until July 29, 2017, when he became employed part-time, working 20 hours a week and earning \$7.25 per hour. He became qualified for the earned income disallowance.

Task

- Complete Sections 7 and 8 of the HUD-50058 on the following pages for the interim examination effective June 1, 2018.

Interim Full Exclusion (Paul Holiday) – Interim

Head of household name Holiday	Social Security Number	Date modified (mm/dd/yyyy)
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6. Assets

6a. Family member name	No.	6b. Type of asset	6c. Calculation (PHA use)	6d. Cash value of asset	6e. Anticipated Income
				\$	\$
				\$	\$
				\$	\$
				\$	\$
				\$	\$
				\$	\$
				\$	\$
				\$	\$
6f, 6g. Column totals				\$	6g. \$
6h. Passbook rate (written as decimal)					0. _____ 6h.
6i. Imputed asset income: 6f X 6h (if 6f is \$5,000 or less, put 0)					\$ 6i.
6j. Final asset income: larger of 6g or 6i					\$ 6j.

7. Income

7a. Family member name	No.	7b. Income Code	7c. Calculation (PHA use)	7d. Dollars per year	7e. Income exclusions	7f. Income after exclusions (7d minus 7e)
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
7g. Column total						\$ 7g.
7h. Reserved						
7i. Total annual income: 6j + 7g						\$ 7i.

7b: Income Codes Wages: B = own business F = federal wage HA = PHA wage M = military pay W = other wage	Welfare: G = general assistance IW = annual imputed welfare income T = TANF assistance SS/SSI/Pensions: P = pension S = SSI SS = Social Security	Other Income Sources: C = child support E = medical reimbursement I = Indian trust/per capita N = other nonwage sources U = unemployment benefits
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Head of household name Holiday	Social Security Number	Date modified (mm/dd/yyyy)
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8. Expected Income Per Year

8a. Total annual income: copy from 7i	\$	8a.
Permissible Deductions (Public Housing Only. If Section 8, Skip to 8f or 8q)		
8b. Family member name	No.	8c. Type of permissible deduction
		8d. Amount
		\$
		\$
		\$
		\$
		\$
		\$
8e. Total permissible deductions (sum of column 8d)	\$	8e.
If head/spouse/co-head is under 62 and no family member is disabled, skip to 8q		
8f. Medical/disability threshold: 8a X 0.03	\$	8f.
8g. Total annual unreimbursed disability assistance expense (if no disability expenses, skip to 8k)	\$	8g.
8h. Maximum disability allowance: If 8g minus 8f is positive or zero, put amount	\$	8h.
	If negative and head/spouse/co-head is under 62 and not disabled, put 0	\$ 8h.
	If negative and head/spouse/co-head is elderly or disabled, copy from 8g	\$ 8h.
8i. Earnings in 7d made possible by disability assistance expense	\$	8i.
8j. Allowable disability assistance expense: lower of 8h or 8i (if 8g is less than 8f and head/spouse/co-head elderly or disabled, copy from 8h)	\$	8j.
8k. Total annual unreimbursed medical expenses (if head/spouse/co-head under 62 and not disabled, put 0)	\$	8k.
8m. Total annual disability assistance and medical expense: 8j + 8k (if no disability expenses, copy from 8k)	\$	8m.
8n. Medical/disability assistance allowance:	If no disability assistance expenses or if 8g is less than 8f, put 8m minus 8f (if 8m minus 8f is negative, put zero)	\$ 8n.
	If disability assistance expenses and 8g is greater than or equal to 8f, copy from 8m	\$ 8n.
8p. Elderly/disability allowance (default = \$400)	\$	8p.
8q. Number of dependents (people under 18, or with disability, or full-time student. Do not count head of household, spouse, co-head, foster child/adult, or live-in aide.)	\$	8q.
8r. Allowance per dependent (default = \$480)	\$	8r.
8s. Dependent allowance: 8q X 8r	\$	8s.
8t. Total annual unreimbursed childcare costs	\$	8t.
8x. Total allowances: 8e + 8n + 8p + 8s + 8t	\$	8x.
8y. Adjusted annual income: 8a minus 8x (if 8x is larger, put 0)	\$	8y.

Notes

Case Studies

CASE STUDY #1: INITIAL CERTIFICATION

Mr. and Mrs. Yu are in the lease-up process with Anytown Housing Authority. Mr. Yu receives \$630 a month SSI. Mrs. Yu pays \$40 biweekly for medical prescriptions. They are paying off an old hospital bill at \$30 a month. They have a savings account of \$3,000, which is expected to earn \$180 in interest. The family chooses income-based rent. After review of the tenant file, staff also knows the following:

Family Member	Name	Age	Disabled	SS#
Head	Ben Yu	67	Y	150-40-3226
Spouse	Helen Yu	63	N	148-32-6032

Citizenship status:	All family members are eligible citizens
PHA's minimum TTP:	\$25
Flat rent	\$400
Utility allowance:	\$55
PHA passbook rate:	0.75%

Head of household name Yu	Social Security Number	Date modified (mm/dd/yyyy)
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6. Assets

6a. Family member name	No.	6b. Type of asset	6c. Calculation (PHA use)	6d. Cash value of asset	6e. Anticipated Income
				\$	\$
				\$	\$
				\$	\$
				\$	\$
				\$	\$
				\$	\$
				\$	\$
				\$	\$
6f, 6g. Column totals				\$	6g. \$
6h. Passbook rate (written as decimal)					6h. 0. _____
6i. Imputed asset income: 6f X 6h (if 6f is \$5,000 or less, put 0)				\$	6i. \$
6j. Final asset income: larger of 6g or 6i				\$	6j. \$

7. Income

7a. Family member name	No.	7b. Income Code	7c. Calculation (PHA use)	7d. Dollars per year	7e. Income exclusions	7f. Income after exclusions (7d minus 7e)
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
7g. Column total						7g. \$
7h. Reserved						
7i. Total annual income: 6j + 7g						7i. \$

7b: Income Codes Wages: B = own business F = federal wage HA = PHA wage M = military pay W = other wage	Welfare: G = general assistance IW = annual imputed welfare income T = TANF assistance SS/SSI/Pensions: P = pension S = SSI SS = Social Security	Other Income Sources: C = child support E = medical reimbursement I = Indian trust/per capita N = other nonwage sources U = unemployment benefits
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Head of household name Yu	Social Security Number	Date modified (mm/dd/yyyy)
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8. Expected Income Per Year

8a.	Total annual income: copy from 7i	\$	8a.	
Permissible Deductions (Public Housing Only. If Section 8, Skip to 8f or 8q)				
8b.	Family member name	No.	8c. Type of permissible deduction	8d. Amount
				\$
				\$
				\$
				\$
				\$
				\$
8e.	Total permissible deductions (sum of column 8d)			\$ 8e.
If head/spouse/co-head is under 62 and no family member is disabled, skip to 8q				
8f.	Medical/disability threshold: 8a X 0.03			\$ 8f.
8g.	Total annual unreimbursed disability assistance expense (if no disability expenses, skip to 8k)			\$ 8g.
8h.	Maximum disability allowance: If 8g minus 8f is positive or zero, put amount			\$ 8h.
	If negative and head/spouse/co-head is under 62 and not disabled, put 0			\$ 8h.
	If negative and head/spouse/co-head is elderly or disabled, copy from 8g			\$ 8h.
8i.	Earnings in 7d made possible by disability assistance expense			\$ 8i.
8j.	Allowable disability assistance expense: lower of 8h or 8i (if 8g is less than 8f and head/spouse/co-head elderly or disabled, copy from 8h)			\$ 8j.
8k.	Total annual unreimbursed medical expenses (if head/spouse/co-head under 62 and not disabled, put 0)			\$ 8k.
8m.	Total annual disability assistance and medical expense: 8j + 8k (if no disability expenses, copy from 8k)			\$ 8m.
8n.	Medical/disability assistance allowance:	If no disability assistance expenses or if 8g is less than 8f, put 8m minus 8f (if 8m minus 8f is negative, put zero)		\$ 8n.
		If disability assistance expenses and 8g is greater than or equal to 8f, copy from 8m		\$ 8n.
8p.	Elderly/disability allowance (default = \$400)			\$ 8p.
8q.	Number of dependents (people under 18, or with disability, or full-time student. Do not count head of household, spouse, co-head, foster child/adult, or live-in aide.)			\$ 8q.
8r.	Allowance per dependent (default = \$480)			\$ 8r.
8s.	Dependent allowance: 8q X 8r			\$ 8s.
8t.	Total annual unreimbursed childcare costs			\$ 8t.
8x.	Total allowances: 8e + 8n + 8p + 8s + 8t			\$ 8x.
8y.	Adjusted annual income: 8a minus 8x (if 8x is larger, put 0)			\$ 8y.

Head of household name	Yu	Social Security Number	Date modified (mm/dd/yyyy)
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9. Total Tenant Payment (TTP)

9a.	Total monthly income: $8a \div 12$	\$	9a.
9c.	TTP if based on annual income: $9a \times 0.10$	\$	9c.
9d.	Adjusted monthly income: $8y \div 12$	\$	9d.
9e.	Percentage of adjusted monthly income: use 30% for Section 8		9e.
9f.	TTP if based on adjusted annual income: $(9d \times 9e) \div 100$	\$	9f.
9g.	Welfare rent per month (if none, put 0)	\$	9g.
9h.	Minimum rent (if waived, put 0)	\$	9h.
9i.	Enhanced Voucher minimum rent	\$	9i.
9j.	TTP, highest of lines 9c, 9f, 9g, 9h, or 9i	\$	9j.
9k.	Most recent TTP	\$	9k.
9m.	Qualify for minimum rent hardship exemption? (Y or N)	\$	9m.

Head of household name	Yu	Social Security Number	Date modified (mm/dd/yyyy)
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10. Public Housing and Turnkey III

10a.	TTP: copy from 9j	\$	10a.
10b.	Unit's flat rent (see Instruction Booklet for prorated flat rent calculation)	\$	10b.

Income Based Rent Calculation (if prorated rent, skip to 10h)

10c.	Income based ceiling rent, if any	\$	10c.
10d.	Lower of TTP or income based ceiling rent (if no income based ceiling rent, put 10a)	\$	10d.
10e.	Utility allowance, if any	\$	10e.
10f.	Tenant rent: 10d minus 10e	If positive or 0, put tenant rent	\$ 10f.
		If negative, credit tenant	\$ 10f.

Income Based Prorated Rent Calculation (if not prorated, skip to 10u)

10h.	Public Housing maximum rent	\$	10h.
10i.	Family maximum subsidy: 10h minus 10a	\$	10i.
10j.	Total number eligible		10j.
10k.	Total number in family		10k.
10n.	Eligible subsidy (10i ÷ 10k) X 10j	\$	10n.
10p.	Mixed family TTP: 10h minus 10n	\$	10p.
10r.	Utility allowance, if any	\$	10r.
10s.	Mixed family tenant rent: 10p minus 10r	If positive or 0, put tenant rent	\$ 10s.
		If negative, credit tenant	\$ 10s.

Type of Rent

10u.	Type of rent selected:	<input type="checkbox"/> Income based	<input type="checkbox"/> Flat
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Head of household name Yu	Social Security Number	Date modified (mm/dd/yyyy)
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6. Assets

6a. Family member name	No.	6b. Type of asset	6c. Calculation (PHA use)	6d. Cash value of asset	6e. Anticipated Income
Ben	1	Savings		\$ 3,000	\$ 180
				\$	\$
				\$	\$
				\$	\$
				\$	\$
				\$	\$
				\$	\$
				\$	\$
6f, 6g. Column totals				\$ 3,000	\$ 180
6h. Passbook rate (written as decimal)					0.0075
6i. Imputed asset income: 6f X 6h (if 6f is \$5,000 or less, put 0)					\$ 0
6j. Final asset income: larger of 6g or 6i					\$ 180

7. Income

7a. Family member name	No.	7b. Income Code	7c. Calculation (PHA use)	7d. Dollars per year	7e. Income exclusions	7f. Income after exclusions (7d minus 7e)
Ben	1	S	630 x 12	\$ 7,560		\$ 7,560
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
7g. Column total						\$ 7,560
7h. Reserved						
7i. Total annual income: 6j + 7g						\$ 7,740

7b: Income Codes Wages: B = own business F = federal wage HA = PHA wage M = military pay W = other wage	Welfare: G = general assistance IW = annual imputed welfare income T = TANF assistance SS/SSI/Pensions: P = pension S = SSI SS = Social Security	Other Income Sources: C = child support E = medical reimbursement I = Indian trust/per capita N = other nonwage sources U = unemployment benefits
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Head of household name	Yu	Social Security Number	Date modified (mm/dd/yyyy)
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8. Expected Income Per Year

8a.	Total annual income: copy from 7i	\$	7,740	8a.
Permissible Deductions (Public Housing Only. If Section 8, Skip to 8f or 8q)				
8b.	Family member name	No.	8c. Type of permissible deduction	8d. Amount
				\$
				\$
				\$
				\$
				\$
				\$
8e.	Total permissible deductions (sum of column 8d)			\$ 8e.
If head/spouse/co-head is under 62 and no family member is disabled, skip to 8q				
8f.	Medical/disability threshold: 8a X 0.03			\$ 232 8f.
8g.	Total annual unreimbursed disability assistance expense (if no disability expenses, skip to 8k)			\$ 8g.
8h.	Maximum disability allowance: If 8g minus 8f is positive or zero, put amount			\$ 8h.
	If negative and head/spouse/co-head is under 62 and not disabled, put 0			\$ 8h.
	If negative and head/spouse/co-head is elderly or disabled, copy from 8g			\$ 8h.
8i.	Earnings in 7d made possible by disability assistance expense			\$ 8i.
8j.	Allowable disability assistance expense: lower of 8h or 8i (if 8g is less than 8f and head/spouse/co-head elderly or disabled, copy from 8h)			\$ 8j.
8k.	Total annual unreimbursed medical expenses (if head/spouse/co-head under 62 and not disabled, put 0)			\$ 1,400 8k.
8m.	Total annual disability assistance and medical expense: 8j + 8k (if no disability expenses, copy from 8k)			\$ 1,400 8m.
8n.	Medical/disability assistance allowance:	If no disability assistance expenses or if 8g is less than 8f, put 8m minus 8f (if 8m minus 8f is negative, put zero)		\$ 1,168 8n.
		If disability assistance expenses and 8g is greater than or equal to 8f, copy from 8m		\$ 8n.
8p.	Elderly/disability allowance (default = \$400)			\$ 400 8p.
8q.	Number of dependents (people under 18, or with disability, or full-time student. Do not count head of household, spouse, co-head, foster child/adult, or live-in aide.)			\$ 8q.
8r.	Allowance per dependent (default = \$480)			\$ 8r.
8s.	Dependent allowance: 8q X 8r			\$ 8s.
8t.	Total annual unreimbursed childcare costs			\$ 8t.
8x.	Total allowances: 8e + 8n + 8p + 8s + 8t			\$ 1,568 8x.
8y.	Adjusted annual income: 8a minus 8x (if 8x is larger, put 0)			\$ 6,172 8y.

Head of household name	Yu	Social Security Number	Date modified (mm/dd/yyyy)
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9. Total Tenant Payment (TTP)

9a.	Total monthly income: $8a \div 12$	\$	645	9a.
9c.	TTP if based on annual income: $9a \times 0.10$	\$	65	9c.
9d.	Adjusted monthly income: $8y \div 12$	\$	514	9d.
9e.	Percentage of adjusted monthly income: use 30% for Section 8		30	9e.
9f.	TTP if based on adjusted annual income: $(9d \times 9e) \div 100$	\$	154	9f.
9g.	Welfare rent per month (if none, put 0)	\$	0	9g.
9h.	Minimum rent (if waived, put 0)	\$	25	9h.
9i.	Enhanced Voucher minimum rent	\$		9i.
9j.	TTP, highest of lines 9c, 9f, 9g, 9h, or 9i	\$	154	9j.
9k.	Most recent TTP	\$		9k.
9m.	Qualify for minimum rent hardship exemption? (Y or N)	\$		9m.

Head of household name Yu	Social Security Number	Date modified (mm/dd/yyyy)
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10. Public Housing and Turnkey III

10a. TTP: copy from 9j	\$	154	10a.
10b. Unit's flat rent (see Instruction Booklet for prorated flat rent calculation)	\$	400	10b.

Income Based Rent Calculation (if prorated rent, skip to 10h)

10c.	Income based ceiling rent, if any		\$	10c.
10d.	Lower of TTP or income based ceiling rent (if no income based ceiling rent, put 10a)		\$	154 10d.
10e.	Utility allowance, if any		\$	55 10e.
10f.	Tenant rent: 10d minus 10e	If positive or 0, put tenant rent	\$	99 10f.
		If negative, credit tenant	\$	10f.

Income Based Prorated Rent Calculation (if not prorated, skip to 10u)

10h.	Public Housing maximum rent		\$	10h.
10i.	Family maximum subsidy: 10h minus 10a		\$	10i.
10j.	Total number eligible			10j.
10k.	Total number in family			10k.
10n.	Eligible subsidy (10i ÷ 10k) X 10j		\$	10n.
10p.	Mixed family TTP: 10h minus 10n		\$	10p.
10r.	Utility allowance, if any		\$	10r.
10s.	Mixed family tenant rent: 10p minus 10r	If positive or 0, put tenant rent	\$	10s.
		If negative, credit tenant	\$	10s.

Type of Rent

10u. Type of rent selected:	<input checked="" type="checkbox"/> Income based	<input type="checkbox"/> Flat
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CASE STUDY #2: RECERTIFICATION

Francine Evans is divorced with two children. Happy Hills Housing Authority is conducting her annual recertification. It has been verified that she receives \$250 per month child support. She earns wages of \$410, bi-weekly. The children require braces which will cost \$3,000. Francine's insurance will pay 80 percent and she will pay 20 percent. The Evans' occupy a three-bedroom unit. The Utility Allowance is \$85. Ms. Evans chooses to pay income-based rent. After review of the tenant file, staff also knows the following:

Family Member	Name	Age	Disabled	SS#
Head	Francine Evans	45	N	310-46-1240
Son	Ron Evans	11	N	213-52-1332
Daughter	Carla Evans	9	N	213-74-5321

Citizenship status:	All family members are eligible citizens
PHA's minimum TTP:	\$25
Flat rent	\$620

Head of household name	Evans	Social Security Number	Date modified (mm/dd/yyyy)
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6. Assets

6a. Family member name	No.	6b. Type of asset	6c. Calculation (PHA use)	6d. Cash value of asset	6e. Anticipated Income
				\$	\$
				\$	\$
				\$	\$
				\$	\$
				\$	\$
				\$	\$
				\$	\$
				\$	\$
6f, 6g. Column totals				\$	6g. \$
6h. Passbook rate (written as decimal)					0. _____ 6h.
6i. Imputed asset income: 6f X 6h (if 6f is \$5,000 or less, put 0)					\$ 6i.
6j. Final asset income: larger of 6g or 6i					\$ 6j.

7. Income

7a. Family member name	No.	7b. Income Code	7c. Calculation (PHA use)	7d. Dollars per year	7e. Income exclusions	7f. Income after exclusions (7d minus 7e)
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
7g. Column total						\$ 7g.
7h. Reserved						
7i. Total annual income: 6j + 7g						\$ 7i.

7b: Income Codes Wages: B = own business F = federal wage HA = PHA wage M = military pay W = other wage	Welfare: G = general assistance IW = annual imputed welfare income T = TANF assistance SS/SSI/Pensions: P = pension S = SSI SS = Social Security	Other Income Sources: C = child support E = medical reimbursement I = Indian trust/per capita N = other nonwage sources U = unemployment benefits
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Head of household name	Evans	Social Security Number	Date modified (mm/dd/yyyy)
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8. Expected Income Per Year

8a.	Total annual income: copy from 7i	\$	8a.	
Permissible Deductions (Public Housing Only. If Section 8, Skip to 8f or 8q)				
8b.	Family member name	No.	8c. Type of permissible deduction	8d. Amount
				\$
				\$
				\$
				\$
				\$
				\$
8e.	Total permissible deductions (sum of column 8d)			\$ 8e.
If head/spouse/co-head is under 62 and no family member is disabled, skip to 8q				
8f.	Medical/disability threshold: 8a X 0.03			\$ 8f.
8g.	Total annual unreimbursed disability assistance expense (if no disability expenses, skip to 8k)			\$ 8g.
8h.	Maximum disability allowance: If 8g minus 8f is positive or zero, put amount			\$ 8h.
	If negative and head/spouse/co-head is under 62 and not disabled, put 0			\$ 8h.
	If negative and head/spouse/co-head is elderly or disabled, copy from 8g			\$ 8h.
8i.	Earnings in 7d made possible by disability assistance expense			\$ 8i.
8j.	Allowable disability assistance expense: lower of 8h or 8i (if 8g is less than 8f and head/spouse/co-head elderly or disabled, copy from 8h)			\$ 8j.
8k.	Total annual unreimbursed medical expenses (if head/spouse/co-head under 62 and not disabled, put 0)			\$ 8k.
8m.	Total annual disability assistance and medical expense: 8j + 8k (if no disability expenses, copy from 8k)			\$ 8m.
8n.	Medical/disability assistance allowance:	If no disability assistance expenses or if 8g is less than 8f, put 8m minus 8f (if 8m minus 8f is negative, put zero)		\$ 8n.
		If disability assistance expenses and 8g is greater than or equal to 8f, copy from 8m		\$ 8n.
8p.	Elderly/disability allowance (default = \$400)			\$ 8p.
8q.	Number of dependents (people under 18, or with disability, or full-time student. Do not count head of household, spouse, co-head, foster child/adult, or live-in aide.)			\$ 8q.
8r.	Allowance per dependent (default = \$480)			\$ 8r.
8s.	Dependent allowance: 8q X 8r			\$ 8s.
8t.	Total annual unreimbursed childcare costs			\$ 8t.
8x.	Total allowances: 8e + 8n + 8p + 8s + 8t			\$ 8x.
8y.	Adjusted annual income: 8a minus 8x (if 8x is larger, put 0)			\$ 8y.

Head of household name	Evans	Social Security Number	Date modified (mm/dd/yyyy)
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9. Total Tenant Payment (TTP)

9a.	Total monthly income: $8a \div 12$	\$	9a.
9c.	TTP if based on annual income: $9a \times 0.10$	\$	9c.
9d.	Adjusted monthly income: $8y \div 12$	\$	9d.
9e.	Percentage of adjusted monthly income: use 30% for Section 8		9e.
9f.	TTP if based on adjusted annual income: $(9d \times 9e) \div 100$	\$	9f.
9g.	Welfare rent per month (if none, put 0)	\$	9g.
9h.	Minimum rent (if waived, put 0)	\$	9h.
9i.	Enhanced Voucher minimum rent	\$	9i.
9j.	TTP, highest of lines 9c, 9f, 9g, 9h, or 9i	\$	9j.
9k.	Most recent TTP	\$	9k.
9m.	Qualify for minimum rent hardship exemption? (Y or N)	\$	9m.

Head of household name	Evans	Social Security Number	Date modified (mm/dd/yyyy)
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10. Public Housing and Turnkey III

10a.	TTP: copy from 9j	\$	10a.
10b.	Unit's flat rent (see Instruction Booklet for prorated flat rent calculation)	\$	10b.

Income Based Rent Calculation (if prorated rent, skip to 10h)

10c.	Income based ceiling rent, if any	\$	10c.
10d.	Lower of TTP or income based ceiling rent (if no income based ceiling rent, put 10a)	\$	10d.
10e.	Utility allowance, if any	\$	10e.
10f.	Tenant rent: 10d minus 10e	If positive or 0, put tenant rent	\$ 10f.
		If negative, credit tenant	\$ 10f.

Income Based Prorated Rent Calculation (if not prorated, skip to 10u)

10h.	Public Housing maximum rent	\$	10h.
10i.	Family maximum subsidy: 10h minus 10a	\$	10i.
10j.	Total number eligible		10j.
10k.	Total number in family		10k.
10n.	Eligible subsidy (10i ÷ 10k) X 10j	\$	10n.
10p.	Mixed family TTP: 10h minus 10n	\$	10p.
10r.	Utility allowance, if any	\$	10r.
10s.	Mixed family tenant rent: 10p minus 10r	If positive or 0, put tenant rent	\$ 10s.
		If negative, credit tenant	\$ 10s.

Type of Rent

10u.	Type of rent selected:	<input type="checkbox"/> Income based	<input type="checkbox"/> Flat
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Head of household name Evans	Social Security Number	Date modified (mm/dd/yyyy)
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6. Assets

6a. Family member name	No.	6b. Type of asset	6c. Calculation (PHA use)	6d. Cash value of asset	6e. Anticipated Income
				\$	\$
				\$	\$
				\$	\$
				\$	\$
				\$	\$
				\$	\$
				\$	\$
				\$	\$
6f, 6g. Column totals				\$	6g. \$
6h. Passbook rate (written as decimal)					6h. 0. _____
6i. Imputed asset income: 6f X 6h (if 6f is \$5,000 or less, put 0)					6i. \$
6j. Final asset income: larger of 6g or 6i					6j. \$

7. Income

7a. Family member name	No.	7b. Income Code	7c. Calculation (PHA use)	7d. Dollars per year	7e. Income exclusions	7f. Income after exclusions (7d minus 7e)
Francine	1	W	410 x 26	\$ 10,660	\$	\$ 10,660
Francine	1	C	250 x 12	\$ 3,000	\$	\$ 3,000
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
7g. Column total						\$ 13,660 7g.
7h. Reserved						
7i. Total annual income: 6j + 7g						\$ 13,660 7i.

7b: Income Codes Wages: B = own business F = federal wage HA = PHA wage M = military pay W = other wage	Welfare: G = general assistance IW = annual imputed welfare income T = TANF assistance SS/SSI/Pensions: P = pension S = SSI SS = Social Security	Other Income Sources: C = child support E = medical reimbursement I = Indian trust/per capita N = other nonwage sources U = unemployment benefits
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Head of household name	Evans	Social Security Number	Date modified (mm/dd/yyyy)
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8. Expected Income Per Year

8a.	Total annual income: copy from 7i	\$	13,660	8a.
Permissible Deductions (Public Housing Only. If Section 8, Skip to 8f or 8q)				
8b.	Family member name	No.	8c. Type of permissible deduction	8d. Amount
				\$
				\$
				\$
				\$
				\$
				\$
8e.	Total permissible deductions (sum of column 8d)			\$ 8e.
If head/spouse/co-head is under 62 and no family member is disabled, skip to 8q				
8f.	Medical/disability threshold: 8a X 0.03			\$ 8f.
8g.	Total annual unreimbursed disability assistance expense (if no disability expenses, skip to 8k)			\$ 8g.
8h.	Maximum disability allowance: If 8g minus 8f is positive or zero, put amount			\$ 8h.
	If negative and head/spouse/co-head is under 62 and not disabled, put 0			\$ 8h.
	If negative and head/spouse/co-head is elderly or disabled, copy from 8g			\$ 8h.
8i.	Earnings in 7d made possible by disability assistance expense			\$ 8i.
8j.	Allowable disability assistance expense: lower of 8h or 8i (if 8g is less than 8f and head/spouse/co-head elderly or disabled, copy from 8h)			\$ 8j.
8k.	Total annual unreimbursed medical expenses (if head/spouse/co-head under 62 and not disabled, put 0)			\$ 8k.
8m.	Total annual disability assistance and medical expense: 8j + 8k (if no disability expenses, copy from 8k)			\$ 8m.
8n.	Medical/disability assistance allowance:	If no disability assistance expenses or if 8g is less than 8f, put 8m minus 8f (if 8m minus 8f is negative, put zero)		\$ 8n.
		If disability assistance expenses and 8g is greater than or equal to 8f, copy from 8m		\$ 8n.
8p.	Elderly/disability allowance (default = \$400)			\$ 8p.
8q.	Number of dependents (people under 18, or with disability, or full-time student. Do not count head of household, spouse, co-head, foster child/adult, or live-in aide.)			\$ 2 8q.
8r.	Allowance per dependent (default = \$480)			\$ 480 8r.
8s.	Dependent allowance: 8q X 8r			\$ 960 8s.
8t.	Total annual unreimbursed childcare costs			\$ 8t.
8x.	Total allowances: 8e + 8n + 8p + 8s + 8t			\$ 960 8x.
8y.	Adjusted annual income: 8a minus 8x (if 8x is larger, put 0)			\$ 12,700 8y.

Head of household name	Evans	Social Security Number	Date modified (mm/dd/yyyy)
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9. Total Tenant Payment (TTP)

9a.	Total monthly income: $8a \div 12$	\$	1,138	9a.
9c.	TTP if based on annual income: $9a \times 0.10$	\$	114	9c.
9d.	Adjusted monthly income: $8y \div 12$	\$	1,058	9d.
9e.	Percentage of adjusted monthly income: use 30% for Section 8		30	9e.
9f.	TTP if based on adjusted annual income: $(9d \times 9e) \div 100$	\$	317	9f.
9g.	Welfare rent per month (if none, put 0)	\$	0	9g.
9h.	Minimum rent (if waived, put 0)	\$	25	9h.
9i.	Enhanced Voucher minimum rent	\$		9i.
9j.	TTP, highest of lines 9c, 9f, 9g, 9h, or 9i	\$	317	9j.
9k.	Most recent TTP	\$		9k.
9m.	Qualify for minimum rent hardship exemption? (Y or N)	\$		9m.

Head of household name	Evans	Social Security Number	Date modified (mm/dd/yyyy)
------------------------	--------------	------------------------	----------------------------

10. Public Housing and Turnkey III

10a.	TTP: copy from 9j	\$	317	10a.
10b.	Unit's flat rent (see Instruction Booklet for prorated flat rent calculation)	\$	620	10b.

Income Based Rent Calculation (if prorated rent, skip to 10h)

10c.	Income based ceiling rent, if any		\$	10c.
10d.	Lower of TTP or income based ceiling rent (if no income based ceiling rent, put 10a)		\$	317 10d.
10e.	Utility allowance, if any		\$	85 10e.
10f.	Tenant rent: 10d minus 10e	If positive or 0, put tenant rent	\$	232 10f.
		If negative, credit tenant	\$	10f.

Income Based Prorated Rent Calculation (if not prorated, skip to 10u)

10h.	Public Housing maximum rent		\$	10h.
10i.	Family maximum subsidy: 10h minus 10a		\$	10i.
10j.	Total number eligible			10j.
10k.	Total number in family			10k.
10n.	Eligible subsidy (10i ÷ 10k) X 10j		\$	10n.
10p.	Mixed family TTP: 10h minus 10n		\$	10p.
10r.	Utility allowance, if any		\$	10r.
10s.	Mixed family tenant rent: 10p minus 10r	If positive or 0, put tenant rent	\$	10s.
		If negative, credit tenant	\$	10s.

Type of Rent

10u.	Type of rent selected:	<input checked="" type="checkbox"/> Income based	<input type="checkbox"/> Flat
------	------------------------	--	-------------------------------

POST-TEST FOR UNIT 7

1. The form HUD 50058 must be submitted when?
 - a. New admissions
 - b. Annual and interim reexamination
 - c. End of participation
 - d. All of the above
2. What is TTP and how do you calculate it?

3. If the tenant's utility allowance is greater than the TTP, the amount by which the utility allowance exceeds the TTP is paid to the family or the utility company.
 - a. True
 - b. False
4. PHAs must charge a minimum rent to everyone.
 - a. True
 - b. False
5. TTP and tenant rent calculations are worked on the HUD 50058 form.
 - a. True
 - b. False
6. Maggie Smith is on TANF, getting \$360 per month. On May 10, 2018, she reports to the PHA that she is working, earning \$650 per month. TANF benefits stop. On August 3, 2019, Maggie gets a promotion and earns \$1000 per month. Assume the PHA policy is to use a 50 percent phase-in. During the phase-in exclusion period, how much of Ms. Smith's income would be counted?
 - a. \$8,160
 - b. \$1,660
 - c. \$4,320
 - d. \$12,000
 - e. \$9,350

7. Joe Billings is on TANF, getting \$420 per month. On August 16, 2018, he begins working, earning \$1,300 per month. TANF benefits stop. Joe works for four months and then is laid off until March 20, 2019, when he is hired at another job and earns \$1,400 per month. Calculate Joe's countable annual income under EID effective September 1, 2019. Assume the PHA policy is to use a 50 percent phase-in.
 - a. \$11,760
 - b. \$10,560
 - c. \$10,920
 - d. \$5,880
 - e. \$5,040
8. The PHA is conducting the annual reexamination for Betty Clark. The PHA's minimum rent is \$50. Thirty percent of the family's monthly adjusted income is \$47. Ten percent of the family's total monthly income is \$39. The PHA charges the family the minimum rent of \$50, and the family requests, is qualified for, and is granted the minimum rent hardship exemption. The Clark family's TTP is now:
 - a. \$39
 - b. \$47
 - c. \$50
 - d. zero

Earned Income Disallowance Calculation

(HCV: only for persons with disabilities)

This form applies to family members eligible for EID on or after 5/9/16.

Family Name Smith

Family Member Maggie Smith

- How much is the EID family member's pre-qualifying (baseline) income?
(ALL income of EID family member, including asset income, prior to
qualifying event):

Step 1: Calculate the full exclusion amount

A1. Enter EARNED income of EID family member	\$	
A2: Earned income, if any, included in pre-qualifying income		
A3: Increase in earned income (A1 – A2). If 0 or negative, STOP. Do not exclude any earned income.		
B. Enter other income of EID family member (including income from assets)		
C. Total annual income of EID family member (A1 + B)		
D. Enter pre-qualifying income (baseline)	\$	
E. Full exclusion (C minus D, but no more than A3). If amount exceeds A3, enter amount from A3. (First 12-months)	= \$	
F. Enter percentage excluded for the second 12-month period per PHA policy		
G. Calculate exclusion for second 12-month period (E x F)	= \$	

Step 2: Determine EID family member's wages after exclusion

H. Enter EID family member's earnings (HUD 50058, 7d):	\$	
I. Enter exclusion from E or G, as applicable (HUD 50058, 7e):	\$	
J. EID family member's earned income after exclusions (HUD 50058, 7f): (H minus I)	= \$	

HUD Form 50058

7a. Family member name	No.	7b. Income Code	7c. Calculation (PHA use)	7d. Dollars per year	7e. Income exclusions	7f. Income after exclusions (7d minus 7e)
7g. Column total						

Earned Income Disallowance Calculation

(HCV: only for persons with disabilities)

This form applies to family members eligible for EID on or after 5/9/16.

Family Name Billings**Family Member** Joe Billings

- How much is the EID family member's pre-qualifying (baseline) income? (ALL income of EID family member, including asset income, prior to qualifying event):

--

Step 1: Calculate the full exclusion amount

A1. Enter EARNED income of EID family member	\$	
A2: Earned income, if any, included in pre-qualifying income		
A3: Increase in earned income (A1 – A2). If 0 or negative, STOP. Do not exclude any earned income.		
B. Enter other income of EID family member (including income from assets)		
C. Total annual income of EID family member (A1 + B)		
D. Enter pre-qualifying income (baseline)	\$	
E. Full exclusion (C minus D, but no more than A3). If amount exceeds A3, = \$ enter amount from A3. (First 12-months)		
F. Enter percentage excluded for the second 12-month period per PHA policy		
G. Calculate exclusion for second 12-month period (E x F)	= \$	

Step 2: Determine EID family member's wages after exclusion

H. Enter EID family member's earnings (HUD 50058, 7d):	\$	
I. Enter exclusion from E or G, as applicable (HUD 50058, 7e):	\$	
J. EID family member's earned income after exclusions (HUD 50058, 7f): (H minus I)	= \$	

HUD Form 50058

7a. Family member name	No.	7b. Income Code	7c. Calculation (PHA use)	7d. Dollars per year	7e. Income exclusions	7f. Income after exclusions (7d minus 7e)
7g. Column total						

UNIT 8 Leasing

LEARNING OUTCOMES

- Upon completion of this chapter, you should be able to:
 - Conduct an effective resident orientation
 - Recognize the minimum HUD requirements for the public housing lease
 - Include the correct requirements for community service in the public housing lease
 - Use proper notification requirements when executing, changing, or terminating the lease

OVERVIEW OF LEASING PROCEDURES

- Once we have established final eligibility and have established that a vacancy exists, we contact the family to offer a unit.
- We have gone from intake cycle to beginning of occupancy cycle. Occupancy means to occupy. The occupancy cycle will encompass several activities which get the family off the waiting list into housing, which is their objective and ours.
- Families need housing; we need the units occupied. Under public housing, we are the landlord. We must operate under state/local landlord/tenant law, so we have to think through what our obligations are to each family. Additionally, we want to be clear about the tenant's obligations as lessee.
- We are currently operating in a climate where many people feel the term "tenant" is less than desirable. While "resident" is certainly politically correct, and we support the use of the term, when you are talking about the lease, which is a contract, the word "tenant" represents a legal relationship between the landlord and the tenant which both parties have agreed to. In discussing the lease, we will refer to residents as tenants, since this conveys a relationship by contract.
- The leasing process is the process of placing a family under contract.

Notes

- The lease is a contract. That contract is governed by state contract law and additional regulations, since a federal grant is picking up the tab.
 1. Leasing occurs after the family has been determined eligible for occupancy and has accepted the PHA's offer of a unit. The leasing appointment includes ensuring that the family has been informed of their obligations under the lease.
 2. We also must ensure that a PHA/family inspection of the unit occurs because one of the responsibilities of the family is to maintain the unit in the same or better condition than when the PHA made it available.

Therefore, if we are going to hold the family to that standard throughout tenancy, we need to have a record of the unit at move-in, because if tenant-caused damage occurs due to negligence or willful abuse, the PHA has the right to bill the family for the cost of the repairs.
 3. The third critical activity is the actual execution of the lease.
- All this occurs assuming the family has accepted the unit. We must tie the offer to a vacancy.
- If the PHA makes an offer of a unit consistent with the admissions and continued occupancy policy (ACOP), and the family rejects the offer, we should attempt to obtain a reason from them in writing. They would be treated in accordance with the ACOP if they are not willing to accept the offers made.

Learning Activity 8-1: Pet Policy

- Identify the components of the following pet policy your PHA may want to choose:

Sample Provisions of Pet Policy

- ☐ Families residing in a public housing unit are allowed to keep common household pets in their apartments as stated in their lease and in accordance with the Code of Federal Regulations. Families may request permission to keep a common household pet.
- ☐ Households may keep (only one) (two) (three) common household pets.
- ☐ Maximum size of a dog is (10 pounds) (20 pounds) (other).
- ☐ Households must register a pet with the PHA before it is brought onto the premises.
- ☐ Pet registration must be updated each year at annual reexamination.
- ☐ Registration includes a certificate signed by a licensed veterinarian stating that the common household pet has received all inoculations currently required by state and local laws.
- ☐ A questionnaire is to be mailed to and completed by a veterinarian and will include animal's breed, weight, age, and if under one year old, weight expected when fully grown.
- ☐ Also required is whatever license is mandated by local law.
- ☐ For each dog, written evidence of completion of basic obedience training.
- ☐ Two pictures of each common household pet must be taken at the PHA office or rental office at time of registration. Family provided pictures will not be accepted.

Notes

- ☐ All animals are to be spayed or neutered.
- ☐ Dogs will be prohibited at developments with no green space.
- ☐ The resident will be responsible for all reasonable expenses directly related to the presence of the animal or pet on the premises, including the cost of repairs and replacement in the apartment.
- ☐ The pet deposit will be (\$400) (\$350) (\$300) (\$250) (\$200) (whichever is greater, the resident's total tenant payment or \$400, \$350, \$300, \$250 etc.) (the resident's total tenant payment) for each pet.
- ☐ A common household pet must be effectively restrained by use of a leash and under the control of a responsible person when passing through a common area.
- ☐ Any animal or pet waste deposited in any common area or animal/pet exercise area must be removed immediately by the pet owner.
- ☐ All pets are to be fed inside the apartment. Feeding is not allowed on porches, sidewalks, patios, balconies, or other outside area.
- ☐ Residents will not permit any disturbances by their pets which would interfere with the quiet enjoyment of other tenants; whether by loud barking, howling, biting, scratching, chirping, or other such activities.
- ☐ The authorization for a common household pet may be revoked at any time subject to the housing authority's grievance procedure if the pet becomes destructive or a nuisance to others, or if the tenant fails to comply with this policy.

POST-TEST FOR UNIT 8

1. Purposes for resident orientation include:
 - a. Explain policies and procedures
 - b. Explain PHA and resident responsibilities under the lease
 - c. Establish a rapport with the new residents
 - d. Answer questions
 - e. All of the above
2. The PHA may not limit the number of days residents can have overnight guests.
 - a. True
 - b. False
3. The tenant's right to use and occupancy under the lease states that the tenant may:
 - a. Engage in any profit-making activity in the dwelling unit
 - b. Not engage in any legal profit-making activity in the dwelling unit
 - c. Engage in legal profit-making activity in the dwelling unit with the consent of the PHA
4. Tenant obligations include responsibility for:
 - a. Other household members
 - b. Guests
 - c. Payments included in the lease
 - d. All of the above
5. If the family switches from flat rent to income-based rent because of hardship, and then the family's income increases:
 - a. The family can switch back to flat rent between annual reexaminations
 - b. The family has the option at annual reexamination whether to pay income-based or flat rent
 - c. The family's rent must not be increased between annual reexaminations.
6. If the unit must be entered during tenancy for nonemergency reasons, the tenant must be furnished 72 hours written notice prior to entry.
 - a. True
 - b. False
7. In emergency situations, no advance written notice is required to enter the unit.
 - a. True
 - b. False
8. If damage hazardous to health and safety is tenant-caused, the PHA does not have to move them out of the unit.
 - a. True
 - b. False

9. All notices to tenants should be in writing sent by first-class mail, properly addressed to tenant, or prominently posted to front door of unit.
 - a. True
 - b. False
10. If all the tenants in a general occupancy development vote not to allow pets, the PHA could prohibit pets in the development.
 - a. True
 - b. False
11. It is not necessary that the lease be signed annually.
 - a. True
 - b. False
12. Persons with disabilities living in a public housing development are automatically exempt from the community service requirement.
 - a. True
 - b. False
13. Support animals are subject to the pet rules; however, the PHA may not apply the pet rules to service animals.
 - a. True
 - b. False
14. Persons with disabilities living in public housing may self-certify whether they are able to comply with the community service requirement.
 - a. True
 - b. False
15. Service and support animals are subject to the PHA's pet rules.
 - a. True
 - b. False
16. HUD regulations do not specify when the public housing orientation must occur and what must be covered during the orientation.
 - a. True
 - b. False
17. The PHA has determined that a live-in aide is essential to the care and well-being of Mary Jones, a public housing resident. Ms. Jones has requested that Helen Williams, her niece, be her live-in aide. Helen has a one-year-old child. The PHA could deny Helen as a live-in aide because she has a child.
 - a. True
 - b. False

Notes

UNIT 9 Continued Occupancy

LEARNING OUTCOMES

- Upon completion of this chapter, you should be able to:
 - Analyze PHA options for annual reexamination scheduling
 - Identify the HUD requirements and PHA policy options pertaining to interim reexaminations
 - Discuss issues that may arise during annual or interim reexaminations
 - Implement community service requirements correctly

Verification of Community Service

To: _____ Date: _____

Tenant: _____

Case No: _____

The housing authority is required by federal statute and regulation to administer the community service program in public housing. We are required to confirm and track participation in an economic self-sufficiency or community service activity. We ask your cooperation in supplying the information requested below.

Housing Authority Representative _____
Tel. # _____ Email: _____

I do hereby authorize any agency or entity where community service or self-sufficiency activity took place to furnish the Housing Authority with the information requested.

Signature of participant

Date:

Participant Name: _____

Address: _____

Date	Description of Activity	Hours

WARNING: Title 18, Section 1001 of the United States Code states that a person is guilty of a felony for knowingly and willfully making false or fraudulent statements to any department or agency of the United States.

Authorized signature: _____ Title: _____

Agency: _____ Telephone: _____

Return to:

POST-TEST FOR UNIT 9

1. Occupancy standards are used for admission and for continued occupancy
 - a. True
 - b. False
2. What is a mandatory move?

3. Verifications at interim reexaminations, if rent is income-based, include:
 - a. Verification of all income, assets, and allowances
 - b. Verification of those things that have changed since the last annual reexamination
 - c. No verifications are required
4. Annually, the PHA must give the family a choice whether:
 - a. To pay minimum TTP or ceiling rent
 - b. To pay flat rent or income-based rent
 - c. To pay 30 percent of monthly adjusted income or flat rent
 - d. To pay flat rent, income-based rent, or ceiling rent
5. The PHA may conduct an interim reexamination at any time in accordance with PHA policy.
 - a. True
 - b. False
6. When a family selects flat rent, the PHA will conduct a full reexamination either annually or once every three years, depending on PHA policy.
 - a. True
 - b. False
7. If the family reports a decrease in income or increase in allowances/deductions that result in a decrease of the family's TTP, the PHA must conduct an interim reexamination to decrease the rent.
 - a. True
 - b. False
8. The PHA's transfer policies are dictated by HUD.
 - a. True
 - b. False

Notes

UNIT 10 Terminations

LEARNING OUTCOMES

- Upon completion of this chapter, you should be able to:
 - Analyze the lease for proper notice procedures for the family and PHA
 - Identify PHA grounds for termination of tenancy, including provisions for drug-related and other criminal activity
 - Examine lease termination procedures for noncompliance with community service requirements
 - Correctly apply state law to terminations

Learning Activity 10-1: Termination Exercise

- Below is a list of items found in a resident's file for the month of January. Examine the list. The manager has not had previous complaints about the resident nor has the manager discussed the issues in the file with the resident. It is now February 14.
 - a. Mrs. Jones complained on January 4 that loud noises were coming from the resident's apartment at 3:00 a.m.
 - b. The resident was observed by manager throwing trash in the hallway on January 7.
 - c. The resident was observed by manager parking his car in a no parking area on January 8.
 - d. Mr. Smith complained on January 10 that the resident parked in his space.
 - e. The resident did not pay for a service charge for repairing a sink that was damaged due to the resident's misuse (written notice of charges was sent January 19).
 - f. The resident had six guests residing in the apartment for four weeks as of January 31.
 - g. The resident did not pay rent due on February 1.
- After reviewing this information, answer the questions on the following page.

- (a) Does the manager have grounds for taking eviction action in relation to nonpayment of rent?

Yes _____ No _____ Why/Why not? _____

- (b) Does the manager have grounds for taking eviction action in relation to rules of behavior stated in the lease?

Yes _____ No _____ Why/Why not? _____

- (c) What would you suggest that the manager do in this case?

Learning Activity 10-2: Hearing Exercise

INSTRUCTIONS:

You are presiding over a hearing. The following are the facts, based on documentary evidence in the hearing packet.

SCENARIO

Alice Masters and her two children are residents of the public housing program. For the last five years, Ms. Masters had reported part-time employment income working retail. No other income was reported. Last year, the PHA revised its verification policies to require that the resident provide IRS tax returns.

A housing specialist at the PHA found that Ms. Masters advertised her wedding planning business, “Masters Dream Weddings” on social media. During processing of Ms. Masters’ annual reexamination, Ms. Masters’ tax returns showed that Ms. Masters had been self-employed for the last three years as a wedding planner. When asked about the unreported income at the annual reexamination, Ms. Masters confirmed the existence of her business, but stated that she was not aware of any requirement to report self-employment. Her reexamination forms for the past three years indicated only the part-time retail income.

The PHA determined that due to Ms. Masters’ unreported self-employment income, she owes \$1,980 in back rent. In compliance with the PHA’s ACOP, the PHA offered Ms. Masters a repayment agreement. The PHA’s repayment agreement policies were as follows:

PHA Policy

Before executing a repayment agreement with a family, the PHA will generally require a down payment of 10 percent of the total amount owed. If the family can provide evidence satisfactory to the PHA that a down payment of 10 percent would impose an undue hardship, the PHA may, in its sole discretion, require a lesser percentage or waive the requirement.

The PHA has established the following thresholds for repayment of debts:

- Amounts between \$3,000 and the federal or state threshold for criminal prosecution must be repaid within 36 months.
- Amounts between \$2,000 and \$2,999 must be repaid within 30 months.
- Amounts between \$1,000 and \$1,999 must be repaid within 24 months.
- Amounts under \$1,000 must be repaid within 12 months.

Per the PHA’s ACOP, Ms. Masters requested an explanation and stated she could not afford to pay \$198 up front and \$148.50 each month. The PHA agreed to waive the 10 percent upfront payment and adjust the monthly payment to \$75 monthly.

Ms. Masters declined to sign the repayment agreement. The PHA then issued a notice of termination for owing money to the PHA and refusing to enter into a repayment agreement. Ms. Masters requested a grievance hearing.

At the hearing, Ms. Masters explained that she did not sign the repayment agreement because she could not afford to repay the overpayment. The PHA had increased her family share of rent, and she stated she would not have enough money to buy food and pay rent if she was required to pay \$75 per month, along with her increased rent. She requested that any repayment be postponed for at least two years.

What is your decision and why?

POST-TEST FOR UNIT 10

1. The PHA must notify the post office:
 - a. Whenever a family vacates
 - b. Whenever a family is evicted
 - c. When a family is evicted for criminal activity
 - d. When a unit changes occupants.
2. A tenant may be evicted only for drug-related activity on the premises.
 - a. True
 - b. False
3. PHAs may terminate the tenancy of someone whose abuse of alcohol interferes with the health, safety, or right to peaceful enjoyment of other residents.
 - a. True
 - b. False
4. If in PHA policy, termination of assistance for conviction of producing methamphetamine on the premises may be waived on a case-by-case basis.
 - a. True
 - b. False
5. If in a HUD-declared due process state, PHAs may bypass the grievance procedures for cases involving termination of tenancy for drug-related criminal activity on or off premises by tenant, member of household, or guest.
 - a. True
 - b. False
6. ***MATCHING:*** Match the terms below with the proper definition following:

_____	Grievance policy
_____	Hearing officer
_____	Complainant
_____	Grievance

 - a. Document that must be included in the lease or incorporated by reference in the lease.
 - b. Tenant whose grievance is presented to the PHA, according to regulations.
 - c. Any dispute which a tenant may have with respect to PHA action or failure to act in accordance with the individual tenant's lease or PHA regulations, which adversely affects the individual.
 - d. A person or persons selected in accordance with regulations to hear grievances and render a decision.
 - e. Deposits made by a tenant in the event of hearings regarding rent.
7. If a "due process determination" is issued by HUD, the PHA may exclude any grievance that involves:
 - a. Nonpayment of rent
 - b. Any criminal activity that threatens the health, safety, or right to peaceful enjoyment of the premises by other residents or PHA employees
 - c. Any serious violation of the lease
 - d. All the above

8. The hearing officer must give a written decision, stating reasons for the decision, to both the tenant and the PHA within a reasonable time:
 - a. True
 - b. False
9. A manager must give careful consideration to what they write, as what may have originated as a memorandum today can become evidence in court tomorrow.
 - a. True
 - b. False
10. A live-in aide has no rights to a grievance hearing.
 - a. True
 - b. False
11. A grievance hearing is always a public hearing.
 - a. True
 - b. False
12. Prior to a grievance hearing for lease termination, the tenant must be given the right to examine and copy, before the hearing, all documents the PHA intends to produce at the hearing.
 - a. True
 - b. False
13. Notice of lease termination for unpaid maintenance charges is:
 - a. 3 days
 - b. 14 days
 - c. A reasonable time, not to exceed 30 days
 - d. 10 days
14. The PHA may terminate the lease if a member of the household:
 - a. Is delinquent in child support payments
 - b. Has committed fraud against welfare agency
 - c. Is violating a condition of probation or parole
 - d. Is convicted of any misdemeanor under state law
15. The type of notice the PHA delivers for failure to pay rent is:
 - a. 30-day notice
 - b. 3-day notice
 - c. Generally, 14-day notice. 30-day notice when HUD determines that there is a national emergency
 - d. Based on how much back rent the tenant owes
 - e. Up to PHA policy

16. An example of “other person under the tenant’s control,” according to the HUD definition, would be:
 - a. A relative visiting for two weeks
 - b. A maintenance worker repairing the stove
 - c. A friend spending the night
 - d. Someone who was invited over for a party
 - e. All the above
17. A tenant obligation is to assure that no other person under the tenant’s control engages in any drug-related criminal activity:
 - a. On or off the premises
 - b. That is a felony
 - c. On the premises
 - d. On or near the premises
18. A tenant obligation is to assure that no tenant, member of the household, or guest engages in any drug-related criminal activity:
 - a. On or off the premises
 - b. That is a felony
 - c. On the premises
 - d. On or near the premises
19. The PHA does not have to inform the tenant in writing of their right to a hearing when giving notice of proposed adverse action as that right is included in the lease agreement.
 - a. True
 - b. False
20. The standard of proof for a public housing hearing is:
 - a. Beyond a reasonable doubt
 - b. Preponderance of the evidence
 - c. Innocent until proven guilty
 - d. Double indemnity
 - e. Any of the above, depending on whether the hearing is a termination case based on criminal activity
21. The family’s assistance may be terminated for criminal activity:
 - a. Only if there is a conviction
 - b. Only if the criminal activity is a felony
 - c. When there is a preponderance of the evidence and the PHA has followed all due process requirements
 - d. All the above

22. When a public housing tenant is grieving a PHA's adverse decision, all the following are due process rights the PHA must afford the tenant, *except*:
- The tenant must be given the right to cross-examine all witnesses
 - The notice must state specific grounds for the PHA's adverse action
 - The tenant has the right to be represented by counsel or any other person, at the tenant's expense
 - The tenant must be given the right to view and copy any documents the PHA is going to produce at the hearing, before the hearing
 - The tenant must bring an interpreter if they do not understand English well
23. The PHA's notice for failure to pay rent when HUD determines that there is a national emergency is a 30-day notice.
- True
 - False
24. Any adult in the household may grieve.
- True
 - False
25. Any adult who lives in the unit and executed the lease may grieve.
- True
 - False
26. A remaining member of the family, who had not executed the lease, may grieve.
- True
 - False
27. HUD defines a "short-term invitee" as:
- Remaining member of the family
 - Other person under the tenant's control
 - A guest
 - A household member
 - An unauthorized person
28. The PHA termination action for criminal activity must meet the standard of proof for a criminal case.
- True
 - False

INCIDENT DOCUMENTATION FORM (SAMPLE)

Your name:

Address:

Phone #:

Date and time of incident:

Were the police called?

If so, police department and officer:

Description of the incident (please describe what happened, who was involved, where they live, where it occurred, vehicle plate numbers, or other important information).

Facts only:

Who was involved?

Where do they live?

Where did it happen?

What happened? (facts only, no opinions)

Did you actually witness the incident? ___ Yes ___ No. If not, who did?

Signature _____ Date _____

UNIT 11 Resident Relations and Self-Sufficiency

LEARNING OUTCOMES

- Upon completion of this chapter, you should be able to:
 - Appropriately use resident participation as a management tool
 - Understand the function of resident councils
 - Describe the major characteristics of an effective economic self-sufficiency program
 - Design a practical and effective community service program

POST-TEST FOR UNIT 11

- | | |
|---|---|
| <p>1. A program to help residents of public and assisted housing achieve economic independence is:</p> <hr/> | <p>4. The FSS escrow account is optional for the PHA to offer to FSS families whose earned income increases.</p> <p>a. True</p> <p>b. False</p> |
| <p>2. All new families moving into public housing must enroll in the Family Self-Sufficiency program.</p> <p>a. True</p> <p>b. False</p> | <p>5. HUD notifies PHAs of available grant funds by publishing:</p> <p>a. DOFAs</p> <p>b. ACCs</p> <p>c. PILOTs</p> <p>d. NOFAs</p> <p>e. REACs</p> |
| <p>3. Section 3 is a requirement that PHAs make their best efforts to provide employment and training opportunities to public housing residents, participants in YouthBuild programs, and low and very low-income persons residing within the metropolitan area.</p> <p>a. True</p> <p>b. False</p> | |

UNIT 12 Understanding and Managing the Budget

LEARNING OUTCOMES

- Upon completion of this chapter, you should be able to:
 - Explain the purpose of the development operating budget
 - Describe HUD's requirements for project-based budgeting
 - Recognize how to develop an overall budgeting process
 - State how to determine development income and expenses
 - Discuss the fees and costs associated with development expenses
 - Identify how to use financial benchmarks to determine reasonableness of income and expense projections
 - Recognize the importance of, and how to monitor actual-to-budget performance

Learning Activity 12-1: PUM

- PUM formula: Any income or expense divided by the number of months units are available (UMA) = PUM.
- Based on the PUM formula, calculate PUM for the following:
 1. The Grove has 100 units, all will be available. Utility costs budgeted are \$67,000.
 - PUM for utilities is:

 2. Vineland has 225 units. Of those 225 units, eight units (two buildings) have been approved for capital improvements, which will last four months in the HUD-approved schedule. Utilities for the upcoming year are estimated at \$252,788.
 - What is your PUM in the upcoming year for utilities?

 3. Last year, Green Gulch spent \$198,200 in maintenance. Green Gulch has 168 units. If all units had been available all year, Green Gulch would have had 2,016 unit months. However, Green Gulch has 1,989 unit months available due to HUD-approved vacancies.
 - What is the PUM for last year's maintenance?

 4. Daybreak spent \$106,770 in maintenance last year. Daybreak had 1,180 unit months available.
 - How does Daybreak's maintenance PUM costs compare to Green Gulch's?

Public Housing Management

Understanding and Managing the Budget

Summary of Individual Project Budgets

Hilldale Georgia PHA

For the year ended 12/31/2017

PUM Basis

Total/Budget Basis

Occupancy Type (family, senior, mixed)

Built Date

Date of Last Renovation

ACC Units

Estimated Occupancy Rate

Average Bedroom Size

Anticipated Number Turnovers

Willow Run	Juniper Gardens
Family	Senior
1/1/1965	1/1/1981
1/1/1988	N/A
150	100
99%	96%
2.20	1.00
18	22

WillowRun	Juniper Gardens
Family	Senior
1/1/1965	1/1/1981
1/1/1988	N/A
150	100
99%	96%
2.20	1.00
18	22

Operating Income:

Gross Potential Rent
Less: Vacancy Loss
Net Tenant Rental Revenue
Gross Potential Subsidy
Less: Vacancy Loss
Less: Proration Amount
Net Operating Subsidy
HUD PHA Operating Grant-CFP
Other Tenant Charges
Excess Utilities
Investment Income
Fraud Recovery
Non-Dwelling Rent
Other Income
Total Operating Income

207.07	214.00
(2.07)	(8.56)
205.00	205.44
299.13	195.45
2.88	2.66
33.02	21.58
263.23	171.21
0.00	0.00
3.00	3.00
0.00	0.00
4.00	4.00
0.00	0.00
3.00	9.00
8.00	12.00
489.11	407.31

\$ 372,727	\$ 256,800
\$ (3,727)	\$ (10,272)
\$ 369,000	\$ 246,528
\$ 538,434	\$ 234,540
\$ 5,178	\$ 3,195
\$ 59,443	\$ 25,893
\$ 473,813	\$ 205,452
\$ -	\$ -
\$ 5,400	\$ 3,600
\$ -	\$ -
\$ 7,200	\$ 4,800
\$ -	\$ -
\$ 5,400	\$ 10,800
\$ 14,400	\$ 14,400
\$ 880,391	\$ 488,775

Operating Expenditures:

Administrative

Administrative Salaries
Employee Benefits - Administrative
Auditing Expense
Management Fees
Bookkeeping Fees
Advertising and Marketing
Office Expense
Legal Expense
Travel
Other Administrative Costs
Total Administrative

39.23	42.14
14.91	16.01
2.00	2.00
51.54	49.98
7.43	7.20
0.00	0.00
4.99	3.13
6.00	3.00
0.00	0.00
11.46	8.97
137.55	132.43

\$ 70,616	\$ 50,564
\$ 26,834	\$ 19,214
\$ 3,600	\$ 2,400
\$ 92,771	\$ 59,973
\$ 13,365	\$ 8,640
\$ -	\$ -
\$ 8,980	\$ 3,755
\$ 10,800	\$ 3,600
\$ -	\$ -
\$ 20,628	\$ 10,764
\$ 247,594	\$ 158,910

Asset Management Fee

10.00	10.00
-------	-------

\$ 18,000	\$ 12,000
-----------	-----------

Tenant Services

Tenant Services - Salaries
Employee Benefits- Tenant Services
Relocation Costs
Tenant Services-Other
Total Tenant Services

0.00	0.00
0.00	0.00
0.00	0.00
11.00	6.00
11.00	6.00

\$ -	\$ -
\$ -	\$ -
\$ -	\$ -
\$ 19,800	\$ 7,128
\$ 19,800	\$ 7,128

Public Housing Management

Understanding and Managing the Budget

Summary of Individual Project Budgets

Hilldale Georgia PHA
For the year ended 12/31/2017

	PUM Basis		Total/Budget Basis	
	Willow Run	Juniper Gardens	WillowRun	Juniper Gardens
Utilities				
Water	27.01	16.80	\$ 48,132	\$ 20,160
Electricity	48.97	34.75	\$ 87,265	\$ 41,700
Gas	41.23	0.00	\$ 73,472	\$ -
Fuel	0.00	36.88	\$ -	\$ 44,256
Sewer	18.00	11.20	\$ 32,076	\$ 13,440
Other	0.00	0.00	\$ -	\$ -
Total Utilities	135.21	99.63	\$ 240,944	\$ 119,556
Maintenance				
Labor	55.00	43.67	\$ 99,000	\$ 52,400
Employee Benefits - Maintenance	22.00	17.47	\$ 39,600	\$ 20,960
Maintenance Materials	22.00	15.00	\$ 39,600	\$ 18,000
Maint. Contract:			\$ -	\$ -
Garbage and Trash Removal Contracts	8.00	3.00	\$ 14,400	\$ 3,600
Heating & Cooling Contracts	8.62	8.49	\$ 15,516	\$ 10,188
Snow Removal Contracts	0.00	0.00	\$ -	\$ -
Elevator Maintenance	0.00	6.00	\$ -	\$ 7,200
Landscape & Grounds Contracts	7.00	2.00	\$ 12,600	\$ 2,400
Unit Turnaround Contract	0.00	0.00	\$ -	\$ -
Electrical Contracts	2.00	2.00	\$ 3,600	\$ 2,400
Plumbing Contracts	2.00	2.00	\$ 3,600	\$ 2,400
Extermination Contracts	3.00	3.00	\$ 5,400	\$ 3,600
Janitorial Contracts	0.00	0.00	\$ -	\$ -
Routine Maintenance Contracts	0.00	0.00	\$ -	\$ -
Other Misc. Contract Costs	14.08	11.92	\$ 25,344	\$ 14,300
Total Maintenance	143.70	114.54	\$ 258,660	\$ 137,448
Protective Services				
Protective Services - Labor	0.00	0.00	\$ -	\$ -
Employee Benefits - Protective Services	0.00	0.00	\$ -	\$ -
Protective Services Contract Costs	6.00	0.00	\$ 10,800	\$ -
Protective Service Other	0.00	0.00	\$ -	\$ -
Total Protective Services	6.00	0.00	\$ 10,800	\$ -
Insurance				
Property	12.73	15.16	\$ 22,920	\$ 18,190
General Liability	9.04	10.42	\$ 16,280	\$ 12,500
Worker's Comp.	2.22	1.43	\$ 4,000	\$ 1,710
Other Insurance	0.00	0.00	\$ -	\$ -
Total Insurance	24.00	27.00	\$ 43,200	\$ 32,400
General Expenses				
Other General Expense	1.00	1.00	\$ 1,800	\$ 1,200
Compensated Absences	0.00	0.00	\$ -	\$ -
Payments in Lieu of Taxes	6.70	5.69	\$ 12,060	\$ 6,823
Bad Debt-Tenants	3.76	1.52	\$ 6,772	\$ 1,824
Severance Expense	0.00	0.00	\$ -	\$ -
Total General Expenses	11.46	8.21	\$ 20,632	\$ 9,847
Total Operating Expenditures	478.92	397.80	\$ 862,064	\$ 477,362
Excess Revenue Over (Under) Operating Expenses	10.18	9.51	\$ 18,327	\$ 11,413

Public Housing Management

Understanding and Managing the Budget

Summary of Individual Project Budgets

Hilldale Georgia PHA
For the year ended 12/31/2017

	PUM Basis		Total/Budget Basis	
	Willow Run	Juniper Gardens	WillowRun	Juniper Gardens
Non-Operating Expenses				
Extraordinary Maintenance	0.00	0.00	\$ -	\$ -
Casualty Losses - Non-capitalized	0.00	0.00	\$ -	\$ -
Depreciation Expense	0.00	0.00	\$ -	\$ -
Fraud Losses	0.00	0.00	\$ -	\$ -
Interest Expense	0.00	0.00	\$ -	\$ -
Total Non-Operating Expenses	0.00	0.00	\$ -	\$ -
Excess Revenue Over (Under) Expenses	10.18	9.51	\$ 18,327	\$ 11,413
Conversion to Cash Flow (before Other Financing Sources (Uses))				
Add back: Depreciation Expense			\$ -	\$ -
Deduct: Debt Service Payments (if any)	0.00	0.00	\$ -	\$ -
Cash Flow Before Other Financing Sources (Uses)	10.18	9.51	\$ 18,327	\$ 11,413
Other Financing Sources (Uses)				
Operating Transfers In	0.00	0.00	\$ -	\$ -
Operating Transfers Out	0.00	0.00	\$ -	\$ -
Inter Project Excess Cash Transfer - In	0.00	0.00	\$ -	\$ -
Inter project Excess Cash Transfer - Out	0.00	0.00	\$ -	\$ -
Transfers Between Programs & Projects-In	0.00	0.00	\$ -	\$ -
Transfers Between Programs & Projects-Out	0.00	0.00	\$ -	\$ -
Total Other Financing Sources (Uses)	0.00	0.00	\$ -	\$ -
Net Cash Flow	10.18	9.51	\$ 18,327	\$ 11,413

Staffing

	Willow Run	Juniper Street
Site Manager	\$45,000	\$39,000
Assistant Manager	\$20,000	\$5,000
Centralized Intake Clerk	\$5,616	\$6,864
Maintenance Lead Mechanic	\$40,000	\$38,000
Mechanic I	\$35,000	\$0
Janitor (full-time)	\$24,000	\$0
Janitor (part-time)	\$0	\$14,400

Learning Activity 12-2: Hilldale Budgets

- Refer to Willow Run's operating budget. Review the overall revenue, expenses, and net cash flow.

1. What is the largest source of revenue?

- Refer to Juniper Garden's operating budget.

2. What is the largest source of revenue?

3. What are the three largest budgeted expenses on a PUM basis for Willow Run?

	\$
	\$
	\$

Learning Activity 12-3: Shared Resources

- Refer back to Hilldale Housing Authority's organizational chart.

1. Do the developments share any staff?

2. If the developments were in adjoining neighborhoods, can you conceive of a situation where they might utilize greater use of shared staff?

Learning Activity 12-4 Budget Variance

- Following is a sample budget variance report.

Summary Budget Variance Report Consolidated Project Statement For the period ending June 30, 2017 Fiscal Year January 1, 2017 – December 31, 2017 Asset Management Project 03					
Account	YTD Actual	YTD Budget	\$Variance	% Change	Favorable or Unfavorable
Revenue					
Tenant Rents	288,476.45	280,000.00	8,476.45	3%	F
- Vacancy	(1,932.50)	(2,000.00)	67.50	3%	F
- Delinquency	(725.63)	(500.00)	(225.63)	-31%	U
Total Rental Income	285,818.32	277,500.00	8,318.32	3%	F
Other Income	3,328.75	1,000.00	2,328.75	70%	F
Total Revenue	289,147.07	278,500.00	10,647.07	4%	F
Expense					
Salaries	85,301.05	82,176.00	(3,125.05)	-4%	U
Maintenance	28,980.35	30,000.00	1,019.65	3%	F
Utilities	49,815.24	45,000.00	(4,815.24)	-10%	U
Landscaping	4,067.81	2,000.00	(2,067.81)	-50%	U
Make-readies	5,988.75	4,000.00	(1,988.75)	-33%	U
Insurance	7,283.25	5,000.00	(2,283.25)	-31%	U
Tenant Services	4,000.00	4,000.00	0	0	
Total Expense	185,436.45	172,176.00	(13,260.45)	-7%	U
Net Operating Income	103,710.62	106,324.00	(2,613.38)	-2%	U

1. What is the problem you would start remedying first?

2. Why?

Public Housing Management

Understanding and Managing the Budget

- Following is an example of a PHA balance sheet.

Hilldale Georgia PHA Combining Project Balance Sheet 31-Dec-17

	Willow Run	Juniper Gardens	Total
Assets			
<i>Current Assets:</i>			
111 Cash-unrestricted	\$ 122,970	\$ 120,170	\$ 243,140
112 Cash-restricted for modernization	12,000	-	12,000
114 Cash-tenant security deposits	18,900	12,500	31,400
126 Accounts receivable-tenants	420	-	420
126.1 Allowance for doubtful accounts-tenants	(70)	-	(70)
131 Investments	200,000	100,000	300,000
142 Prepaid expenses	28,500	21,450	49,950
150 Total Current Assets	<u>382,720</u>	<u>254,120</u>	<u>636,840</u>
<i>Non-Current Assets</i>			
161 Land	30,000	20,000	50,000
162 Buildings	7,750,000	6,115,000	13,865,000
164 Equipment-administration	15,000	14,000	29,000
167 Construction in progress	260,000	213,000	473,000
166 Accumulated depreciation	(4,958,000)	(4,845,000)	(9,803,000)
180 Total Non-Current Assets	<u>3,097,000</u>	<u>1,517,000</u>	<u>4,614,000</u>
190 Total Assets	<u>\$ 3,479,720</u>	<u>\$ 1,771,120</u>	<u>\$ 5,250,840</u>
Liabilities and Net Assets			
<i>Current Liabilities</i>			
312 Accounts payable-vendors	\$ 2,800	\$ 10,050	\$ 12,850
312 Accounts payable-COCC	2,000	2,100	4,100
321 Wages payable	1,450	940	2,390
322 Accrued compensated absences	4,800	3,300	8,100
333 Payments in lieu of taxes	12,690	12,910	25,600
341 Tenant security deposits	18,000	12,500	30,500
342-030 Tenant prepaid rents	780	1,100	1,880
342-020 Excess Capital Fund Program advances	12,000	-	12,000
310 Total Current Liabilities	<u>54,520</u>	<u>42,900</u>	<u>97,420</u>
<i>Non-Current Liabilities</i>			
354 Accrued compensated absences (net of current)	<u>1,200</u>	<u>890</u>	<u>2,090</u>
350 Total Long-Term Liabilities	<u>1,200</u>	<u>890</u>	<u>2,090</u>
300 Total Liabilities	<u>55,720</u>	<u>43,790</u>	<u>99,510</u>
<i>Net Assets</i>			
508.1 Investment in net fixed assets (net of debt)	3,097,000	1,517,000	4,614,000
511.1 Restricted net assets	-	-	-
512.1 Unrestricted net assets	<u>327,000</u>	<u>210,330</u>	<u>537,330</u>
513 Total Net Assets	<u>3,424,000</u>	<u>1,727,330</u>	<u>5,151,330</u>
600 Total Liabilities & Net Assets	<u>\$ 3,479,720</u>	<u>\$ 1,771,120</u>	<u>\$ 5,250,840</u>
<i>Ratios:</i>			
Quick Ratio	<u>6.50</u>	<u>5.42</u>	<u>6.02</u>

POST-TEST FOR UNIT 12

1. The two main sources of income for the public housing program are:
 - a. Capital fund and rents
 - b. Rents and HAP
 - c. Rents and operating subsidy
 - d. Operating subsidy and reserves
 - e. Maintenance charges and operating subsidy
2. What report does the manager analyze at least monthly to determine rent collection rate for all public housing units?
 - a. Rent roll
 - b. Rent statement for each tenant
 - c. Balance statement
 - d. Work order log
3. In preparing the operating budget, a property manager would best start with:
 - a. HUD occupancy handbook
 - b. Most recent RIM review
 - c. Cooperation agreement with the local government
 - d. Analyzing past year's expenses
4. The operating subsidy calculation and allocation results in:
 - a. More accountability at the development level
 - b. Higher operating subsidies for all PHAs
 - c. Making public housing operate less like the private sector
 - d. Aggregate and centralized accounting
 - e. All the above
5. The accounts receivable on which a manager has the most impact is:
 - a. Rent
 - b. Excess utilities
 - c. Non-dwelling rent
 - d. Investment income
 - e. Operating subsidy
6. A budget is a management tool that can be used as a guide for operations, a way to measure performance, an early warning system, and a control for expenditures:
 - a. True
 - b. False
7. The asset management fee:
 - a. Is a fee paid by the central office cost center to the development for managing the asset
 - b. Is based on units leased
 - c. Is paid by HUD to the central office cost center
 - d. Is a fee paid by the development to the central office cost center
8. The public housing maintenance function:
 - a. Can be decentralized or assigned to specific developments
 - b. Can be centrally maintained
 - c. Can be a mix, where some maintenance services are at the development and some are centralized
 - d. Will charge a fee-for-service to the development when a service is provided to the development from a central location
 - e. All the above are true

9. Accounts payable by the property may include all the following *except*:
 - a. Dwelling rental income
 - b. Direct administrative costs
 - c. Maintenance costs
 - d. Tenant services
10. The formula for calculating per unit month (PUM) is:
 - a. Favorable budget variance divided by unfavorable budget variance
 - b. Line item divided by unit months available
 - c. Number of units divided by any line item
 - d. Occupancy rate
 - e. Total number of vacancy days divided by number of units leased up in the reporting period
11. Treating each development as its own asset requires PHAs to:
 - a. Evaluate the financial viability of each development
 - b. Centralize maintenance
 - c. Consolidate
 - d. Fund each development from the central office
 - e. All the above
12. Under project-based management:
 - a. Each development's budget must be approved by HUD
 - b. Budgets are developed at an aggregate level
 - c. Budgets may not be revised
 - d. Each development's budget must be approved by the board
 - e. The property manager has no input into the development's budget
13. Good customer service and working well with other departments have no relation to the financial viability of your development.
 - a. True
 - b. False
14. The following category or categories of vacancies are approved by HUD and thus continue to receive operating subsidy:
 - a. Central eligibility team too slow in making unit offers
 - b. Make-readies are causing units to remain vacant
 - c. Vacant days due to formally declared disasters
 - d. No one has accepted offers to the unit
 - e. All the above are HUD-approved vacancies
15. Vacancy days and HUD-approved vacancies are tracked in PIC.
 - a. True
 - b. False
16. The balance sheet provides the following important information about the development:
 - a. Month-to-month expenditures and revenues of the development
 - b. Trend analysis of rent collection rates and occupancy rates
 - c. Financial viability of the development; the development's ability to handle unexpected expenses or losses
 - d. What the development owes, what the development owns, and the value of the development (what the development is worth)

17. Linden Lane's balance sheet shows that the development will have excess cash at the end of the year. Oakview's balance sheet shows that Oakview will not have excess cash. Which of the following is an option for the PHA?
- The central office (COCC) could charge Linden Lane above \$10 in asset management fees to make up for Oakview's lack of excess cash
 - Linden Lane can transfer funds to Oakview
 - Oakview can pay asset management fees to the central office (COCC)
 - Oakview can transfer funds to Linden Lane
 - None of the above are allowed options for the PHA
18. The property management fee:
- Can only be paid if the development's balance sheet shows excess cash at the end of the year
 - Is paid by the central office (COCC) to the development if the development has insufficient cash
 - Is based on the total number of units in the development
 - Is based on occupied units and allowable vacancies
 - Up to PHA policy
19. Centralized maintenance staff salary and benefits:
- Are a frontline allocated cost, prorated back to the developments on a reasonable basis
 - Are paid by the development on a fee-for-service basis
 - Are a direct frontline cost of the development if the service is highly technical, such as HVAC or electrician
 - Can be paid in any reasonable way per PHA policy
20. The following functions or services can be allocated back to the developments *except*:
- Centralized waiting list, including supervisor
 - 504 coordinator
 - Tenant services
 - Procurement
 - All the above functions or services can be allocated back to the developments
21. A PHA has ten developments. An example of a shared resource would be:
- Human Resources (HR) staff
 - Maintenance technician working for two developments
 - Centralized skilled plumber on call to all ten developments
 - Waiting list/eligibility staff
 - All the above

22. Development A may only transfer funds to Development B if:

- a. Development B has excess cash
- b. Development A is a high performer under PHAS
- c. Development B has adequate reserves
- d. Development A has excess cash
- e. All the above

23. The property manager should compare the actual-to-budget report:

- a. To determine the viability of the COCC
- b. Annually
- c. Regularly, at least monthly
- d. To determine what the development owns, what the development owes, and what the development is worth (equity)
- e. Both b and d

Notes

UNIT 13 Property Management

LEARNING OUTCOMES

- Upon completion of this chapter, you should be able to:
 - Describe the key aspects of property management
 - Identify the three categories of maintenance required in public housing and evaluate and prioritize maintenance needs based on these categories
 - Apply a work order system utilizing work order forms and a work order log to ensure that maintenance requests are recorded, performed, and monitored according to their relative importance
 - Differentiate the components of the various types of management inspections in order to monitor and control maintenance needs and performance
 - Identify the elements of an emergency response system for maintenance
 - Apply a system of inventory control, including recording and monitoring expendable and nonexpendable inventory
 - Recognize key elements of the capital fund
 - List key components of a risk management assessment

Learning Activity 13-1: Security Learning Exercise

1. Are your housing developments mostly:
☐ Smaller (less than 50 units) ☐ Newer (less than 15 years old)
☐ Larger ☐ Older
2. Do you perform a “windshield” (drive around a bit before work, at lunch, and/or after work) at each of your developments:
☐ Daily ☐ Every 2-3 days ☐ Weekly ☐ Monthly ☐ Who has time?
3. Do you inspect your vacant units:
☐ Daily ☐ Every 2-3 days ☐ Weekly ☐ Monthly ☐ Who has time?
4. Do you put on your walking shoes and walk around each of your developments:
☐ Daily ☐ Every 2-3 days ☐ Weekly ☐ Monthly ☐ Who has time?
5. Do you perform after-hours light inspection:
☐ Daily ☐ Every 2-3 days ☐ Weekly ☐ Monthly ☐ Who has time?
6. Do you have a system for maintenance to report possible lease violations or suspicious activity?
☐ Yes, we have a form ☐ When they report, we look into it ☐ We try
7. Do you hold lease violation conferences for possible violations and document agreements made with the PHA and resident?
☐ Yes, always ☐ We call, but don't always document ☐ We try
8. Do you have a system for the local police to report incidents and arrests which occurred on public housing property or drug-related criminal activity off the premises by a public housing resident?
☐ Yes ☐ Only arrests on PHA property ☐ PHA has limited access
☐ No sophisticated system but we stay in touch
9. Is it your perception that residents report crime?
☐ Yes, regularly ☐ Mostly ☐ They're afraid ☐ It's too widespread
10. Do you hold meetings with residents and/or resident councils?
☐ Monthly ☐ Regularly ☐ When we can ☐ Rarely

11. In your public housing units, are there unauthorized persons?
- ☐ No, we have a strict visitor policy which we enforce
 - ☐ We have a visitor policy and try to enforce it the best we can
 - ☐ We need to tighten up our visitor policy
12. Does your PHA have a “capable guardian,” or person who takes responsibility, at each development? The “capable guardian” could be a resident, the property manager, or any other individual.
- ☐ Yes ☐ At some sites ☐ Only during work hours
13. Does your PHA perform insect spraying and maintenance quality control inspections:
- ☐ Monthly ☐ Regularly ☐ As needed ☐ Who has time?
14. Do you require residents to register vehicles?
- ☐ Yes ☐ No

POST-TEST FOR UNIT 13

1. The manager can identify problems before they become major by doing the following:
 - a. Reviewing work order logs
 - b. Walking the grounds
 - c. Listening to residents
 - d. All the above
2. All emergency work orders should be completed or emergency abated within 24 hours or less.
 - a. True
 - b. False
3. Three categories of maintenance are:

4. Trash removal, policing the grounds, and lawn care are examples of:

5. Repair of a dripping faucet, replacing a toilet seat, and unclogging a drain are examples of:

6. Inspections, replacement of furnace/heater filters, and testing safety devices are examples of:

7. Maintenance costs can be held down if:
 - a. Tenants are charged for wear and tear
 - b. Maintenance is centralized
 - c. Routine repairs and capital improvements are deferred
 - d. Routine repairs and preventive maintenance are performed
 - e. All the above
8. An immediate threat to the health and safety of the tenant or to the structural integrity of the unit constitutes:

9. A system for tracking the completion of work orders is:

10. Public housing programs use Uniform Physical Condition Standards to inspect units.
 - a. True
 - b. False

11. The percentage of management-generated vs. resident-requested repairs:
 - a. Should be assessed entity-wide only and not property by property
 - b. Must be 50/50
 - c. Is assessed under PHAS
 - d. Should be assessed by the PHA to deliver maintenance more efficiently
 - e. All the above
12. PHAs need to make a distinction between which two types of corrective maintenance?
 - a. Preventive and deferred
 - b. Emergency and nonemergency
 - c. Capital and emergency
 - d. Custodial and emergency
13. Establishing a preventive maintenance program may be costly in the short run but it saves the PHA money in the long run.
 - a. True
 - b. False
14. Property and inventory control is:
 - a. Required only of PHAs with 250 public housing units or more
 - b. Applies to both expendable and nonexpendable equipment
 - c. Not applicable to the site manager, who has no responsibilities regarding equipment or inventory
 - d. Required regardless of the size of the PHA
15. Paying for consulting to improve an area of public housing performance under the Capital Fund program:
 - a. Is allowed only if no physical improvements are necessary
 - b. Is an eligible activity under the Capital Fund
 - c. Is allowed only if the PHA has less than 250 units and the operating and capital funds are fungible
 - d. Is prohibited

Notes

UNIT 14 **Public Housing Assessment System**

LEARNING OUTCOMES

- Upon completion of this chapter, you should be able to:
 - Identify the PHAS indicators and documentation requirements
 - Identify the components and consequences of acceptable and unacceptable performance
 - Incorporate principles of PHAS indicators into ongoing operations
 - Identify ways to use PHAS as a property management tool
 - Apply strategies to improve performance relative to PHAS

VACANT UNIT TURNAROUND TIME

- Whereas occupancy rate compares how many units are occupied vs. the total number of units, turnaround days tracks *how long* it takes to lease up vacant units. Unit turnaround time measures the annual average amount of time it takes the PHA (aggregate of the developments' data) to turn around its vacant units.
- A vacant unit is not earning operating subsidy and not collecting rent. *Your vacant units are your main loss of potential income.* Filling units quickly should be among the highest priorities of the development and the PHA.
- Your occupancy rate will suffer if units are not filled quickly. If your occupancy rate is below 97 or 98 percent, you want to use turnaround time as a diagnostic tool. But even if the PHA consistently has at least a 98 percent occupancy rate it is important to track turnaround time.

Notes

- Vacant unit turnaround time measures the average number of calendar days between the latter of the legal expiration date of the immediate past lease or the actual move-out date of the former tenant (or the date the PHA becomes aware that the tenant has moved out), and the date the new lease takes effect.

Explanation of Terms***Total Number of Turnaround Days***

- List all the turnaround days that are not exempt. Be sure you document the number of days for all units that meet the definition of exempt.
 - Use the rent roll and count every day from the day the lease expired (or that you found the unit vacant) to the effective date of the new lease. Do not count the day the unit was last occupied or the date the new lease went into effect; count only the days in between. In some cases, this may include vacancy days from prior fiscal years. If one unit was turned several times during the fiscal year being assessed, count all the days for each time it turned. Add up the days for these turned units.
 - Example: For PHA with FY ending 9/30/2012

Vacant Unit Scenario	Date of Action	Calculation
Unit became vacant 9/30/2010	10/1/2010	
Unit remained vacant through the prior fiscal year	9/30/2011	365 days
New lease effective for the unit	2/1/2012	123 days
Total number of unit turnaround days		488 days

Down time, make-ready time, and lease-up time

- *Down time* means, for each unit “turned” in the immediate past fiscal year, the days from the date the unit was discovered to be vacant or the date the lease expired, until the date the keys are handed to maintenance to start cleaning or fixing up. Count every day, even if the starting date was in the previous fiscal year.
 - For average days in down time, total the down time for all the turned units, and divide by the total number of vacant units turned around and leased in the PHA’s immediate past fiscal year.
- *Make-ready time* means, for each unit “turned” in the immediate past fiscal year, the days from the date maintenance receives the keys to the date maintenance turns the unit back to management for rental. For average days in make-ready, total the make-ready time for all the turned units, and divide by the total number of vacant units turned around and leased in the PHA’s immediate past fiscal year.
- *Lease-up time* means, for each “turned” unit in the immediate past fiscal year, the days from the date maintenance gives the keys back to management for rental to the effective date of the lease. For average days in lease-up time, total lease-up days for all the turned units and divide by the total number of vacant units turned around and leased in the PHA’s immediate past fiscal year.
- It’s the PHA’s discretion as to how it determines if a day should be included in down time, make-ready time or lease-up time if two of the activities occur on the same day.

Skips

- If the PHA knows about or suspects an abandonment of a unit (“skip”), the PHA must do due diligence to terminate the lease (and, in the meantime, assess maintenance and make-ready needs). State law enters here; for example, in many states, the PHA cannot take possession for 30 days after a “skip” is suspected.
 - Once the lease is officially terminated, the unit will be entered as EoP in PIC, and the unit is now officially vacant.

HOW TO TRACK VACANT UNIT TURNAROUND TIME

- Here is the annual formula. This should be tracked every month for each development, and then rolled up for portfolio data.

Annual Vacant Unit Turnaround

- Total number of turnaround days (do not count HUD-approved exempt days). Count all days in previous fiscal year or years that unit was vacant in this turn. We will call this “a”.
- Total number of vacant units turned around and leased in the PHA’s immediate past fiscal year. We will call this “b”.
- Average unit turnaround days ($a \div b$). We will call this “c”.
 1. Average number of calendar days in down time for all units leased in b.
 2. Average number of calendar days in make-ready time for all units leased in b.
 3. Average number of calendar days in lease-up time for all units leased in b.
 4. $1+2+3$ must equal c.

Notes

Tracking by Development

- The same formula applies to the monthly tracking of unit turnaround by development. The formula is the same here, in a slightly different format.

	<i>a</i>	<i>b</i>	<i>c</i>	<i>d</i>	<i>e</i>	<i>f</i>
Project	Move-ins this month	Down time days for all units in a.	Make-ready days for all units in a.	Lease-up days for all units leased in a.	Total Turnaround Days (b+c+d)	Average Turnaround Time (e/a)
Meade	5	4	21	16	41	8.2

- HUD's stop-loss kit contained two additional columns, evictions in the month, and move-outs. While these aren't part of the unit turnaround calculation, the property manager needs to track and report, so the PHA could include the columns. See below:

	<i>a</i>	<i>b</i>	<i>c</i>	<i>d</i>	<i>e</i>	<i>f</i>	<i>g</i>	<i>h</i>
Project	Move-ins this month	Move-outs this month	Evictions (included in b.)	Down time days for all units in a.	Make-ready days for all units in a.	Lease-up days for all units leased in a.	Total turnaround days (d+e+f)	Average turnaround time (g/a)
Meade	5	4		4	21	16	41	8.2

ANALYZING MAKE-READY AND LEASE-UP TIME

The Importance of Monitoring and Analyzing

- If your PHA/development consistently has an occupancy rate of 98 percent or above, there's no need to worry about turnaround time, other than to track it.

Notes

- If filling units is taking longer than it needs to, your occupancy rate will suffer. If the occupancy rate at a development is below a certain threshold (if you want to be a high performer, the threshold is 98 percent), or if the rate is slipping, you want to use turnaround time as a diagnostic.
- There's no reason to have a lot of days in down time. Make-ready and lease-up times are what you need to delve into if occupancy rate doesn't meet your acceptability threshold.

Learning Activity 14-1: Vacant Unit Turnaround Time**Case Study**

- It is your first day on the job. One of the properties you will manage is Juniper Gardens, which has only 12 units.
- Before you have time to do anything else, you are asked to calculate Juniper Gardens' vacant unit turnaround time. You are assessing your fiscal year January 1, 2018, through December 31, 2018. Unit E was vacant due to state law (tenant skipped and PHA couldn't enter for 30 days).

Unit	Date Vacated	Effective Date of New Lease	Vacant Unit Turnaround Days
A	11/08/17	3/6/18	
B	12/26/17	1/11/18	
C	N/A		
D	11/19/17		
E	12/11/17	1/12/18	
F	2/14/18	2/20/18	
G	9/30/18	10/7/18	
H	N/A		
I	N/A		
J	11/12/18	11/20/18	
K	12/10/18		
L	N/A		

- The average number of vacant unit turnaround days for Juniper Gardens in FY18 was:

Learning Activity 14-2: Vacant Unit Turnaround Time

- The following information was provided by your development team. You need to determine the total turnaround days and average turnaround time for this month and year-to-date.

Move-ins, Move-outs, and Unit Turnaround Time

	This Month	Year-to-Date
a. Move-ins	5	32
b. Move-outs	4	35
c. Evictions (included with move-outs)	2	4
d. Down time for units leased this month	2	17
e. Make-ready time for units leased this month	35	201
f. Lease-up time for units leased this month	17	144
g. Total turnaround days (d+e+f)		
h. Average turnaround time (g/a)		

- Where is it taking the longest in the turnaround process?
- How did the team perform this month as compared to the year-to-date?

Learning Activity 14-3: Occupancy Rate

- The following information was compiled from the past 12 monthly reports to determine the occupancy rate for the fiscal year.
- You need to complete the Gross Occupancy and Adjusted Occupancy columns for each bedroom size and the Totals row to send to your asset manager.

Physical Occupancy								
a	b	c	d	e	f	g	c/b%	c/(b-f)%
Unit Type	Total Units	Occupied Units	Capital Fund (Mod)	Other Exemptions	(d + e) Total Exemptions	Vacant Units	Gross Occupancy	Adjusted Occupancy
0 BR								
1 BR	30	29				1		
2 BR	110	102	4	2	6	8		
3 BR	60	53	2	3	5	7		
4 BR								
5 BR								
Total								

1. What percent of operating subsidy will your development receive?

- 0%
- 92%
- 97%
- 100%

2. Will you receive all 16 points under PHAS for Occupancy Rate? _____

Learning Activity 14-4: Non-Emergency Work Orders

- You need to determine the performance of your site-based maintenance staff in completing non-emergency work orders for this month and see if you are trending any better than the year's average so far overall as well as for tenant-generated non-emergency work orders.

Non-Emergency Work Orders		
	This Month	Year-to-Date
a. Beginning balance from previous month(s)	5	22
b. Number of non-emergency work orders active – include work orders active from previous month(s)	98	877
c. Total number of calendar days to complete non-emergency work orders in b (above)	678	6,927
d. Number within b (above) generated by tenant	33	359
e. Total number of calendar days to complete tenant-generated work orders in d (above)	194	2,148
f. Average number of calendar days to complete non-emergency work orders (c/b)		
g. Average number of calendar days to complete tenant-generated work orders (e/d)		

- How is your maintenance team doing this month as compared to year-to-date?

Public Housing Management
Public Housing Assessment System

Following are suggested reports to monitor performance of properties.

Development Performance Reports
Garden Glen (AMP 1)
June [Year]

1. Property Narrative

In June, we hosted the annual graduation picnic. Mayor Walker attended.

Occupancy continues to improve, and we hope to hit 98 percent next month. Rent collections reached 98 percent for the first time this month.

Two months ago, we started the use of a mini-model apartment to show vacant units (the kitchen and bathroom are decorated with attractive curtains, towels, and accessories). The mini-model gets moved to the longest-vacant unit.

2. Physical Occupancy

a Unit Type	b Total Units	c Occupied Units	d Capital Fund (Mod)	e Other Exemptions	f (d + e) Total Exemptions	g Vacant Units	c/b% Gross Occupancy	c/(b-f)% Adjusted Occupancy
0 BR								
1 BR	40	40				0	100%	100%
2 BR	120	116		2	2	4	96.7%	98.3%
3 BR	69	57				3	95.0%	95.0%
4 BR								
5 BR								
Total	220	213		2	2	7	96.8%	97.7%

3. Waiting List

Unit Type	Number of Applications			
	Total	RR01	PE03	PE01
1 BR	48	3	9	36
2 BR	72	9	20	43
3 BR	15	7	8	10
4 BR				
5 BR				

RR01 = application approved / ready to be housed / awaiting ready unit

PE03 = passed credit and criminal check, pending other verification

PE01 = application received

Public Housing Management
Public Housing Assessment System

Development Performance Reports	
Garden Glen (AMP 1)	
June [Year]	

4. Site-Based Waiting List Demographics (if applicable)

		Date of Site-Based 6-1-08	Current
Ethnicity	Hispanic or Latino	37%	38%
	Not Hispanic or Latino	63%	62%
Race	White	48%	47%
	Black/African American	38%	40%
	American Indian/Alaska Native	5%	5%
	Asian	8%	7%
	Native Hawaiian/Pacific Islander	1%	1%
Disability	Persons with Disabilities	2%	4%

5. Move-ins, Move-outs, and Unit Turnaround Time

	This Month	Year-to-Date
a. Move-ins	6	30
b. Move-outs	3	29
c. Evictions (included with move-outs)	0	2
d. Down time for units leased this month	3	30
e. Make-ready time for units leased this month	23	175
f. Lease-up time for units leased this month	25	138
g. Total turnaround days (d+e+f)	51	343
h. Average turnaround time (g/a)	8.5 days	11.4 days

6. List All Vacant Units and Their Status

Address	BR	Vacated Date	Projected Ready Date (mm/dd)	Anticipated Lease Date (mm/dd)	File Approved and Waiting?
415 Juniper #A	2	5/20	6/7	6/7	Yes
417 Juniper #C	2	5/20	6/7	6/7	Yes
413 Juniper #B	2	6/2	6/15	6/20	Yes
415 Juniper #B	3	6/16	6/30	6/30	Yes
415 Juniper #C	2	6/24	7/5	7/5	Yes
417 Juniper #D	3	6/30	7/8	7/8	No
411 Juniper #B	3	6/30	7/15	7/15	No

Continue on a separate sheet if necessary

Public Housing Management
Public Housing Assessment System

Development Performance Reports
Garden Glen (AMP 1)
June [Year]

7. Customer Traffic

Walk-ins inquiring about the property	10
Telephone inquiry calls	17
Applications taken	25
Interest letters with brochures sent	20

8. Promotions and Advertising Narrative

New color postcard was printed last month, and it seems to be increasing customer calls and walk-ins. New pictures were added to the website.

9. Recertifications / Annual

Outstanding at start of month	7
Due to be completed this month	32
Completed for this month	37
Ending backlog	2

10. Annual Unit Inspections

Total units to be inspected for the year	220
Number completed: start of month	172
Number inspected for the month	30
Number completed: year to date	202
Total left to be inspected for the year	18
Have all building system inspections been completed?	<input type="checkbox"/> Yes <input type="checkbox"/> No
If yes, enter date	6/12/17

11. Lease Enforcements This Month

Lease warnings issued	13
Lease violation conferences conducted	2
Abandonment letters	0
30-day lease termination notices issued	3
72-hour lease termination notices issued	2

Development Performance Reports**Garden Glen (AMP 1)**

June [Year]

12. Grievance Actions

List all applicants who requested informal hearing, and all tenants who requested/received hearings and who received informal settlements and hearings.

Applicant Informal Hearings			
Applicant	Reason	Date Conducted	Decision
Georgina Mata	Denial for past evictions and tenancy	6/2	Upheld
Matt Sills	Denial for criminal history	6/10	Upheld

Continue on a separate sheet if necessary

Grievance Hearings					
Tenant	Reason	Informal Settlement Conducted	Decision	Hearing Conducted	Decision
Josephine Crane	30-day notice for unauthorized person	6/8	Rescinded	No	Documentation presented at informal settlement
Elizabeth Mobutu	30-day notice for \$452 damages	6/20	Rescinded per VAWA, repayment agreement	No	
Les Leguine	6/15, served 30-day notice for drug criminal activity	Bypass due process		Bypass due process	Court case pending
Guillermo Rojo	6/17, served 30-day notice for unauthorized person	6/22	Upheld	Scheduled 7/1	

13. Evictions This Month

List all tenants on formal eviction/court summons, then all households for whom a judgment was issued, the date of the judgment, and the action (dismissal, eviction, etc.).

Resident Name	Reason (14-day/30-day/72-hour)	Summons Date	Judgment Action
Connie Calaveras	14-day nonpayment of rent	6/2	Upheld; lockout 6/30

Continue on a separate sheet if necessary

Development Performance Reports**Garden Glen (AMP 1)**

June [Year]

14. Non-Emergency Work Orders

	This Month	Year-to-Date
a. Beginning balance from previous months	8	34
b. Number of non-emergency work orders active – include work orders active from previous months	107	950
c. Total number of calendar days to complete non-emergency work orders in b (above)	790	7,618
d. Number within b (above) generated by tenant	21	238
e. Total number of calendar days to complete tenant-generated work orders in d (above)	143	1,736
f. Average number of calendar days to complete non-emergency work orders (c/b)	7.4 days	11.7 days
g. Average number of calendar days to complete tenant-generated work orders (e/d)	6.8 days	7.3 days

15. Emergency Work Orders

	This Month	Year-to-Date
a. Total requested/issued	2	82
b. Completed/abated within 24 hours in a (above)	2	82
c. Percent completed within 24 hours (b/a)	100%	100%

16. Rent Collections

	This Month	Year-to-Date
a. Rent owed. Do not include damage charges, late fees, excess utility charges, legal fees, or retroactive rent charges	32,737	348,799
b. Arrears, tenants in possession	1,257	4,820
c. Total charges (a+b)	33,994	353,619
d. Rent collected	32,154	341,620
e. Rent collection rate (d/a)	98.2%	97.9%

Development Performance Reports

Garden Glen (AMP 1)

June [Year]

17. Aged Receivables – Other Amounts Owed by Tenants (or attach report)

Tenant	Category Owed Late charges, maintenance charges, security deposit, pet deposit, legal fees, excess utility charges	Current (1-30 Days)	Over 30 Days	Over 60 Days	Over 90 Days

18. Delinquencies – Repayment Agreements

Repayment Agreements	
Total number of households	4
Amount	\$3,020
Number under up-to-date repayment agreements	3
Amount under up-to-date repayment agreements	\$3,020
Number under legal (other than repayment agreements)	0
Amount under legal (other than repayment agreements)	0
Amount not under repayment agreements or legal	0

19. Aged Payable Summary Report

	Current (1-30 Days)	Over 30 Days	Over 60 Days	Over 90 Days
Totals:				

20. Security Report

List number of security incidents at development by category. Property manager should attempt to obtain police incident reports where available. If possible, on a quarterly basis compare total development incidents with crime statistics in the community at large.

Type	Vandalism	B&E	Assault	Aggravated Assault	Robbery	Drug Related	Other	Total
Number of Incidents								

Development Performance Reports**Garden Glen (AMP 1)**

June [Year]

21. Fair Housing (Reasonable Accommodation Requests, FHEO Issues)

List all requests for reasonable accommodation, complaints about possible discrimination, and other FHEO issues received, pending, or finalized this month.

Unit	Request	Date Requested	Status
114	Request for live-in aide	6/8	Approved. Background check on live-in aide pending.
89	Request for transfer to balcony unit	4/30	Denied 6/2 per 504 coordinator. See documentation. No verification provided that need for balcony unit is related to disability.
05	Request for grab bars	6/5	Approved. Installed 6/12.

Management Review for Public Housing Projects

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

OMB Approval No. ____
Exp. ____

Public Reporting Burden for this collection is based on the size of the project and the level of compliance and is estimated to average .95 hours per respondent, and includes time required for public housing agencies to review and respond to information requests. The information is being collected for a management review of individual public housing projects and will be used to assess the management operations of projects under asset management. In accordance with the Paperwork Reduction Act of 1995 (44 U.S.C. 3501-3520), this agency may not collect this information and public housing agency program participants are not required to respond to this collection of information unless the collection displays a current valid OMB control number. OMB No. 2577-xxxx, expires xx/xx/xxxx.

PURPOSE: To assess management and oversight of public housing projects.

INSTRUCTIONS: This form is to be completed by HUD staff or contractors in accordance with the annual Management Plan, which will provide guidance regarding the portions of the form HUD-5834 that are required.

A. Conducting the On-Site Review

- Complete all applicable questions.
- Use additional sheets as necessary to complete applicable questions.
- Upon completion of the on-site review, hold a closeout session with the public housing property manager to discuss observations and conclusions.

B. After On-Site Review

- Record deficiencies, findings and corrective actions. The corrective action must include a requirement that the project manager correct identified errors and omissions. The project manager must also describe how systems, controls, policies and procedures were adjusted or changed to assure that the errors and omissions do not recur.
- Complete the Review Summary.
- Distribute the review report, with findings, concerns and corrective actions to the public housing agency.

C. Management Review Deficiency Follow up

- Conduct follow-up activity until all corrective actions as required in the Summary Report have been completed.

Form HUD-5834(XXXXX)
DRAFT FOR INTERNAL HUD USE ONLY

Management Review for Public Housing Projects

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

OMB Approval No. _____
Exp. _____

Review Summary

PHA Name and Code:
PHA Address:
Executive Director:
PHA Phone:
Review Code:
Review Dates:
PHA email address:

Project Name and Number:
Project Address:
Project Manager:
Project Phone:
Number of Units:
Occupancy Type:
Project email address:
DOFA Date:

Categories	Review Results	Scoring Management Operations			
	No. of Findings	Grades	Grade Values	Maximum Points	Actual Points
1. General Appearance and Security					
1.1 Appearance and Market Appeal					
1.2 Security					
2. Follow-up and Monitoring of Project Inspections					
2.1. Exigent Health and Safety (EHS) Deficiencies					
2.2 Lead-Based Paint Inspection Deficiencies					
3. Maintenance and Modernization					
3.1 Unit Inspections					
3.2 Work Orders					
3.3 Preventive Maintenance					
3.4 Energy Conservation/Utility Consumption					
3.5 Modernization					
4. Financial Management					
4.1 Accounts Payable					
4.2 Rent Collection					
4.3 Budget Management					
4.4 Procurement					
5. Leasing and Occupancy					
5.1 Vacancy Rate					
5.2 Turnaround Time					
5.3 Occupancy Review					
6. Tenant/Management Relations					
6.1 Economic Self-Sufficiency					
6.2 Resident Involvement in Project Administration					
7. General Management Practices					
7.1. Management Review Findings					
7.2. Other Prior Review Findings					
7.3. Insurance					
Totals			Sub-Total:		
			Adjustment		
			Adjustment		
			Adjustment		
			Total Score:		

Name and Title of Person Preparing this Report: (Please type or print):

Signature:
Date:

Name and Title of Person Approving this Report: (Please type or print):

Signature:
Date:

Form HUD-5834(xxxxx)
DRAFT FOR INTERNAL HUD USE ONLY

Management Review for Public Housing ProjectsU.S. Department of Housing and Urban Development
Office of Public and Indian HousingOMB Approval No. ____
Exp. ____**1. GENERAL APPEARANCE AND SECURITY****1.1 Appearance and Market Appeal**

Rate the project on curb appeal and marketability in the 12 categories listed below. Enter a "2" (highest rating), "1" (moderate rating), or "0" (lowest rating) for each category. Enter "EX" to exclude the category. Do not leave any boxes blank.

Category	Rating	Category	Rating
1. Project Entrance		7. Landscaping	
2. Building Exterior		8. Graffiti	
3. Paved Surfaces		9. Public Spaces and Amenities	
4. Fencing, Railing, Porches, Overhangs, Ramps		10. Windows	
5. Overall Project Appearance		11. Project Debris	
6. Trash		12. Units	

Overall Project Rating:

Comments:

1.2 Security

Please indicate if there is evidence of project crime, as indicated by the following (check all that apply):

- | | | |
|--|---|---|
| <input type="checkbox"/> Crime statistics | <input type="checkbox"/> Discussions with law enforcement | <input type="checkbox"/> Discussions with residents |
| <input type="checkbox"/> Law enforcement certification | <input type="checkbox"/> Reviewer Observations | <input type="checkbox"/> Other |

If any boxes above are checked, has the project developed, in coordination with the local government, an anti-crime security plan? Yes ☐ No ☐

Has the project formally adopted screening policies/procedures that deny admission based on the following criteria (all are required)? Yes ☐ No ☐

- Recent history of drug-related or violent criminal activity
- Evicted from federally assisted housing in last 3 years because of drug activity
- Currently engaging in the illegal use of controlled substance, or drug activity
- Convicted of manufacturing or producing methamphetamine on the premises of the project
- Sex offenders subject to a lifetime registration requirement
- Alcohol abuse or a pattern of drug or alcohol abuse that might threaten other residents

Has the project formally adopted policies/procedures to evict residents under the following circumstances (all are required)? Yes ☐ No ☐

- Drug-related criminal activity
- Alcohol abuse
- Criminal activity

Comments:

2. FOLLOW-UP AND MONITORING OF PROJECT INSPECTIONS**2.1 Follow-Up and Monitoring of Project Inspections and Observations (Sampling is at the reviewer's discretion.)**

Were all EHS deficiencies from the most recent PASS/REAC inspection repaired/abated in 24 hours or less? Yes ☐ No ☐ Unclear ☐ NA ☐

Comments:

2.2 Follow-Up and Monitoring of Lead-Based Paint Inspection – The following questions only apply to family properties, or elderly properties housing children under six years of age, that were constructed prior to 1978 or to properties with EIBLL reports.

Are required LBP inspections completed or revisions/augmentations of prior inspections completed, if necessary? Yes ☐ No ☐ Unclear ☐ NA ☐

Has a risk assessment been completed, if required? Yes ☐ No ☐ Unclear ☐ NA ☐

Form HUD-5834(XXXXX)
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Management Review for Public Housing Projects

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Has the PHA abated the LBP deficiencies or has it taken appropriate interim measures? Yes ☐ No ☐ Unclear ☐

If EIBLLs have been reported, have risk assessment and hazard reduction, if necessary, been completed/initiated? Yes ☐ No ☐ Unclear ☐ NA ☐

Comments:

3. MAINTENANCE

What was the project's latest Physical Assessment Sub-System score based on a 100 point scale?

3.1 Unit Inspections

Does the project have an adequate system to track annual unit inspections? Yes ☐ No ☐

For the 12-month period prior to the review, what percentage of required inspections was completed?

Comments:

3.2 Work Orders

Does the project have an adequate system to track tenant-generated maintenance work orders? Yes ☐ No ☐

What was the average completion time for tenant-generated maintenance work orders during the review period?

If the property has made progress in the preceding three years to reduce the period of time required to complete maintenance work orders, what was the average completion time for maintenance work orders for the month ending 3 years prior to the management review?

Comments:

3.3 Preventive Maintenance

Complete the table below to identify systems included in the preventive maintenance plan.

PREVENTIVE MAINTENANCE PLAN					
Systems	Does it apply to the property?	Included in Plan?	System	Does it apply to the property?	Included in Plan?
<input type="checkbox"/> HVAC	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	<input type="checkbox"/> Boilers	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
<input type="checkbox"/> Security Systems	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	<input type="checkbox"/> Emergency generators	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
<input type="checkbox"/> Fire Safety	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	<input type="checkbox"/> Other (Specify)	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
<input type="checkbox"/> Roof	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	<input type="checkbox"/> Other (Specify)	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
<input type="checkbox"/> Flashing, gutters, downspouts	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	<input type="checkbox"/> Other (Specify)	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
<input type="checkbox"/> Intercoms /Doorbells	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	<input type="checkbox"/> Other (Specify)	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
<input type="checkbox"/> Accessibility	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	<input type="checkbox"/> Other (Specify)	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
<input type="checkbox"/> Elevators	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	<input type="checkbox"/> Other (Specify)	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
<input type="checkbox"/> Mechanical	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	<input type="checkbox"/> Other (Specify)	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>

Has the preventive maintenance plan been implemented for all systems? Yes ☐ No ☐

If not, what percent of the elements in the preventive maintenance plan were implemented?

Is there an annual inspection of buildings, grounds, common areas, non-dwelling space and major systems? Yes ☐ No ☐

Comments:

3.4 Energy Conservation/Utility Consumption

Does the project have an energy audit completed or updated within the past 5 years? Yes ☐ No ☐

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Management Review for Public Housing Projects

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

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Is the energy audit less than 1 year old? Yes ☐ No ☐

Does the energy audit contain cost-effective recommendations? Yes ☐ No ☐

Has the project implemented all cost-effective measures? Yes ☐ No ☐

If not, and if the audit is more than one year old, has the project developed an implementation plan that identifies, at a minimum, the items listed below?
Yes ☐ No ☐

- Cost effective items from the audit
- Estimated cost of each item
- Planned funding source for each item
- Anticipated date of completion for each item

Is the project on schedule with the implementation plan, based on available resources? Yes ☐ No ☐

Comments:

3.5 Modernization

Has a physical needs assessment been completed for the project? Yes ☐ No ☐

If so, has it been updated in the last five years? Yes ☐ No ☐

Does it estimate the useful life remaining and modernization cost for all major building systems? Yes ☐ No ☐

Is there a plan and budget for addressing the project's modernization need for any major building system that is projected to reach the end of its useful life in the coming PHA fiscal year? Yes ☐ No ☐

Is it consistent with the PHA's Annual Plan? Yes ☐ No ☐

Was there a plan to perform modernization work at the project during the previous PHA fiscal year? Yes ☐ No ☐

Was the planned modernization work completed? Yes ☐ No ☐

Comments:

4. FINANCIAL MANAGEMENT/PROCUREMENT

4.1 Accounts Payable

Does the project have an adequate system to track accounts payable? Yes ☐ No ☐

For the most recent accounting period, how many invoices not in dispute were more than 30 but less than 60 days outstanding from the billing date?

For the most recent accounting period, how many invoices not in dispute were more than or equal to 60 days outstanding from the billing date?

Comments:

4.2 Rent Collection

Does the project have an adequate system to track and document rents collected and rents charged? Yes ☐ No ☐

For the most recent review period, what was the percentage of rents collected to rents charged?

Comments:

4.3 Budget Management

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Does the project have a Board-approved budget for the assessed fiscal year? Yes ☐ No ☐

Does the project budget indicate a shortfall (negative net cash flow) for the fiscal year? Yes ☐ No ☐

If yes, does the project have a plan to address the budgeted shortfall? Yes ☐ No ☐

Does the project manager receive regular operating statements showing current project revenue and expenditures? Yes ☐ No ☐

Does the operating statement show a year-to-date shortfall (negative net cash flow) for the fiscal year? Yes ☐ No ☐

If yes, are these shortfalls due to periodic/seasonal fluctuations in revenue/expenditures that will be corrected by fiscal year-end? Yes ☐ No ☐

If not, does the project have a plan to address the year-to-date shortfalls? Yes ☐ No ☐

Comments:

4.4 Procurement

Is the project operating under a procurement policy that is current, complete, and consistent with 24 CFR 85.36 and HUD Handbook 7460.8 REV-2? Yes ☐ No ☐

Does the PHA maintain adequate files and documentation for its procurement actions? Yes ☐ No ☐

Based on a sample of procurement contracts, has the project:

- Complied with requirements to promote full and open competition? Yes ☐ No ☐
- Prepared independent cost estimates where needed? Yes ☐ No ☐
- Performed a cost or price analysis to determine price reasonableness where needed? Yes ☐ No ☐
- Awarded contracts to the lowest, most responsive bidder, where appropriate? Yes ☐ No ☐
- Maintained a system of effective contract enforcement to assure contractor compliance? Yes ☐ No ☐
- Obtained prior HUD approval when required? Yes ☐ No ☐
- Complied with Section 3 requirements where applicable? Yes ☐ No ☐
- At a minimum requirement, does the PHA's procurement of energy conservation measures specify Energy Star or Federal Energy Management Program (FEMP) products and appliances? Yes ☐ No ☐
- If not, is there a justification on record as to why Energy Star or FEMP products were not required? Yes ☐ No ☐

Comments:

5. LEASING AND OCCUPANCY

5.1 Vacancy Rate

Does the project have an adequate system to track vacancy days? Yes ☐ No ☐

For the review period, what was the vacancy rate?

If the property has made progress in the preceding three years to reduce the vacancy rate, what was the vacancy rate for the month ending 3 years prior to the management review?

Comments:

5.2 Turnaround Time

Does the project have an adequate system to track vacant unit turnaround time? Yes ☐ No ☐

For the review period, what was the average turnaround time?

Comments:

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5.3 Occupancy Review (See forms HUD-5834-A and 5834-B)

Number of files reviewed:

Is income correctly computed and verified? Yes ☐ No ☐

Is rent correctly computed and verified? Yes ☐ No ☐

Were applicants denied admission in accordance with the Tenant Selection Plan? Yes ☐ No ☐

Were applicants admitted in accordance with the Tenant Selection Plan? Yes ☐ No ☐

Were move-outs processed correctly? Yes ☐ No ☐

Does the lease contain the required provisions? Yes ☐ No ☐

Has the grievance procedure been implemented appropriately? Yes ☐ No ☐

Has the project complied with electronic reporting requirements for the PIC Form-50058 system? Yes ☐ No ☐

Has the project complied with UIV procedures for safeguarding data, system security and the resolution of income discrepancies? Yes ☐ No ☐

Comments:

6. TENANT MANAGEMENT RELATIONS

6.1 Economic Self-Sufficiency

Do at least 85 percent of the households have a head, spouse or sole member that is an elderly or disabled person? Yes ☐ No ☐

What is the current percentage of adults with some form of employment income?

What is the current percentage of adults participating in self-sufficiency?

Identify self-sufficiency opportunities offered by project and/or opportunities where project coordinates with an outside agency to offer. Check all that apply for the review period:

Service	
<input type="checkbox"/> Child Care and/or child care seminars	<input type="checkbox"/> GED Classes
<input type="checkbox"/> Financial Counseling	<input type="checkbox"/> Vocational Training/Job Training
<input type="checkbox"/> Homeownership Counseling	<input type="checkbox"/> Other Self-sufficiency Activities (explain in comments)
<input type="checkbox"/> Substance Abuse Counseling	<input type="checkbox"/> Other Educational Activities (explain in comments)

Comments:

6.2 Resident Involvement in Project Administration

Identify resident involvement opportunities offered by the project at the time of the review. Check all that apply.

Service	
<input type="checkbox"/> Newsletter	<input type="checkbox"/> Contracts with Resident-Owned Businesses
<input type="checkbox"/> Neighborhood Watch Program	<input type="checkbox"/> Substance Abuse Counseling
<input type="checkbox"/> Regular Tenant Meetings	<input type="checkbox"/> Service Coordinator
<input type="checkbox"/> Resident Participation on Committees	<input type="checkbox"/> Neighborhood Networks Center
<input type="checkbox"/> Tenant Management	<input type="checkbox"/> Other (explain in comments)

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**Management Review for Public
Housing Projects**

U.S. Department of Housing and Urban Development
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7. GENERAL MANAGEMENT PRACTICES

7.1 Prior Management Review Findings

Does the project have outstanding findings/corrective actions from prior asset management reviews? Yes ☐ No ☐

Have corrective actions been initiated and is progress being made on resolving past review findings? Yes ☐ No ☐

Comments:

7.2 Other Prior Review Findings

Does the project have outstanding findings/corrective actions from other reviews? Yes ☐ No ☐

Have corrective actions been initiated and is progress being made on resolving other past review findings? Yes ☐ No ☐

Comments:

7.3 Insurance

Does the project have the insurance coverage required by the Annual Contributions Contract? Yes ☐ No ☐

Insurance Policies Held	Does it apply?	Is a current policy in place?
Commercial Property	<input type="checkbox"/>	<input type="checkbox"/>
Commercial General Liability	<input type="checkbox"/>	<input type="checkbox"/>
Workers' Compensation and Employers Liability	<input type="checkbox"/>	<input type="checkbox"/>
Owned and non-owned Automobile Liability	<input type="checkbox"/>	<input type="checkbox"/>
Theft, Disappearance and Destruction (if not covered in property insurance coverage.)	<input type="checkbox"/>	<input type="checkbox"/>
Employee Dishonesty (Fidelity Bond)	<input type="checkbox"/>	<input type="checkbox"/>
Boiler and Machinery	<input type="checkbox"/>	<input type="checkbox"/>
Directors and Officers or Public Liability	<input type="checkbox"/>	<input type="checkbox"/>
Law Enforcement Liability	<input type="checkbox"/>	<input type="checkbox"/>
Flood Insurance	<input type="checkbox"/>	<input type="checkbox"/>
Wind Insurance	<input type="checkbox"/>	<input type="checkbox"/>
Other (please specify)	<input type="checkbox"/>	<input type="checkbox"/>

Comments:

POST-TEST FOR UNIT 14

1. PHAS scores are confidential and are not made available to the public.
 - a. True
 - b. False
2. The four indicators under the PHAS Interim Rule are:
 - a. Physical Condition, Financial Condition, Management Review, and Capital Fund
 - b. Physical Condition, Financial Condition, Management Operations, and Resident Service and Satisfaction
 - c. Physical Condition, Financial Condition, Management Operations, and Capital Fund
 - d. Physical Condition, Financial Condition, Management Review, and Capital Expenses
3. Under the Physical Condition indicator, a PHA is issued a score:
 - a. Calculated by the PHA
 - b. Based on inspection done by the PHA
 - c. Based on inspection of 100 percent of the PHA's public housing stock
 - d. Based on the number and severity of deficiencies observed during the inspection
4. Which of the following statement(s) is/are true about the HUD-contracted (REAC) inspection process?
 - a. Although FHEO deficiencies are not scored, they will be reported to FHEO
 - b. The HUD-contracted inspection utilizes Uniform Physical Condition Standards
 - c. The inspection software begins with an assumption of a perfect score, and observed deficiencies carry point deductions
 - d. Health and safety deficiencies significantly affect the physical condition score
 - e. All the above statements are true
5. The PHA is not required to send audited financial reports, as HUD conducts confirmatory reviews.
 - a. True
 - b. False
6. The property manager and the property maintenance staff need to understand what HUD defines as exigent or severe health and safety deficiencies.
 - a. True
 - b. False

7. The property manager can improve financial performance of the property by:
 - a. Ensuring that annual reexaminations are performed on time and accurately
 - b. Making sound mortgaging and refinancing recommendations
 - c. Filling units
 - d. Collecting rents
 - e. c and d
8. Under the financial condition indicator, which of the following is/are true?
 - a. Each development will receive a financial condition score
 - b. Scores of all developments will roll up for the overall financial condition score of the PHA
 - c. The financial condition indicator applies only to public housing
 - d. All the above are true
9. Under the Financial Condition indicator, audited financials must be submitted to HUD within how many months after the PHA's fiscal year end?
 - a. Two months
 - b. Six months
 - c. Nine months
 - d. PHA policy
10. HUD will work with a troubled PHA for one year, and if the PHA substantially improves its PHAS score, will work with a troubled PHA for a maximum of:
 - a. Two years
 - b. Three years
 - c. 48 months
 - d. Until the PHA performance has improved or under judicial receivership
11. Although not scored under the Interim PHAS, what would the PHA analyze if occupancy rate is not up to standard?
 - a. Tenant Accounts Receivable
 - b. Current Ratio
 - c. Vacant Unit Turnaround Time
 - d. Per Unit Month (PUM)
12. The property manager and onsite staff contribute to high PHAS scores at the property by filling units quickly, collecting rents, and ensuring that health and safety deficiencies are corrected quickly.
 - a. True
 - b. False

Notes

UNIT 15 Post-Test Answer Keys

Unit 1: Roles and Responsibilities of the Public Housing Manager

1. b
2. c
3. d
4. a
5. c

20. b
21. d
22. e
23. c
24. a
25. e
26. a
27. c

Unit 2: Organization and Administration of PHAs and Programs

1. b
2. b
3. c
4. b
5. a
6. c
7. a
8. a
9. c
10. e
11. b
12. b
13. b
14. The board of commissioners
15. a
16. Congress
17. a
18. c
19. b

Unit 3: Managing Nondiscrimination Compliance

1. c
2. c
3. a
4. b
5. b
6. d
7. b
8. b
9. a
10. b
11. b
12. b
13. d
14. b
15. d

Unit 4: Eligibility

1. b
2. a
3. b
4. e
5. a
6. c
7. d
8. c
9. d
10. d
11. b
12. a
13. a
14. b

Unit 5: Tenant Selection

1. b
2. b
3. b
4. b
5. a
6. b
7. a
8. b
9. b
10. a

Unit 6: Income

1. Aged 62 or older
2. e
3. b
4. Adjusted annual income
5. Head, spouse, foster children, live-in aide
6. c
7. a
8. c
9. e
10. a
11. e
12. e
13. e
14. c
15. b
16. b
17. a
18. b
19. a
20. b
21. b
22. b
23. b
24. b
25. b
26. a
27. b

- 28. b
- 29. b
- 30. c
- 31. c
- 32. b

Unit 7: Rent Calculations

- 1. d
- 2. Total Tenant Payment. It is the greater of 10 percent of total monthly income, 30 percent of monthly adjusted income, the welfare rent, or the PHA's minimum rent.
- 3. a
- 4. b
- 5. a
- 6. a
- 7. c
- 8. b

Unit 8: Leasing

- 1. e
- 2. b
- 3. c
- 4. d
- 5. b
- 6. b
- 7. a
- 8. b
- 9. b
- 10. b

- 11. a
- 12. b
- 13. b
- 14. a
- 15. b
- 16. a
- 17. b

Unit 9: Continued Occupancy

- 1. a
- 2. PHA-required
- 3. b
- 4. b
- 5. a
- 6. a
- 7. a
- 8. b

Unit 10: Terminations

- 1. c
- 2. b
- 3. a
- 4. b
- 5. a
- 6. a, d, e, b, c
- 7. b
- 8. a
- 9. a
- 10. a
- 11. b

12. a
13. c
14. c
15. c
16. d
17. c
18. a
19. b
20. b
21. c
22. e
23. a
24. b
25. a
26. a
27. b
28. b

Unit 11: Resident Relations and Self-Sufficiency

1. Family Self-Sufficiency (FSS)
2. b
3. a
4. b
5. d

Unit 12: Understanding and Managing the Budget

1. c
2. a
3. d
4. a
5. a
6. a
7. d
8. e
9. a
10. b
11. a
12. d
13. b
14. c
15. a
16. d
17. b
18. d
19. b
20. d
21. b
22. d
23. c

Unit 13: Property Management

1. d
2. a
3. corrective, preventive, custodial
4. custodial maintenance
5. corrective maintenance
6. preventive maintenance
7. d
8. an emergency
9. work order log
10. a
11. d
12. b
13. a
14. d
15. b

Unit 14: Public Housing Assessment System

1. b
2. c
3. d
4. e
5. b
6. a
7. e
8. d
9. c
10. a
11. c
12. a

Notes

PHA Case Study

PHA PROFILE

BACKGROUND

PHA Name: Hilldale Housing Authority

Location: Hilldale, Georgia

Metropolitan
Statistical Area: Atlanta, Georgia

Fiscal Year: Jan - Dec

Reporting Model: Asset Management with a Central Office Cost Center (COCC)

PROGRAMS AND ACTIVITIES:

Public Housing Program

The Hilldale Housing Authority has two public housing developments totaling 250 units. The following table and narrative provides information on the unit count and tenant characteristics of each project.

Development Name	Tenant Characteristics	ACC Units
Willow Run	Family	150
Juniper Gardens	Senior	100
Total		250

- **Willow Run.** This development consists of 150 family units constructed in 1965. The development was extensively renovated in 1988 and is currently in good physical condition. All 150 units are walkup type and are located on a single site with 30 buildings. Parking spaces (1 per unit) are adequate given that many families do not have vehicles. The property is adequately landscaped with lawn, trees, and shrubs. The development's PNA shows that the physical improvement needs of the development over the next five years total less than \$10,000 per unit. The project is desirable and has maintained a 99 percent occupancy rate over the years and has a low turnover rate.
- **Juniper Gardens.** This development is a high-rise tower consisting of 100 senior units constructed in 1984. It has not been rehabilitated. Occupancy is currently 96 percent and has needs for various system replacements, including roofs, windows, and elevators.

Current Maintenance Staffing. Hilldale's maintenance function has been completely decentralized except for an HVAC Specialist. This person is charged by the COCC to the developments at a market fee of \$68 per hour for actual hours worked at each development. The HVAC Specialist also performs HQS inspections for the HCV program and acts as the Modernization Coordinator. The job classification of the maintenance staff assigned to the public housing developments are listed below.

Position	Willow Run # of Positions	Juniper Gardens # of Positions
Maintenance Lead Mechanic	1	1
Mechanic 1	1	0
Laborer	1	1 (part-time)

Intake. Applications are taken at the central office for each development by the administrative assistant. Fifty percent of this person's time is treated as a front-line allocated position and charged directly to each of the developments based on the turnover rate.

Work Order Processing. Work orders are taken at each development.

Rent Collection. Rents are collected at each development.

Fringe Rate. Currently the PHA's employee benefit fringe rate is 38 percent.

Capital Fund Grant

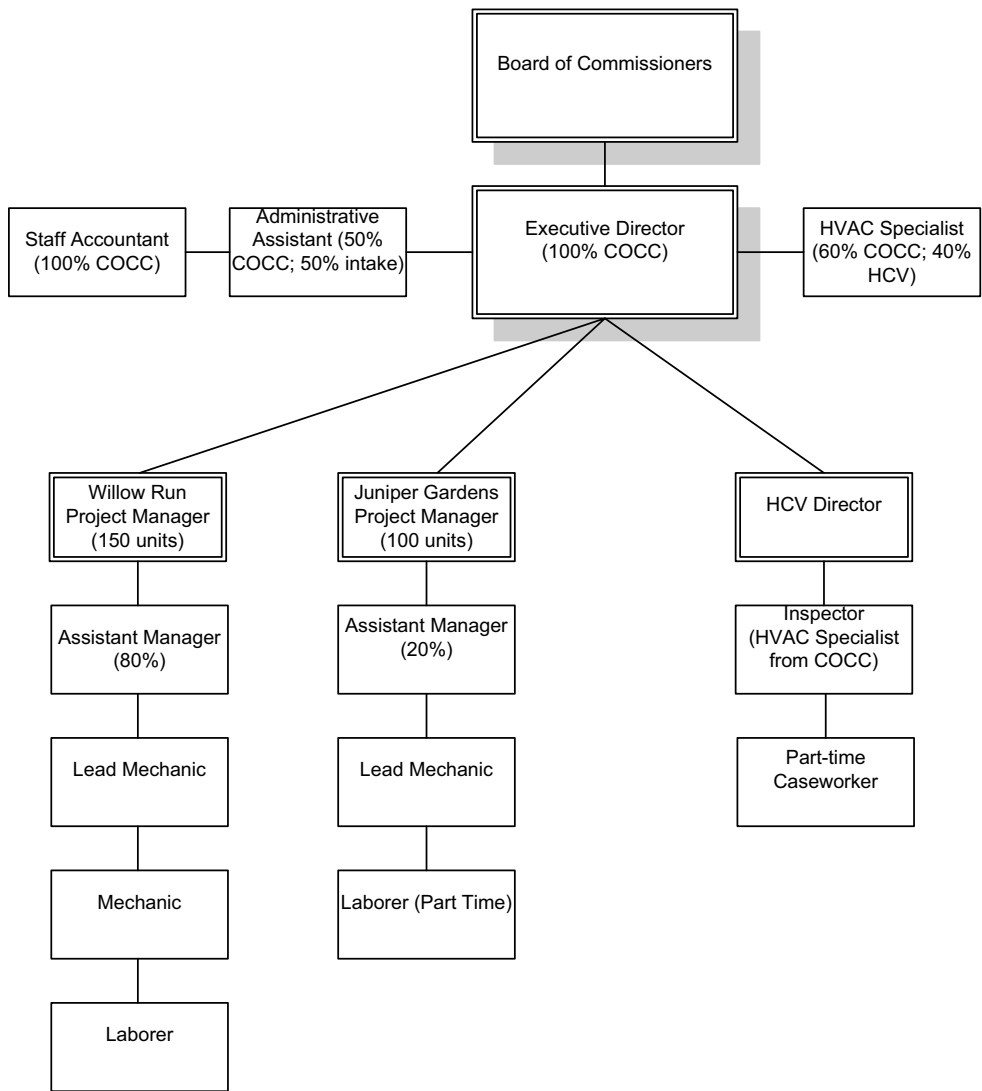
The PHA has a capital grant of \$500,000.

Housing Choice Voucher Program

The PHA administers an allocation of 300 housing choice vouchers. The direct staff of the program includes one program manager and one assistant case worker. Additionally, the HVAC specialist acts as the inspector and charges time accordingly (about 2 days/week).

Hilldale Housing Authority

Organizational Chart



Hilldale Housing Authority Properties



Central Office Cost Center

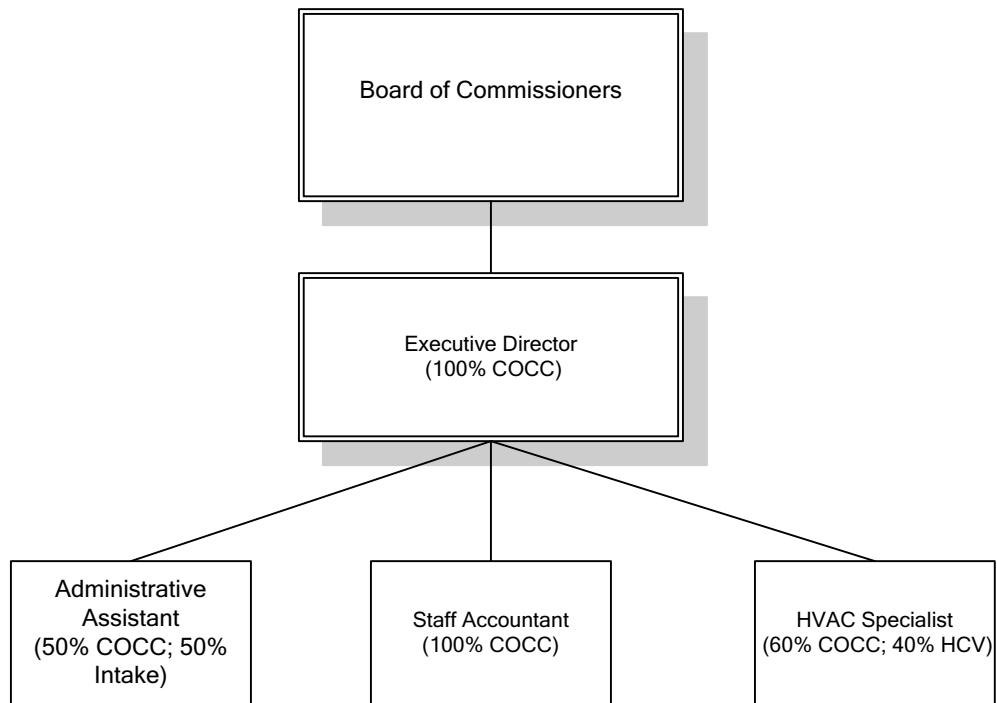
Juniper Gardens



Willow Run

Hilldale Housing Authority

Central Office Cost Center Organizational Chart



COCC Operating Budget – for year ending 12/31/17

Revenue

Public Housing Property Management Fees	\$152,744
Public Housing Bookkeeping Fees	22,005
HCV Program Management Fees	42,336
HCV Program Bookkeeping Fees	26,460
Public Housing Asset Management Fees	30,000
Capital Fund Management Fee	50,000
Sec. 202 Project Property Management Fee	31,752
Fee-for-Service Income	25,704
Interest Income	3,375
Total Revenues:	\$384,376

Administrative Expenses

Salaries	\$147,480
Benefits	66,366
Legal	11,000
Staff Training	4,500
Travel and Meetings	3,500
Audit Cost	5,000
Computer Expense	11,000
Vehicle Expense	7,000
Office Supplies	4,000
Total Administrative Expenses:	\$259,846

Office Utility Expense

Gas	\$11,600
Electricity	7,100
Total Utilities Expense:	\$18,700

Maintenance Expense

Salaries	\$26,040
Benefits	11,718
Materials	7,900
Vehicle costs	8,000
Contracts	3,000
Total Maintenance Expenses:	\$56,658

Other General Expense

Insurance	\$7,320
Misc.	4,000
Total Other General Expenses:	\$11,320

Total Expenses:	\$346,524
------------------------	------------------

Profit (loss) on COCC Operations:	\$37,852
--	-----------------

COCC Staffing Allocation

Position	Salary	COCC	Section 8	Public Housing	Other
Executive Director	\$90,000	100%			
Administrative Assistant	\$24,960	50%		50%	
Staff Accountant	\$45,000	100%			
HVAC Specialist/Mod Coordinator	\$43,400	60%	40%		

FIVE-YEAR CAPITAL FUND PLAN

WORK ACTIVITES

Project	YEAR 1	YEAR 2	YEAR 3	YEAR 4	YEAR 5
Willow Run	Landscaping (\$35,000)	Fencing (\$75,000)	Sewers (\$125,000)		Appliances (\$67,500) Paving (\$57,500)
Juniper Gardens	Roofs (\$100,000) Intercom (\$20,000) Landscaping (\$20,000)	Roofs (\$100,000)	Windows (\$50,000)	Windows (\$50,000) Elevators (\$125,000)	Windows (\$50,000)
Inspections	\$25,000	\$25,000	\$25,000	\$25,000	\$25,000
Management Fee	\$50,000	\$50,000	\$50,000	\$50,000	\$50,000
Totals	\$500,000	\$500,000	\$500,000	\$500,000	\$500,000

TRAINING ACTION PLAN

The measure of a successful seminar is determined by what happens *after* the seminar. Successful training is not just the acquisition of knowledge; it is the *application* of the knowledge. This action plan will help you to stay focused as you apply your skills and knowledge to contribute to the overall success of your housing agency. It is designed to help you *and* your PHA to derive the maximum benefit from this training opportunity. It contains four parts:

PERSONAL “TO-DO” LIST

During the seminar, you may hear ideas and suggestions intended to improve your competency and performance. Your instructor may recommend that you read a HUD notice or a regulation, or that you review certain course materials or case studies. You may learn of a more efficient way to organize a work function or to complete a task. As you become aware of individual items that you want to accomplish when you return to your agency, record them on your “TO-DO” list, so that you do not forget them. Your personal development and success is our goal. Do this for *you*.

HOUSING PROGRAM “TO-DO” LIST

During the seminar, there will be much discussion of HUD regulations pertaining to the topic of this course. Your instructor will show you how to use your NMA masterbook as a reference tool to research regulations and HUD guidance so that you can apply them properly. You will also hear how other agencies perform the same functions that you do but in a very different way. Your housing program “TO-DO” list is designed for you to make notes of things you may want to check when you get back to your agency. Jot them down and make a note of any reference pages in your masterbook that apply.

Training Action Plan

**ACOP REVIEW
CHECKLIST**

As the HUD regulations and program guidelines are discussed, your instructor will point out areas where HAs have discretion to develop policies and may suggest that you check yours. Make note of these on your ACOP REVIEW CHECKLIST. You may also learn of areas in which policy *should* be developed.

**IDEA DESIGN
WORKSHEET**

As the result of this training, if you identify an area in your program operation in which you want to make constructive recommendations to a supervisor or to management, this form will help you to organize your ideas. It is important that you present your ideas in a positive, professional way, explain the benefits of your idea, and provide the appropriate HUD reference, if applicable.

[illegible]

IDEA DESIGN WORKSHEET

IDEA

CURRENT POLICY, PROCEDURE, OR PRACTICE

BENEFITS OF THIS RECOMMENDATION

STEPS NECESSARY TO IMPLEMENT

APPLICABLE HUD REFERENCES

IMPROVING TEST-TAKING SKILLS

Below are some pointers that may assist you in minimizing the pressure many test takers place on themselves during testing.

1. Only ONE answer is correct for each question

Marking two answers to the same question on the Scantron answer sheets will be scored as a wrong answer.

2. Answer one question at a time

You can only answer one question at a time. Don't be overwhelmed by the total number of questions on the test. Isolate each question as you read and answer it. If possible, cover the questions above and below the one you are working on.

3. Work through the questions at a steady pace

When you read a question and have absolutely no idea what the answer is, make a check mark next to it in the test booklet and move on. Don't waste a lot of time pondering over questions you can't answer; go back to them after you have finished the test. Often, another question later on in the test will trigger the answer to the one you thought you didn't know.

4. Identify the core topic

Sometimes when reading multiple-choice test questions, test takers get hung up in the words. Try to find the core topic of the question, isolate it, and ask yourself questions that trigger what you know about the topic.

For example, let's take a question that pertains to income limits. Here are questions to ask yourself that may help identify the correct answer.

- Does this question pertain to applicants or participants? (because the rules are different)
- Does this question pertain to families entering the program or families moving/transferring to another unit?
- What is this question trying to see if I know?

5. Identify key words and phrases

When you read a true or false question, remember that if *any part* of the question is false, the *whole statement* is false. Ask yourself, “does this statement stand on its own as totally true?” If you find yourself thinking, “well, it would be true if...”– it’s probably false.

Also use this method to evaluate the multiple-choice answer options– if *any part* of an answer is wrong, then it is the *wrong* answer.

6. Turn a multiple-choice question into true or false questions

If you cannot quickly identify the correct answer, you can usually eliminate one or two incorrect answers. After you have done this, take each of the remaining answers, add it to the end of the multiple-choice question and see if it is a true or false statement.

7. When you review, focus on the tough questions

When they finish a test, some test takers go back and review every question—and sometimes they begin to doubt their answers. When they start to second-guess themselves, they often change answers that were correct. If you make a check mark next to the questions in your test booklet that you are not sure of, you can quickly identify the tough ones and use your time to review them.

8. Answer all the questions, even if you have to guess at some

If after going through the whole exam, there are still questions that have you stumped, first rule out the obviously wrong answers, then make your best guess at which of the remaining options is the right answer. Even a blind guess improves your chances of scoring a point.

9. Visually inspect your answer sheet before you turn it in to the instructor

Look for incidental or unintentional pencil marks and erase them. If you changed an answer, make sure that the pencil mark for the first answer is completely erased.

10. Make sure that you did not inadvertently skip a question or a line on the Scantron answer sheet. This would cause all of the following answers to be incorrect.

Before turning in your Scantron sheet, review it to make sure that the number of lines filled in matches the number of questions on the test and that no lines are blank.