



LACDA

Los Angeles County Development Authority

**ADMINISTRATIVE PLAN**

**July 1, 2025**



# Contents

PREFACE: HOUSING OPPORTUNITIES THROUGH MODERNIZATION ACT OF 2016 (HOTMA).....	i.
NATIONAL STANDARDS FOR THE PHYSICAL INSPECTION OF REAL ESTATE (NSPIRE).....	xv.

## **CHAPTER 1: POLICIES AND OBJECTIVES ..... 1-1**

1.1	INTRODUCTION .....	1-1
1.2	PURPOSE OF THE PLAN .....	1-1
1.3	ADDITION OF PROGRAMS.....	1-2
1.4	LOCAL OBJECTIVES.....	1-2
1.5	JURISDICTION.....	1-2
1.6	RENTAL ASSISTANCE PROGRAMS .....	1-2
1.7	FAIR HOUSING AND EQUAL OPPORTUNITY POLICY .....	1-3
1.8	NON-DISCRIMINATION POLICY .....	1-4
1.9	OPERATING RESERVES .....	1-5
1.10	SERVICE POLICY.....	1-5
1.11	LIMITED ENGLISH PROFICIENCY .....	1-10
1.12	MEANINGFUL ACCESS; FOUR-FACTOR ANALYSIS.....	1-10
1.13	DEFINITIONS .....	1-11
1.14	LANGUAGE ASSISTANCE .....	1-11
1.15	BABEL NOTICE.....	1-11
1.16	INTERPRETIVE (ORAL) SERVICES.....	1-12
1.17	TRANSLATION OF DOCUMENTS.....	1-13
1.18	MONITORING .....	1-14
1.19	LEP PLAN DISTRIBUTION AND TRAINING .....	1-14
1.20	FAMILY OUTREACH .....	1-15
1.21	OWNER OUTREACH .....	1-15
1.22	PRIVACY RIGHTS.....	1-15
1.23	MONITORING PROGRAM PERFORMANCE .....	1-16
1.24	TERMINOLOGY .....	1-16

## **CHAPTER 2: ADMISSION ELIGIBILITY FACTORS AND APPLICANT REQUIREMENTS ..... 2-1**

2.1	INTRODUCTION .....	2-1
2.2	ELIGIBILITY FACTORS AND REQUIREMENTS.....	2-1
2.3	FAMILY COMPOSITION.....	2-2
2.4	INCOME LIMITATIONS.....	2-5
2.5	ELIGIBILITY OF STUDENTS .....	2-6
2.6	CITIZENSHIP/ELIGIBLE IMMIGRATION STATUS.....	2-6
2.7	SOCIAL SECURITY NUMBER VERIFICATION REQUIREMENTS.....	2-7
2.8	DENIALS OF ASSISTANCE .....	2-7
2.9	SUITABILITY OF FAMILY .....	2-13
2.10	DENYING ADMISSION TO INELIGIBLE FAMILIES.....	2-13
2.11	PROHIBITION AGAINST DENIAL OF ASSISTANCE TO VICTIMS OF DOMESTIC VIOLENCE, DATING VIOLENCE, SEXUAL ASSAULT AND STALKING.....	2-13

## **CHAPTER 3: ADMINISTRATION OF THE WAITING LIST ..... 3-1**

3.1	INTRODUCTION .....	3-1
-----	--------------------	-----

3.2	HOW TO REGISTER.....	3-1
3.3	TIME OF SELECTION.....	3-3
3.4	CROSS-LISTING OF PUBLIC HOUSING AND SECTION 8 WAITING LISTS.....	3-3
3.5	PURGING THE WAITING LIST.....	3-4
3.6	APPLICATION POOL.....	3-5
<b>CHAPTER 4: ADMISSION PROCESS .....</b>		<b>4-1</b>
4.1	INTRODUCTION .....	4-1
4.2	APPLICATION PROCEDURES.....	4-1
4.3	SELECTION AND FUNDING SOURCES .....	4-5
4.4	LOCAL PREFERENCES .....	4-6
4.5	WAITING LIST REMOVAL OR REINSTATEMENT.....	4-11
4.6	DENIAL OF ASSISTANCE.....	4-11
4.7	FINAL DETERMINATION AND NOTIFICATION OF ELIGIBILITY .....	4-11
4.8	HUD WAITING LIST REQUESTS .....	4-12
<b>CHAPTER 5: SUBSIDY STANDARDS.....</b>		<b>5-1</b>
5.1	INTRODUCTION .....	5-1
5.2	DETERMINATION OF VOUCHER SIZE.....	5-1
5.3	OCCUPANCY STANDARDS .....	5-3
5.4	EXCEPTIONS FOR FOSTER CHILDREN .....	5-3
5.5	FLEXIBILITY OF UNIT SIZE ACTUALLY SELECTED.....	5-3
<b>CHAPTER 6: DETERMINING THE TOTAL TENANT PAYMENT AND THE ABSENCE POLICY.....</b>		<b>6-1</b>
6.1	INTRODUCTION .....	6-1
6.2	INCOME DEFINITIONS .....	6-1
6.3	INCOME DEDUCTIONS .....	6-1
6.4	INCOME INCLUSIONS AND EXCLUSIONS .....	6-3
6.5	FAMILY ASSETS .....	6-11
6.6	CALCULATING INCOME AND FAMILY CONTRIBUTION.....	6-12
6.7	PRORATION OF ASSISTANCE FOR "MIXED" FAMILIES .....	6-14
6.8	DE MINIMIS ERRORS .....	6-14
6.9	ABSENCE POLICY .....	6-15
<b>CHAPTER 7: VERIFICATION PROCEDURES.....</b>		<b>7-1</b>
7.1	INTRODUCTION .....	7-1
7.2	METHODS OF VERIFICATION AND TIME ALLOWED.....	7-1
7.3	TIMELINESS OF VERIFICATIONS .....	7-2
7.4	RELEASE OF INFORMATION .....	7-4
7.5	COMPUTER MATCHING.....	7-5
7.6	ITEMS TO BE VERIFIED.....	7-5
7.7	VERIFICATION OF INCOME .....	7-6
7.8	INCOME FROM ASSETS.....	7-10
7.9	VERIFICATION OF ASSETS.....	7-11
7.10	VERIFICATION OF ALLOWABLE DEDUCTIONS FROM INCOME .....	7-12
7.11	VERIFYING NON-FINANCIAL FACTORS .....	7-14
<b>CHAPTER 8: VOUCHER ISSUANCE AND BRIEFINGS.....</b>		<b>8-1</b>
8.1	INTRODUCTION .....	8-1
8.2	ISSUANCE OF HOUSING CHOICE VOUCHERS .....	8-1
8.3	BRIEFING TYPES AND REQUIRED ATTENDANCE.....	8-1

8.4	INFORMATION PROVIDED AT THE BRIEFING SESSION.....	8-2
8.5	ENCOURAGING PARTICIPATION IN AREAS WITHOUT LOW INCOME OR MINORITY CONCENTRATION.....	8-4
8.6	SECURITY DEPOSIT REQUIREMENTS.....	8-5
8.7	TERM OF VOUCHER.....	8-5
8.8	VOUCHER ISSUANCE DETERMINATION FOR SPLIT HOUSEHOLDS.....	8-7
8.9	REMAINING MEMBER OF FAMILY – RETENTION OF VOUCHER.....	8-8
8.10	FAMILY VOLUNTARILY RELINQUISHES HOUSING CHOICE VOUCHER.....	8-8
<b>CHAPTER 9: THE NEW CONTRACT PROCESS - REQUEST FOR TENANCY APPROVAL AND CONTRACT EXECUTION.....</b>		<b>9-1</b>
9.1	INTRODUCTION.....	9-1
9.2	REQUEST FOR TENANCY APPROVAL.....	9-1
9.3	ELIGIBLE TYPES OF HOUSING.....	9-2
9.4	RESTRICTIONS ON RENTING TO RELATIVES.....	9-5
9.5	LEASE AGREEMENTS.....	9-5
9.6	INITIAL INSPECTIONS.....	9-7
9.7	RENT LIMITATIONS.....	9-7
9.8	RENT REASONABLENESS.....	9-7
9.9	WHEN A NEW CONTRACT IS REQUIRED FOR AN EXISTING TENANCY.....	9-7
9.10	INFORMATION TO OWNERS.....	9-7
9.11	OWNER DISAPPROVAL.....	9-8
9.12	CHANGE IN TOTAL TENANT PAYMENT (TTP) PRIOR TO HAP EFFECTIVE DATE.....	9-9
9.13	HAP CONTRACT EXECUTION PROCESS.....	9-9
9.14	CHANGE IN OWNERSHIP.....	9-11
<b>CHAPTER 10: HOUSING QUALITY STANDARDS AND INSPECTIONS.....</b>		<b>10-1</b>
10.1	INTRODUCTION.....	10-1
10.2	TYPES OF INSPECTIONS.....	10-1
10.3	HOUSING QUALITY STANDARDS (HQS).....	10-1
10.4	LEAD-BASED PAINT.....	10-10
10.5	INSPECTIONS SCHEDULE.....	10-13
10.6	NEW CONTRACT (INITIAL) INSPECTIONS.....	10-13
10.7	BIENNIAL AND INTERIM INSPECTIONS.....	10-13
10.8	FAILED INSPECTIONS: DETERMINATION OF RESPONSIBILITY.....	10-14
10.9	FAILED INSPECTIONS: WHEN DEFICIENCIES MUST BE CORRECTED.....	10-15
10.10	CONSEQUENCES OF VERIFIED FAMILY-CAUSED DEFICIENCIES.....	10-16
10.11	CONSEQUENCES OF VERIFIED OWNER-RELATED DEFICIENCIES.....	10-17
10.12	QUALITY CONTROL INSPECTIONS.....	10-18
<b>CHAPTER 11: PAYMENT STANDARDS AND DETERMINING RENT REASONABLENESS.....</b>		<b>11-1</b>
11.1	INTRODUCTION.....	11-1
11.2	SETTING PAYMENT STANDARDS.....	11-1
11.3	SMALL AREA FAIR MARKET RENT (SAFMRS).....	11-3
11.4	EXCEPTION PAYMENT STANDARDS.....	11-3
11.5	UNIT-BY-UNIT EXCEPTIONS.....	11-4
11.6	SUCCESS RATE PAYMENT STANDARD AMOUNTS.....	11-4
11.7	DECREASES IN THE PAYMENT STANDARD BELOW THE BASIC RANGE.....	11-5
11.8	APPLYING PAYMENT STANDARDS.....	11-5
11.9	CHANGES IN PAYMENT STANDARDS.....	11-5
11.10	RENT REASONABLENESS DETERMINATIONS.....	11-6
11.11	WHEN RENT REASONABLENESS DETERMINATION ARE REQUIRED.....	11-7

11.12	METHODOLOGY USED FOR ESTABLISHING UNIT COMPARABILITY .....	11-8
11.13	METHODOLOGY FOR USED FOR DETERMINING RENT REASONABLENESS OF ROOM- FOR-RENT .....	11-10
<b>CHAPTER 12: RE-EXAMINATION .....</b>		<b>12-1</b>
12.1	INTRODUCTION .....	12-1
12.2	STREAMLINED ANNUAL RE-EXAMINATIONS.....	12-2
12.3	RE-EXAMINATION NOTIFICATION TO THE FAMILY.....	12-2
12.4	INTERIM RE-EXAMINATION.....	12-4
12.5	CHANGES IN FAMILY COMPOSITION .....	12-6
12.6	CONTINUATION OF ASSISTANCE FOR “MIXED” FAMILIES .....	12-8
<b>CHAPTER 13: ALLOWABLE MOVES/PORTABILITY .....</b>		<b>13-1</b>
13.1	INTRODUCTION .....	13-1
13.2	ALLOWABLE MOVES AND RESTRICTIONS .....	13-1
13.3	PROCEDURES FOR MOVES FOR CURRENT PARTICIPANTS.....	13-3
13.4	OUTGOING PORTABILITY PROCEDURES .....	13-4
13.5	INCOMING PORTABILITY PROCEDURES .....	13-5
<b>CHAPTER 14: CONTRACT TERMINATIONS .....</b>		<b>14-1</b>
14.1	INTRODUCTION .....	14-1
14.2	DESCRIPTION OF DOCUMENTS.....	14-1
14.3	TERMINATION OF THE LEASE BY THE FAMILY: MOVES .....	14-1
14.4	TERMINATION OF THE LEASE BY THE OWNER: DOMESTIC ABUSE .....	14-1
14.5	MUTUAL TERMINATION OF THE LEASE .....	14-3
14.6	TERMINATION OF THE HAP CONTRACT BY THE LACDA.....	14-3
14.7	HAP PAYMENTS AND CONTRACT TERMINATIONS .....	14-5
<b>CHAPTER 15: TERMINATION OF ASSISTANCE.....</b>		<b>15-1</b>
15.1	INTRODUCTION .....	15-1
15.2	FORMS OF TERMINATION .....	15-1
15.3	FAMILY NO LONGER REQUIRES ASSISTANCE (ZERO ASSISTANCE) .....	15-1
15.4	MANDATORY TERMINATION OF ASSISTANCE .....	15-1
15.5	MANDATORY POLICIES AND OTHER AUTHORIZED TERMINATIONS.....	15-3
15.6	OTHER AUTHORIZED REASONS FOR TERMINATION OF ASSISTANCE .....	15-5
15.7	TERMINATING THE ASSISTANCE OF DOMESTIC VIOLENCE, DATING VIOLENCE, SEXUAL ASSAULT OR STALKING VICTIMS AND PERPETRATORS.....	15-6
15.8	FAMILY OBLIGATIONS.....	15-9
15.9	CONSIDERATION OF CIRCUMSTANCES .....	15-13
15.10	REQUIRED EVIDENCE.....	15-14
15.11	CONFIDENTIALITY OF CRIMINAL RECORDS.....	15-14
15.12	DISCLOSURE OF CRIMINAL RECORDS TO FAMILY .....	15-14
15.13	NOTICE OF TERMINATION OF ASSISTANCE .....	15-15
15.14	OPTION NOT TO TERMINATE FOR MISREPRESENTATION OF INCOME.....	15-15
15.15	MISREPRESENTATION IN COLLUSION WITH OWNER .....	15-15
15.16	REPORTING TERMINATED FAMILIES TO ENTERPRISE INCOME VERIFICATION (EIV) SYSTEM.....	15-15
<b>CHAPTER 16: INFORMAL REVIEWS/HEARINGS .....</b>		<b>16-1</b>
16.1	INTRODUCTION .....	16-1
16.2	REASONABLE ACCOMMODATION .....	16-1
16.3	INFORMAL REVIEW PROCEDURES FOR APPLICANTS.....	16-1
16.4	INFORMAL HEARING FOR PARTICIPANTS.....	16-2
16.5	WHEN AN INFORMAL HEARING IS NOT REQUIRED .....	16-6

**CHAPTER 17: OWNER OR FAMILY DEBTS TO THE LACDA..... 17-1**

17.1	INTRODUCTION .....	17-1
17.2	REPAYMENT AGREEMENTS FOR FAMILIES .....	17-1
17.3	FAMILY DEBTS OWED FOR UTILITY REIMBURSEMENT PAYMENTS .....	17-3
17.4	FAMILY DEBTS DUE TO FRAUD/NON-REPORTING OF INFORMATION .....	17-3
17.5	FAMILY DEBTS PAID IN FULL .....	17-4
17.6	OWNER DEBTS TO THE LACDA .....	17-4
17.7	WRITING OFF DEBTS.....	17-5

**CHAPTER 18: SPECIAL PURPOSE PROGRAMS ..... 18-1**

18.1	INTRODUCTION .....	18-1
18.2	DEPARTMENT OF HOUSING AND URBAN DEVELOPMENT - VETERANS AFFAIRS SUPPORTIVE HOUSING (HUD-VASH) PROGRAM .....	18-1
18.3	HOUSING OPPORTUNITIES FOR PERSONS WITH AIDS (HOPWA) .....	18-6
18.4	HOUSING CHOICE VOUCHER FAMILY UNIFICATION (FUP) PROGRAM .....	18-9

**CHAPTER 19: PROJECT-BASED VOUCHER PROGRAM ..... 19-1**

19.1	INTRODUCTION .....	19-1
19.2	PBV DEFINITIONS.....	19-1
19.3	MAXIMUM AMOUNT OF PBV ASSISTANCE (PERCENTAGE LIMITATION).....	19-4
19.4	QUALIFYING SUPPORTIVE SERVICES FOR INCREASED PROGRAM CAP AND EXCEPTED UNITS IN A PROJECT.....	19-8
19.5	CHANGES TO DEFINITIONS OF PHA-OWNED HOUSING AND USE OF INDEPENDENT ENTITIES .....	19-10
19.6	HOUSING INELIGIBLE FOR ASSISTANCE .....	19-11
19.7	PROHIBITION OF EXCESS PUBLIC ASSISTANCE.....	19-12
19.8	PROJECT RECORD RETENTION .....	19-13
19.9	PROPOSAL AND PROJECT SELECTION PROCEDURES .....	19-13
19.10	SITE SELECTION STANDARDS .....	19-15
19.11	PROJECT SELECTION STANDARDS .....	19-15
19.12	AGREEMENT TO ENTER INTO THE HAP CONTRACT (AHAP) .....	19-16
19.13	HOUSING QUALITY STANDARDS (HQS).....	19-16
19.14	HOUSING ASSISTANCE PAYMENT (HAP) CONTRACT.....	19-17
19.15	SELECTION OF PARTICIPANTS.....	19-21
19.16	INFORMATION FOR SELECTED FAMILIES.....	19-22
19.17	RESTRICTIONS ON RENTING TO RELATIVES LEASING OF CONTRACT UNITS .....	19-23
19.18	LEASE VACANCIES .....	19-23
19.19	LEASE.....	19-24
19.20	ABSENCE FROM THE UNIT .....	19-24
19.21	OWNER TERMINATION OF TENANCY AND EVICTION.....	19-24
19.22	LACDA TERMINATION OF TENANCY.....	19-25
19.23	SECURITY DEPOSITS.....	19-26
19.24	FAMILY OCCUPANCY OF WRONG SIZE OR ACCESSIBLE UNIT .....	19-26
19.25	FAMILY RIGHT TO MOVE.....	19-27
19.26	DETERMINING RENT TO OWNER.....	19-27
19.27	USE OF FAIR MARKET RENTS .....	19-29
19.28	REDETERMINATION OF RENT TO OWNER.....	19-30
19.29	VACANCY PAYMENTS.....	19-31
19.30	TENANT RENT .....	19-31
19.31	OTHER CHARGES AND FEES .....	19-32

**CHAPTER 20: EMERGENCY HOUSING VOUCHER PROGRAM ..... 20-33**

20.1	INTRODUCTION .....	20-33
20.2	ELIGIBILITY .....	20-33

20.3	ALTERNATIVE REQUIREMENTS .....	20-33
20.4	WAITING LIST .....	20-36
20.5	DEFINITIONS OF ELIGIBILITY .....	20-36
<b>CHAPTER 21: STABILITY VOUCHER PROGRAM .....</b>		<b>21-1</b>
21.1	INTRODUCTION .....	21-1
21.2	ELIGIBILITY .....	21-1
21.3	ALTERNATIVE REQUIREMENTS .....	21-1
21.4	DEFINITIONS OF ELIGIBILITY .....	21-5
<b>APPENDIX A: NSPIRE INSPECTION STANDARDS .....</b>		<b>21-10</b>



## **Housing Opportunities Through Modernization Act of 2016**

The Housing Opportunity Through Modernization Act of 2016 (HOTMA) was enacted on July 29, 2016. Title I of HOTMA contains 14 sections that affect the Public Housing and Section 8 rental assistance programs. On February 14, 2023, a final rule pertaining to Sections 102 and 104 were officially published through the Federal Register to implement the broader income and asset changes. On February 2, 2024, the Department of Housing and Urban Development (HUD) released detailed HOTMA implementation guidance to Public Housing Agencies (PHAs) via a Public and Indian Housing notice (Notice PIH 2023-27).

HUD originally required PHAs to implement the new rules by January 1, 2024, but granted them a one-year operating and compliance period.

On December 17, 2024, HUD announced through PIH 2024-38 that the implementation of specific income and asset provisions outlined in Sections 102 and 104 of HOTMA, which PHAs were set to comply with by January 1, 2025, has been delayed. This delay is due to the ongoing development of the Housing Information Portal (HIP), which is intended to support the establishment of certain HOTMA provisions. HUD clarified in this notice that provisions related to program definitions, income exclusions, and the "De Minimis Error" rule outlined in Sections 102 and 104, which are not dependent on the HIP system, must now be complied with by July 1, 2025. As such, the LACDA began enforcing these rules with HUD Form 50058 transactions effective **April 01, 2025**, and has updated the Administrative Plan sections accordingly.

**All other provisions identified below are on hold until HUD provides further guidance.**

For a full comprehensive list of HOTMA official notices and rules, follow the link below:

<https://www.hudexchange.info/programs/hotma/>

### **I. Income Exclusions**

Following guidance and approval from HUD, the LACDA will implement a discretionary policy that will exclude as income research-related supplemental cash payments, such as those resembling Universal Basic Income (UBI). In California, this is referred to as the Guaranteed Income Pilot or Guaranteed Income Program, where a specific household receives a monthly income supplement to assist with quality-of-life research data. Although these payments will be excluded from income calculations, they must be reported at the time of initial receipt and annually thereafter.

All mandatory income exclusions mandated by HUD via PIH Notice 2024-38 have been incorporated into the LACDA's Administrative Plan.

### **II. Self-Certification of Net Family Assets Equal to or Less Than \$50,000**

Currently, the LACDA accepts an existing family's self-certification where the family has net assets equal to or less than \$5,000, without taking additional steps to verify the accuracy of the declaration during a reexamination review.

In accordance with HUD, the LACDA will update the current policy to increase the net asset from \$5,000 to \$50,000. The LACDA will accept the family's self-certification stating the amount of income the family expects to receive from such assets equal to or less than

---

\$50,000 and the amount is included in their annual income. This amount is subject to HUD's annual inflationary adjustment in accordance with the CPI.

As a discretionary policy, the LACDA will accept the family's self-certification at admission to the program without taking additional steps to verify the accuracy of the declaration.

The LACDA will require applicant and participant families to provide third-party generated documents every three years, as required by HUD guidance.

### **III. Imputed Income from Assets Exceeding \$50,000**

As required by HUD, imputed returns on net family assets will be included in annual income only when net family assets exceed \$50,000 (a figure that is annually adjusted for inflation).

If it is possible to calculate actual returns from an asset, the LACDA will use that amount. If it is not possible to calculate an actual return on an asset, the LACDA will impute income from assets based on the current passbook savings rate as determined by HUD when the family has net assets over \$50,000 (adjusted annually for inflation).

### **IV. Net Asset Limitation for Existing Families That Exceed \$100,000**

Currently, the LACDA does not have restrictions on net family asset limitations for existing participating families.

In accordance with HUD's eligibility restrictions, the LACDA will deny admission and as a discretionary policy, terminate assistance if the family has:

- i. Net assets that exceed \$100,000. The threshold will be adjusted by HUD annually in accordance with the Consumer Price Index for Urban Wage Earners and Clerical Workers.
- ii. A present ownership interest in, a legal right to reside in, and the effective legal authority to sell, real property that is suitable for occupancy by the family as a residence.

As a discretionary policy, the LACDA will provide affected program participant families an opportunity to cure the asset limitation non-compliance within six (6) months from the effective date of the annual or interim re-examination.

### **V. Excluded Assets**

Currently, a limited list of excluded assets is included in the Administrative Plan. HUD has expanded the list of excluded assets to include specifications for exceptions to ownership of real property, retirement accounts recognized by the Internal Revenue Service, and necessary/non-necessary items. In accordance with HUD's income exclusions, the LACDA's Administrative Plan (section 6.5.2) will include the following changes.

- 1) The LACDA considers the following to be excluded from the family's net assets, as required by HUD:
  - i. Interest in Indian trust lands.
  - ii. Necessary items of personal property, such as medical devices or vehicles for commute.

- 
- iii. Non-necessary items of personal property if the combined total value does not exceed \$50,000. This amount will be adjusted by HUD annually in accordance with the Consumer Price Index for Urban Wage Earners and Clerical Workers.
  - iv. Retirement accounts recognized by the Internal Revenue Service, including individual retirement arrangements (IRAs), employer retirement plans, and retirement plans for self-employed individuals (implemented based on PIH 2024-38).
  - v. The restriction on owning real property does not apply to:
    1. A family that receives assistance for the property under the Housing Choice Voucher Program for:
      - a. Manufactured home
      - b. Homeownership option
    2. Any property that is jointly owned by a member of the family and at least one non-household member who does not live with the family, if the non-household member resides at the jointly owned property,
    3. Any person who is a victim of domestic violence, dating violence, sexual assault, or stalking, as defined by HUD, or
    4. Any family that is offering such property for sale.
    5. If the family does not have the effective legal authority to sell the real property in the jurisdiction in which the property is located, the value of the real property is excluded from annual income.
  - vi. The value of certain education or disability support savings accounts, such as any Coverdell educational savings account or qualified tuition program under IRS sections 529 and 530 (implemented based on PIH 2024-38).
  - vii. Equity in real property where the family receives assistance under 24 CFR § 982.
  - viii. Equity in a manufactured home where the family receives assistance under 24 CFR § 982.
  - ix. Federal tax refunds or refundable credits for a period of 12 months after receipt by the family.
  - x. Trust that is not revocable by, or under the control of, any member of the family or household.

## **VI. Self-Certification of Real Property Ownership**

Currently, the LACDA verifies ownership of Real Property at admissions and annual reexamination through generated third-party verification for purposes of imputing income from assets. Furthermore, the LACDA does not currently have any restrictions for ownership of real property for purposes of admission to the program.

In accordance with HUD, the LACDA will deny admission and as a discretionary policy, terminate assistance to the program when a family declares ownership of real property and the property is suitable for occupancy by the family in accordance with HUD's asset restrictions. However, HUD issued an exception to the restriction against real property when:

- Whether or not the family has the legal right to reside in the property;
- Whether or not the family has the legal authority to sell the property (i.e., due to litigation, fractional ownership, sale, or divorce);

- 
- Whether or not the property is suitable for occupancy by the family as a residence (i.e., unsafe);
  - The property is geographically located so that the distance or commuting time between the property and the family's place of work or a family member's educational institution would create a hardship for the family;
  - The unit does not meet the disability-related needs for the family; or
  - The property is not sufficient for the size of the household.
  - The property is jointly owned by the family and another individual who does not live with the family but resides in the jointly owned unit.
  - The property is up for sale.

The LACDA will require third-party generated verification for the reasons noted above for purposes of determining program eligibility.

For victims of domestic violence, dating violence, sexual assault, stalking, as well as verbal, psychological, economic, or technological abuse, that cannot provide the third-party generated the LACDA must accept a self-certification from the family member who is the victim, and the restrictions on requesting documentation apply under § 5.2007.

## **VII. Income Deductions**

As required by HUD, the LACDA will comply with the mandatory changes in the allowable deduction amounts. These amounts are subject to an annual inflationary adjustment in accordance with the Consumer Price Index (CPI) and will be rounded to the next lowest multiple of \$25. The changes will be applied to section 6.3 Income Deductions of the Administrative Plan.

The following deductions will be applied in the Total Tenant Rent calculation:

1. Dependent Allowance. \$480 each for family members (other than the head, co-head, or spouse), who are minors, and for family members who are 18 and older who are full-time students, or who are disabled. This allowance does not apply to foster children. The amount will be adjusted by HUD annually in accordance with the CPI.
2. Elderly Family or Disabled Family Allowance. The deduction for elderly and disabled families has increased to \$525, from \$400. The amount will be adjusted by HUD annually in accordance with the CPI.

## **VIII. Hardship Exemptions for Health/Medical Care Expenses & Reasonable Attendant Care & Auxiliary Apparatus Expenses – General Relief (Hardship)**

Currently, the LACDA does not define financial "Hardship" in relation to Health/Medical Care Expenses & Reasonable Attendant Care & Auxiliary Apparatus expenses. LACDA currently refers to the Internal Revenue Service (IRS) Publication 502 definition for medical, dental expenses, etc., and may be amended from time to time by the IRS.

In accordance with HUD, the LACDA is required to define financial hardship for purposes of granting a relief for a period of 90 calendar days when the family's health/medical and attendant/auxiliary expenses exceed the HUD-mandated thresholds as a result of the change in this regulation.

---

As a discretionary policy, the LACDA is hereby defining hardship as circumstances limited to the following:

- Circumstances where the family experiences a loss of income and is expected to continue for an undetermined period; or
- Imputed welfare (excluding fraud)

An elderly or disabled family or a family that includes a person with disabilities may request a hardship exemption to the limitations above when the family experiences financial hardship due to the change in this regulation. The LACDA reasonable accommodation processes will apply. On a case-by-case basis, the LACDA may grant an additional 90-day extension, not to exceed 180 days while the family's hardship continues.

It should be noted that in all cases, the family's hardship relief ends when the circumstances that made the family eligible for the financial relief are no longer applicable or after 90 days, whichever comes earlier.

#### **IX. Hardship Exemptions for Health/Medical Care Expenses & Reasonable Attendant Care & Auxiliary Apparatus Expenses – Phased-In Relief**

Currently, the LACDA does not have a phased-in relief policy for families with Health/Medical Care, Reasonable Attendant Care, and Auxiliary Apparatus out of pocket expenses that exceed the current three (3) percent threshold of the family's gross annual income to the new mandated ten (10) percent threshold.

In accordance with HUD, the LACDA will increase the current 3 percent to 10 percent and will begin the 24-month phased-in relief for families currently receiving HUD's allowable health/medical deduction for unreimbursed out-of-pocket expenses based on the family's recertification preceding January 1, 2025.

The phase-in relief will commence at the family's next annual or interim reexamination, whichever occurs first after January 1, 2025, as follows:

- 1st twelve months – expenses more than 5% of the family's annual gross income.
- 2<sup>nd</sup> twelve months – expenses more than 7.5% of the family's annual gross income.

At the conclusion of the 24-month phased-in, the ten (10) percent threshold will be applied, and the family will be eligible for this deduction if their expense exceeds the 10 percent threshold.

A family receiving phased-in relief in accordance with HUD's implementation may request in writing a hardship exemption. However, the family will be ineligible to resume the phase-in relief if the hardship exemption is granted.

For new admissions and existing families previously not receiving the allowable deduction will automatically be applied to the mandated ten (10) percent and will not be eligible for the phased-in relief.

---

The LACDA does not have the authority to establish a discretionary policy under this rule.

**X. Hardship Exemption to Continue Child-Care Expense Deduction**

Currently, HUD's rules and the LACDA's policy allow for a deduction from the family's annual gross income for any reasonable child-care expenses necessary to enable a member of the family to be employed or to further his or her education.

In accordance with HUD, the LACDA must implement a policy that allows a family to request a hardship exemption when the family is no longer eligible for the childcare deduction and expense and is still necessary when the family is no longer employed or furthering his/her education.

As a discretionary policy, the LACDA hereby defines financial hardship as the following circumstances for purposes of determining eligibility for a hardship exemption:

- Temporary loss of income for a period not to exceed 90 calendar days and childcare is still necessary;
- Increase in utility rates;
- Expense is necessary to continue the child's enrollment at the childcare facility or in accordance with their childcare contract; or
- Increase in childcare expense and the increase is in excess of 40 percent of the family's annual adjusted income.

The LACDA will require the family to request the financial hardship in writing within 10 calendar days from the loss in deduction, resulting in financial hardship and inability to pay rent.

The LACDA will obtain third-party verification to determine the family's financial hardship resulting in their inability to pay rent. The exemption will be granted for a period of 90 calendar days. The family's hardship exemption ends when the circumstances that made the family eligible for the exemption are no longer applicable or after 90 days, whichever comes earlier.

**XI. Interim Reexaminations - Decreases in Adjusted Annual Income**

Currently, the LACDA processes interim re-examinations for families that experience a loss or decrease in their income and changes in family composition.

As required by HUD, the LACDA will add language to its existing policies to align with HUD and HOTMA provisions regarding a decrease in family composition. If a decrease in family size does not change or increase the family's adjusted annual income, a non-interim transaction will be processed without modifying the family's adjusted annual income.

In accordance with HUD, LACDA may decline to conduct an interim recertification of family income if the LACDA estimates that the family's annual adjusted income will decrease by an amount that is less than ten (10) percent or such lower threshold.

As a discretionary policy, the LACDA will not establish a threshold of 10 percent or less. LACDA reaffirms it will continue to exercise its current interim recertification policy for all

---

**decreases** in the family's adjusted income or changes in family composition when a family reports the changes in writing.

## **XII. Interim Reexaminations - Increases in Adjusted Annual Income**

Currently, families are required to report all changes in earned and unearned income, assets, expenses, full-time student status, and family circumstances within 10 calendar days of the date the change takes effect.

In accordance with HUD and as a discretionary policy, the LACDA will require the families to continue reporting as established in section 12.4 Interim Re-Examination of the Administrative Plan. The LACDA will now conduct an interim re-examination when the family's annual adjusted income has changed by an amount that would result in an estimated increase of ten (10) percent or more in annual adjusted income or other amounts established through a HUD notice. A series of smaller reported increases in adjusted annual income may cumulatively meet or exceed the 10% increase threshold.

The LACDA, as required by HUD, will not consider any increase in **earned income** when estimating or calculating whether the family's adjusted annual income has increased *unless* the family has previously received an interim reduction during the same reexamination cycle.

As a discretionary policy, the LACDA will not conduct interim re-examinations if a family reports an increase in income within three (3) months of their next annual reexamination effective date. Instead, the reported change will be processed with the annual reexamination.

## **XIII. Interim Reexaminations – Reporting Changes and Effective Dates**

Currently, the LACDA requires that families report any changes in family income and composition in writing within ten (10) calendar days of when the change occurs. Any additional information, necessary documents, or signature needed from the family to verify the change must be provided within 15 calendar days from the date of request.

In accordance with HUD, the LACDA is required to develop policies when and under what conditions families must report changes in family composition and adjusted income.

As a discretionary policy, the LACDA requires families to report changes in writing within ten (10) calendar days from the date the change occurred.

As required by HUD, the LACDA currently has the following discretionary policies in place that align with the mandated HOTMA changes:

1. If the family delays or fails to report changes in family circumstances that result in a decrease in tenant rent, it will be considered untimely reporting. The change will be effective on the first of the month following completion of processing by the LACDA and not retroactively.
2. If a family fails to report a change within the required time frames, or fails to provide all required information within the required time frames, the

---

increase will be applied retroactively, to the date it would have been effective had the information been provided timely. In these cases, the LACDA will not provide a 30-day notice to the family. The family will be responsible for any overpaid subsidy and may be offered a repayment agreement. This policy is already established in the LACDA's Administrative Plan.

#### **XIV. Non-Interim Action**

Currently, the LACDA processes an interim reexamination when a family reports any type of income and composition changes.

In accordance with HUD, the LACDA will now process a non-interim action when a reported change does not trigger an interim reexamination under HOTMA but still needs to be reported to HUD. The following scenarios will require a non-interim action:

- a) Adding or removing general hardships exemptions such as childcare, health, and medical care;
- b) Updating or removing phased-in hardship exemptions for health and medical care;
- c) Adding or removing a non-family member (i.e., live-in aide, foster child, foster adult);
- d) Ending a family's EID exclusion;
- e) Adding or removing a family member that does not trigger an interim;
- f) Adding/updating Social Security numbers;
- g) Updating citizenship status; and
- h) Processing rent increase.

#### **XV. ENTERPRISE Income Verification (EIV) Usage**

In accordance with HUD, the LACDA uses HUD's EIV system in its entirety, in accordance with 24 CFR § 5.233 to reduce the administrative and subsidy payment errors in accordance with HUD guidance. As a discretionary policy, the LACDA will continue to use the EIV system in its entirety during interim re-examinations.

#### **XVI. Determination of Income Using Other Means Tested Public Assistance (i.e., "Safe Harbor") 24 CFR §§ 5.609(c)(3)**

In accordance with HOTMA, the LACDA may determine a family's annual income, including income from assets, prior to the application of any deductions based on income determinations made within the previous 12-month period, using income determinations from the following types of means-tested federal public assistance programs:

- The Temporary Assistance for Needy Families block grant (42 U.S.C. 601, et seq.).
- Medicaid (42 U.S.C. 1396 et seq.).
- The Supplemental Nutrition Assistance Program (42 U.S.C. 2011 et seq.).
- The Earned Income Tax Credit (26 U.S.C. 32).
- The Low-Income Housing Tax Credit (26 U.S.C. 42).

- 
- The Special Supplemental Nutrition Program for Woman, Infants, and Children (42 U.S.C. 1786).
  - Supplemental Security Income (42 U.S.C. 1381 et seq.).
  - Other programs administered by the Secretary.
  - Other means-tested forms of federal public assistance for which HUD has established a memorandum of understanding.
  - Other federal benefit determinations made by other means-tested federal programs that the Secretary determines to have comparable reliability and announces through a Federal Register notice.

Discretionary Policy – the LACDA will accept and use determinations of income from the federal means-tested forms of assistance listed above when all documentation requirements below are satisfied. The LACDA will accept and use determinations of income from the federal means-tested forms of assistance listed above during New Admission/Move-Ins, Interim Reexamination, and the Annual Reexaminations. In situations where the family presents multiple verifications from the same or different acceptable Safe Harbor programs, the LACDA will accept the most recent, detailed, and comprehensive income determination provided.

#### **Third-Party Verification – Required Information**

When the LACDA elects to use the annual income determination from one of the above-listed forms of means-tested federal public assistance, the LACDA must obtain the income information by means of a third-party verification. The third-party verification must state the following:

1. **The family size.** The verification must be for the entire family, i.e., the family members listed in the documentation must match the family's composition in the assisted unit, except for household members), and
2. **The amount of the family's annual income.** The annual income need not be broken down by family member or income type. Annual income includes income earned from assets, therefore when using Safe Harbor to verify a family's income, the LACDA will neither further inquire about a family's net family assets, nor about the income earned from those assets, except with respect to whether or not the family owns assets that exceed the asset limitation in 24 CFR § 5.618.

#### **Third-Party Verification – Verification Format**

The Safe Harbor verification may be in the form of an award letter from the relevant federal program and must show that the family's income determination was made in the previous 12 months. **Verification will be considered acceptable if the documentation meets the criteria that the income determination was made within the 12 months prior to the receipt of the verification by the LACDA. This satisfies all verification date requirements for Safe Harbor income determinations.**

The Safe Harbor documentation will be considered acceptable if any of the following dates fall into the 12-month period prior to the receipt of the documentation by the LACDA:

- Income determination effective date;
- Program administrator's signature date;
- Family's signature date;

- 
- Report effective date; or
  - Other report-specific dates that verify the income determination date.

The only information that the LACDA is permitted to use to determine income under this Safe Harbor is the total income determination made by the federal means-test program administrator. Other federal programs may provide additional information about income inclusions and exclusions in their award letters; however, these determinations and any other information **must not** be considered by the LACDA for purposes of the HOTMA Safe Harbor provision. The LACDA is not permitted to mix and match Safe Harbor income determinations and other income verifications.

The amounts of unreimbursed reasonable attendant care expenses and child-care expenses deducted from a family's annual income, except for when a family is approved for a child-care expense hardship exemption, must still be capped by the amount earned by any family member who is enabled to work as a result of the expense. The LACDA will therefore be required to obtain third-party verification of the applicable employment income and cap the respective expense deductions accordingly.

It is anticipated that in many cases families will provide the LACDA with the Safe Harbor third-party verification for the purpose of reexamination, rather than the LACDA mailing a verification form to the third party to complete.

When the LACDA does not accept Safe Harbor documentation, is unable to obtain Safe Harbor documentation, or if the family disputes the other program's income determination, the LACDA must calculate the family's annual income using the methods established in § 5.609(c)(1) and (2).

If the LACDA uses a Safe Harbor determination to determine the family's income for an income examination (New Admission/Move Ins, Interim Reexamination, or Annual Reexamination), then the family is obligated to report changes in income that meet the reporting requirement and occur after the effective date of the LACDA's transaction. This might mean that a certain source of income was not considered in the family's income, because the other program does not consider the source to be income.

For example, if the family begins receiving a new source of income on 2/1/2024 and the LACDA completed an annual reexamination effective 3/1/2024 using a Safe Harbor income determination, then the family does not need to report that change in income. If the family has a change in adjusted income in accordance with HUD's rules that occurs after 3/1/2024, when the Annual Reexamination was effective, then the family must report the change to the PHA/MFH Owner.

---

## **National Standards for the Physical Inspection of Real Estate (NSPIRE)**

The U.S. Department of Housing and Urban Development's (HUD) new housing inspection approach, under development, prioritizes health, safety, and functional deficiencies over those about appearance. NSPIRE is a single inspection standard for all units under the Public Housing, HCV, Multifamily, and Community Planning and Development (CPD) programs. NSPIRE focuses on the areas that impact residents the most, such as the dwelling unit. This model includes objective and clearly stated standards, value-added inspection protocols, and scoring elements that are more defensible and less complex. NSPIRE will replace the Housing Quality Standards (HQS) inspection process.

HUD mandated Public Housing Agencies (PHAs) to implement the new rules no later than October 1, 2023. Although the new rules are effective October 1, 2023, HUD has granted the PHAs an operating and compliance period of a year.

On June 14, 2024, HUD's PIH Office of the Assistant Secretary sent an email to PHAs stating NSPIRE implementation for compliance deadline was extended until October 1, 2025. As such, the LACDA will be working towards transitioning to HUD's new NSPIRE inspection standards by no later than October 1, 2025.

### **NSPIRE Standards Overview**

NSPIRE is intended to better identify public housing agencies (PHA) and property owners and agents (POA) that are not adhering to minimum compliance standards by:

- Establishing objective, well-defined deficiency definitions developed, tested, and validated in a rigorous collaboration with stakeholders such as PHAs, POAs, resident groups, public health experts, and academics during the NSPIRE Demonstration;
- Reducing the number of inspectable areas at properties to simplify the process and reduce administrative errors related to deficiency misclassification by regrouping the inspectable items into three categories from five—note that this only changes the grouping of inspectable items; it does not change which items are being inspected;
- Deliberately grouping deficiencies into one of three categories; and
- Identifying all health and safety (H&S) deficiencies.

The NSPIRE Model has three major components: (1) Three types of inspections, (2) three categories of physical deficiencies, and (3) three inspectable areas.

The three types of inspections include self-inspections (see Self-Inspection); NSPIRE inspections (see NSPIRE Inspection); and NSPIRE Plus inspections (see NSPIRE Plus

---

Inspection). Note that the Housing Choice Voucher program is only required to have NSPIRE inspections.

The three categories of deficiencies are health and safety; function and operability; and condition and appearance, with each category ideally resulting in emergency work orders, routine work orders, and other maintenance respectively.

The HCV program will retain the pass/fail methodology to conduct NSPIRE inspections and will not use the scoring scale used for other HUD programs. HUD has condensed the inspectable areas into three categories: Inside, Outside, and Unit. "Inside" refers to all common areas and building systems (e.g., HVAC) located inside a building, but not within dwelling units. "Outside" refers to the building site, the building envelope, and any building systems located outside of the building or unit. "Unit" refers to the interior of an individual residential unit.

The transition to these three major components will decrease inspection complexity, simplify the scoring model, and increase consistency in the way the standards are interpreted, and protocols are applied during an inspection.

### **NSPIRE Resources**

Follow the link below to view the publication of the NSPIRE final rule [Docket No. FR-6086-F-03]:

<https://www.federalregister.gov/documents/2023/05/11/2023-09693/economic-growth-regulatory-relief-and-consumer-protection-act-implementation-of-national-standards>

Follow the link below to view the comprehensive list of NSPIRE Inspection Standards:

[https://www.hud.gov/program\\_offices/public\\_indian\\_housing/react/nspire/standards](https://www.hud.gov/program_offices/public_indian_housing/react/nspire/standards)

Follow the link below to view other pertinent NSPIRE official notices and rules:

[https://www.hud.gov/program\\_offices/public\\_indian\\_housing/react/nspire/notices](https://www.hud.gov/program_offices/public_indian_housing/react/nspire/notices)

## **Chapter 1:**

### **POLICIES AND OBJECTIVES**

#### **1.1 INTRODUCTION**

In 1982, the Los Angeles County Board of Supervisors consolidated three entities – the Housing Authority, the Community Development Department, and the Redevelopment Agency – to form the Community Development Commission (CDC). On May 16, 2019, the agency was officially rebranded as the Los Angeles County Development Authority (LACDA). LACDA is part of the County family, but an independent agency not a County Department. The LACDA’s core pillars include affordable housing, and community and economic development. The agency’s wide-ranging programs benefit residents and business owners in the unincorporated Los Angeles County areas and in various incorporated cities that participate in different programs (these cities are called “participating cities”). According to the 2010 U.S. Census, more than one million of the County’s nearly ten million residents live in unincorporated areas.

Over 70% of LACDA’s funding comes from the U.S. Department of Housing and Urban Development to provide subsidized housing, housing development and preservation, community development, and economic development within Los Angeles County.

Under the LACDA organizational structure, the Housing Assistance Division administers all tenant-based and project-based Housing Choice Voucher rental assistance programs.

#### **1.2 PURPOSE OF THE PLAN**

##### **[24 CFR §982.54(a) – §982.54(d)]**

The purpose of the Administrative Plan is to clearly outline the policies and procedures that govern the LACDA’s administration of the Section 8 Housing Choice Voucher rental assistance programs. The plan includes program requirements established by the U.S. Department of Housing and Urban Development (HUD), as well as the discretionary policies established by the LACDA.

The policies and procedures in this Administrative Plan comply with applicable local, State, and HUD and other Federal regulations, relevant memos, notices and guidelines, including fair housing and equal opportunity requirements. If applicable regulatory changes conflict with this plan, regulations will have precedence.

The LACDA adheres to the Administrative Plan in administering its Section 8 rental assistance programs. The original plan and any changes must be approved by the Board of Commissioners of the agency (the Los Angeles County Board of Supervisors), and a copy of the plan must be provided to HUD.

As much as possible, revisions and additions are published to coincide with published changes in the LACDA’s Agency Plan. Interim changes, including Board mandates and administrative updates reflecting changes in law or regulatory

requirements, will be made effective by a memo from the Executive Director or designee.

### **1.3 ADDITION OF PROGRAMS**

By its approval of any LACDA action and/or resolution to apply for, participate in, or extend its participation in any program, including but not limited to, programs offered by HUD, the LACDA Board of Commissioners thereby incorporate any applicable LACDA policies and procedures as may be required by participation in the program (and as may be approved by the Board) into the Section 8 Administrative Plan as if they were originally set forth herein. Specifics on the program will be added to the Section 8 Administrative Plan at the next scheduled revision.

### **1.4 LOCAL OBJECTIVES**

#### **[24 CFR §982.1(a)]**

The LACDA's rental assistance programs are designed to achieve three major objectives:

1. To provide improved living conditions and decent, safe, and sanitary housing for very low-income families while maintaining their rent payments at an affordable level;
2. To provide an incentive to private property owners to rent to lower income families by offering timely assistance payments; and
3. To promote freedom of housing choice and spatial de-concentration of lower income and minority families.

Additionally, the LACDA's mission statement is as follows:

- To promote adequate and affordable housing, economic opportunity, and a suitable living environment free from discrimination.

### **1.5 JURISDICTION**

#### **[24 CFR §982.51 and 24 CFR §982.4(b)]**

HUD authorizes the LACDA to administer its Section 8 Housing Choice Voucher and other subsidized rental assistance programs within the corporate boundaries of Los Angeles County. The LACDA's jurisdiction includes:

1. The unincorporated areas of the County, and
2. Participating cities within the County. Participating cities are defined as cities in the Los Angeles County area that have authorized the LACDA to administer rental assistance programs within their city limits.

### **1.6 RENTAL ASSISTANCE PROGRAMS**

Section 8 of the Housing and Community Development Act of 1974 established the "Section 8 Program," the first permanent Federal program for rental assistance. The program authorized a basic certificate program, as well as targeted

subprograms. As rental assistance programs developed, Congress authorized additional Section 8 programs, including a voucher program in 1987.

In 1998, the Quality Housing and Work Responsibility Act (QHWRA) required Public Housing Agencies (PHA's) to convert their certificates into vouchers and establish the Housing Choice Voucher Program as the primary rental assistance program. As a result of this conversion, the Housing Choice Voucher Program now encompasses all Section 8 rental assistance.

- **Project-Based Voucher Program**: The LACDA will utilize Project-Based vouchers to prevent the displacement of families and preserve affordable rents in the case of an unforeseen event.
- **Housing Choice Voucher Program**: The major rental assistance program administered by the LACDA.
  - **Note**: Unless otherwise noted, the procedures in this Administrative Plan are for the general Housing Choice Voucher Program.

As required by HUD regulations, the LACDA administers the Family Self-Sufficiency Program as a special program option for participants in the Housing Choice Voucher Program.

### **1.6.1 Targeted and Special Programs**

Periodically, the LACDA applies for special funding from HUD to assist targeted populations within the Housing Choice Voucher Program.

Families admitted into a targeted program must meet all regular admission requirements with the exception of the residency requirement. Since the LACDA is required to work closely with other County departments that provide services through all of Los Angeles County, families residing outside of the LACDA's jurisdiction are allowed to participate in targeted programs. However, families may be required to move within the LACDA's jurisdiction for at least one year.

## **1.7 FAIR HOUSING AND EQUAL OPPORTUNITY POLICY** **[24 CFR §982.53 and California FEHA Act]**

It is the policy of the LACDA to comply fully with all federal, state, and local non-discrimination laws, and with the rules and regulations governing fair housing and equal opportunity in housing and employment.

The LACDA shall not deny any family or individual the opportunity to apply for or to receive assistance under its rental assistance programs on the basis of race, color, sex, religion, gender, gender identity and expression, family status, national origin, marital status, ancestry, age, sexual orientation, disability, source of income, medical condition, military and veteran status, genetic information, arbitrary characteristics, or any other basis prohibited by law.

The LACDA will provide Federal, State, and local information to voucher holders during the family briefing session regarding discrimination, and the recourse available to them if they are victims of discrimination. Applicants and other voucher holders will be informed that they may file a fair housing complaint using the toll-free hotline at 1-800-669-9777 and individuals with hearing or speech impairments

may access this number via TTY by calling the Federal Information Relay Service at 1-800-887-8339. All fair housing information and discrimination complaint forms will be included in the voucher holder's briefing packet.

## **1.8 NON-DISCRIMINATION POLICY**

It is the policy of the Los Angeles County Development Authority (LACDA), formerly known as the Housing Authority of the County of Los Angeles, to comply with all provisions of the Fair Housing Act, Title VIII of the Civil Rights Act of 1968, as amended by the Fair Housing Amendments Act of 1988 (42 U.S.C. §§ 3601 *et seq.*), as well as implementing regulations set forth by HUD in 24 C.F.R. part 1. This policy ensures that housing is available to all persons without regard to race, color, religion, national origin, disability, familial status (having children under age 18), or sex. Consequently, this policy means that, among other things, the LACDA and its agents or employees must not discriminate in any aspect of housing. This includes but is not limited to denying persons access to housing because of race, color, religion, national origin, familial status, sex or disability. Additionally, the LACDA must provide reasonable accommodations in rules, policies, practices or services when such accommodations are necessary to afford people with disabilities an equal opportunity to use and enjoy a dwelling. Agents and employees of the LACDA may not:

- a. Make unavailable or deny a dwelling to any person because of race, color, religion, national origin, disability, familial status, or sex;
- b. Discriminate against any person in the terms, conditions, or privileges of a dwelling, or in the provision of services or facilities in connection therewith, because of race, color, religion, national origin, disability, familial status, or sex;
- c. Make, print, or publish, or cause to be made, printed, or published any notice, statement, or advertisement, with respect to a dwelling that indicates any preference, limitation, or discrimination based on race, color, religion, national origin, disability, familial status, or sex, or an intention to make any such preference, limitation, or discrimination, or
- d. Coerce, intimidate, threaten, or interfere with any person in the exercise or enjoyment of, or on account of his or her having exercised or enjoyed, or on account of his or her having aided or encouraged any other person in the exercise or enjoyment of, any right granted or protected by the Fair Housing Act.

Any agent or employee who fails to comply with this non-discrimination policy will be subject to appropriate disciplinary action. Any action taken by an agent or employee that results in the unequal treatment of citizens on the basis of race, color, religion, national origin, disability, familial status, or sex, may constitute a violation of state and federal fair housing laws. An individual who believes that he or she is the victim of discrimination may visit Fair Housing ([lacda.org](http://lacda.org)) or contact LACDA at (626)-262-4511.

[This section must not be removed or modified until after November 2028]

## **1.9 OPERATING RESERVES**

The Board of Commissioners shall establish the permitted uses of earned administrative fees at the time of the Annual Consolidated Operating Budget approval. The approval shall consist of the use of administrative fees for the Housing Choice Voucher Program (Section 8) administration.

The Board of Commissioners must approve the expenditure of Section 8 operating reserves in excess of \$100,000. The Executive Director may authorize allowable use of Section 8 operating reserve funds not exceeding \$100,000. The Deputy Executive Director may authorize allowable use of Section 8 operating reserve funds not exceeding \$30,000.

## **1.10 SERVICE POLICY**

### **[24 CFR §8.24]**

This policy is applicable to all situations described in this Administrative Plan when a family initiates contact with the LACDA, when the LACDA initiates contact with a family including when a family applies, and when the LACDA schedules or reschedules any kind of appointments.

It is the policy of the LACDA to be service directed in the administration of its rental assistance programs, and to exercise and demonstrate a high level of professionalism while providing housing services to all families.

The LACDA's policies and practices are designed to provide assurances that all persons with disabilities will be provided reasonable accommodation so that they may fully access and utilize the housing program and related services. The LACDA will inform clients of their right to a reasonable accommodation via the Admissions Application, Annual Reexamination, Voucher Briefing, and at the time of a proposed adverse action.

### **1.10.1 Providing Greater Accessibility to Persons with Disabilities**

The LACDA provides reasonable accommodations to persons with disabilities. The following is a non-exhaustive list of reasonable accommodations that may be available to a disabled person:

1. Providing office facilities which meet the requirements of federal, state and local law with regard to accommodations for persons with disabilities;
2. Providing notice to applicants and participants that they may request a reasonable accommodation if a family member is a person with a disability;
3. Allowing the assistance of mechanical or electronic devices by applicants and participants as needed to facilitate communication at appointments;
4. Providing assistance in completing forms and other documents which are required by program regulations;
5. Encouraging families to utilize assistance from outside agencies in the completion of forms and documents required by the program;

6. Providing reasonable extensions of time for the completion of program requirements to the extent not prohibited by HUD regulations;
7. Providing extensions to the amount of time a family has to search for a unit with their voucher (see section 8.7.3);
8. Conducting in-home visits (or, where appropriate, telephone interviews) for persons who are unable to travel to LACDA offices due to medical conditions;
9. Maintaining Telecommunication Devices for the Deaf (TDD) phone services and publicizing their availability;
10. Providing an American Sign Language interpreter at the request of clients with a hearing impairment;
11. Providing documents in Braille, upon request;
12. Providing program documents in large font sizes upon request;
13. Providing an appropriate meeting or conference room to accommodate a service and/or support animal upon request.;
14. Requesting HUD approval of an exception to the Fair Market Rent (FMR) or the Voucher Payment Standard, at the family's request, if a family contains a member with a disability and has a verifiable need to rent an accessible or otherwise appropriate specific unit in a specific area, but only if the unit meets the rent reasonableness requirements of the program;
15. Allow advocates to provide information as needed, but only with the permission of the person with the disability.

The following is a list of actions LACDA will take to affirmatively further fair housing for disabled persons. The LACDA is not limited only to those actions listed below to affirmatively further fair housing and may take other actions when deemed necessary and reasonable:

1. Actively and consistently examining the LACDA's programs, and proposed programs to identify any impediments to fair housing choice within the programs;
2. Resolving impediments to fair housing choice in a reasonable and timely fashion given resources available;
3. Soliciting information on the accessibility of owners' units to persons with disabilities and providing information on amenities the unit may provide persons with disabilities;
4. Providing a free internet-based housing search that lists available, accessible units;
5. Soliciting the assistance of outside agencies to provide services to and assist persons with disabilities in meeting the requirements of the Section 8 and other assisted housing programs;

6. Actively working with the County and participating cities to implement any initiatives to affirmatively further fair housing where involvement by the LACDA is necessary;
7. Providing information to its Section 8 landlords, concerning their legal obligations to permit “reasonable modifications” to a rental unit at the participant’s expense if the family has a member with a disability and if the modification is necessary for the person with a disability to fully enjoy the unit;
8. Requiring all outside agencies who have agreements or contracts with the LACDA to abide by federal, state and local laws and ordinances which require accommodation for persons with disabilities and not to reject any applicant or participant on the basis of a disability;
9. Providing training to all employees on how to accommodate applicants and participants with disabilities.

The LACDA will maintain documentation of all efforts to affirmatively further fair housing.

#### **1.10.2 Requests for Reasonable Accommodation** **[24 CFR §8.28]**

The LACDA is required to make reasonable adjustments to rules, policies, practices, and procedures of its programs, in order to enable a disabled applicant or participant to have an equal opportunity to use and enjoy their unit, including common areas, and to comply with program obligations.

The LACDA approves reasonable accommodation requests on a case-by-case basis, upon determination that:

- The requested accommodation is reasonable (i.e., it does not result in a fundamental alteration in the nature of the program or an undue financial and administrative burden), and
- There is an identifiable relationship between the requested accommodation and the individual’s disability.

Requests for reasonable accommodation do not have to be made in writing, however, it is preferred if the request is in writing to ensure the request is understood by all parties. Most requests for accommodation are verified with a reliable, knowledgeable professional so that the LACDA can properly accommodate the need presented by the disabled individual (see Chapter 7 for Verification of Reasonable Accommodations). Families requesting a reasonable accommodation will be notified in writing of the decision. The written decision will also include a statement informing the family of their right to dispute the decision.

#### **1.10.3 Persons with an Obvious and/or Visible Disability**

Most reasonable accommodation requests are considered in accordance with the policies found in section 7.11.10. However, in accordance with the Joint Statement of the Department of Housing and Urban Development and the Department of Justice regarding Reasonable Accommodations under the Fair Housing Act, dated

May 17, 2004, an Assistant Manager, Manager, Director or the ADA/504 Coordinator in the Housing Assistance Division may approve a family member's self-certification of a need for a reasonable accommodation, but only if:

- 1) The individual has an obvious and/or visible disability (such as an individual who regularly uses a wheelchair or an individual with a hearing or visual impairment);
- 2) The accommodation requested is clearly related to the individual's disability (for example, a hearing-impaired person requests a sign language interpreter).

If a person's disability is obvious, or otherwise visible, and if the need for the requested accommodation is also readily apparent or known, supervisory staff will not request any additional information about the requester's disability or the disability related need for the accommodation.

If supervisory staff cannot determine whether there is a clear relationship (nexus) between the obvious disability and the need for an accommodation, the relationship (nexus) and need for the accommodation must be verified by a health care or service provider.

Supervisory staff must document the file with facts and reasoning to support acceptance of the family member's self-certification. The supervisor's approval of the self-certification takes the place of a third-party verification for the accommodation.

#### **1.10.4 General Guidelines for Exception Rents in Excess of the Regular Payment Standard**

Under no circumstances may a family initially rent a unit if the family share will exceed the affordability limits stipulated by HUD. A family may rent a unit with a lower payment standard amount while its request for an exception rent, or payment standard is pending so long as the family share does not exceed the affordability limitation. If approval for an exception payment standard is provided after the start date of the HAP Contract, the payment standard is revised effective the first of the month following the date of the final written approval.

#### **1.10.5 Exceptions Payment Standard (120% of the FMR or Less)**

These exceptions may be granted only by a manager or the Director of the Housing Assistance Division.

The rent for the unit must be reasonable. The family must have at least one member who qualifies as a person with a disability for the purpose of reasonable accommodation. The unit must in some specific way accommodate the disability, such as the unit's physical amenities (grab-bars, ramps, special features for the blind), structure (elevator building, ground floor unit), location (near a medical facility, place of treatment, school providing special education, close location to bus lines or other facilities) or because of other circumstances or needs attested to by the health care or service provider.

The need for the accommodation must be verified in accordance with section 7.11.10 of this Plan.

#### **1.10.6 Exceptions in Excess of 120% of the FMR**

All requests for exceptions to the payment standard which exceed 120% of the Fair Market Rent must be reviewed and approved by the Director. Requests above 120% of the FMR will require a HUD Headquarters' waiver of 24 CFR 982.505(d).

Approval of exception payment standards may occur only if the family share will exceed 40% of the family's Adjusted Monthly Income (AMI), and the resulting exception payment standard will be premised on the family continuing to pay 40% of AMI as the family share. The exception payment standards remain in effect until and unless a higher exception payment standard is warranted, requested, and subsequently approved.

#### **1.10.7 Payment Standard Exceptions During the Contract Term**

During the term of a HAP Contract, the LACDA may provide an exception to the payment standard to allow the unit to remain affordable to the family so long as the unit provides an accommodation for the disability. The exception cannot be retroactive and cannot take effect until after the date of the LACDA's (or HUD's) written approval.

#### **1.10.8 Interactive Process**

If necessary, designated LACDA staff may engage in discussion with the family to determine what policy exception or reasonable accommodation is being requested and to identify acceptable alternative accommodations. For the Section 8 program only, upon request, if the owner refuses to allow a reasonable accommodation, the designated staff person or the 504 Coordinator may provide the family information on how to file a housing discrimination complaint and/or may refer the participant to the U.S. Department of Housing and Urban Development (HUD), Department of Fair Employment and Housing (DFEH), or a Fair Housing agency to make a complaint.

#### **1.10.9 Denials & Terminations - Discretion to Consider Circumstances**

In determining whether to deny admission or terminate assistance because of action or failure to act by members of the family, the LACDA may consider mitigating circumstances relating to the disability of a family member and the effects of denial or termination of assistance on other family members who were not involved in the action or failure to act.

If the family includes a person with a disability, the LACDA's decision concerning termination or denial is subject to consideration of reasonable accommodation in accordance with 24 CFR Part 8.

#### **1.10.10 Re-verifying the Need for Reasonable Accommodations**

Once the need for a reasonable accommodation has been verified, staff does not re-verify the need for reasonable accommodation except when there is another change in circumstances.

Examples:

- A disabled person leaves the household,

- A family member listed as disabled can no longer verify s/he is disabled,
- At inspection no medical equipment is observed in an additional room granted as an accommodation to store or use the equipment,
- The health care or service provider approving a need for a live-in aide or other reasonable accommodation has indicated that the need or the disability will be of short duration, or
- The family member loses his/her disabled status, for example when a person on state disability returns to work.

#### **1.10.11 Resolving Complaints Regarding Reasonable Accommodation**

Complaints or issues regarding the provision of reasonable accommodation for a person with a disability which are not resolved by the case manager are referred to the Housing Assistance Division ADA/Section 504 Coordinator who provides a preliminary review, conducts investigations, and resolves complaints and issues determinations.

#### **1.11 LIMITED ENGLISH PROFICIENCY**

In accordance with federal, state, and local law, specifically Executive Order 13166, HUD LEP Guidance and Sections 7290 et seq. of the California Government Codes (“Dymally-Alatore Act”), the LACDA will provide meaningful access to its programs and activities by persons with Limited English Proficiency (LEP) and undertake reasonable efforts to provide or arrange free language assistance for LEP applicants or participants of the Housing Choice Voucher program and all other rental assistance programs administered by the Housing Assistance Division.

#### **1.12 MEANINGFUL ACCESS; FOUR-FACTOR ANALYSIS**

Meaningful access is free language assistance in accordance with federal guidelines. The LACDA is required to provide LEP services based on the balancing of the following four-factor analysis:

1. The number or proportion of LEP persons served or likely to be encountered by the LACDA.
2. The frequency with which with LEP persons using a particular language come into contact with the LACDA.
3. The nature and importance of the LACDA program, activity, or service to the person’s life.
4. The LACDA’s resources and the cost of providing meaningful access.

The LACDA will annually assess and update the four-factor analysis in accordance with Section 1.17 Monitoring.

### **1.13 DEFINITIONS**

1. "Applicant" includes applicants for any program administered by the Housing Assistance Division.
2. "Competent" refers to a person who is proficient and has knowledge of program terminology in both the English language and the non-English language being used.
3. "Interpretation" is competently taking oral or spoken information provided in one language and accurately communicating that information orally in another language.
4. "Interpreter" is a person (not a minor) able to speak fluently and read with full understanding both in the English language and the language of the LEP applicant or participant.
5. "Language services" or "Language Assistance" is the provision of free, competent language interpretation (oral) or translation services (written).
6. "LEP Individual" is a person who identifies as a LEP person, does not speak English as a primary language, and who has a limited ability to read, write, speak or understand English.
7. "Oral Translation" means the oral translation of a document from English into a second language. Oral translation involves the translation of every word, not summarization. However, in oral translation, because of cultural and technical issues, further explanation may also be required and is encouraged.
8. "Participant" includes persons receiving assistance under any rental assistance program administered by the Housing Assistance Division.
9. "Threshold Language" is a language spoken by 5% or 1,000, whichever is less, of the population of persons eligible to be served or likely to be affected or encountered to determine the need for bilingual staff and translation of documents.
10. "Translation" means converting written material from one language to another in written form.
11. "Vital documents" are those that are critical for ensuring meaningful access by LEP persons to the rental assistance programs administered by the LACDA.

### **1.14 LANGUAGE ASSISTANCE**

A Limited English Proficient (LEP) applicant or participant is entitled to language assistance with respect to the programs and activities of the LACDA.

LACDA staff will provide language assistance to LEP applicants and participants who have difficulty communicating in English, who identify themselves as LEP, or who request language assistance.

Applicants will be asked at the time of application and participants will be asked at the time of annual reexamination to designate their primary language for both oral and written services and whether LEP services are needed. This information will be recorded in the electronic case file.

### **1.15 BABEL NOTICE**

The LACDA will provide a Babel notice to inform families about available language access and resources when they receive a voucher, request a reasonable

accommodation, or during the application and recertification processes. Information on available languages will also be accessible on the LACDA's website.

## **1.16 INTERPRETIVE (ORAL) SERVICES**

LEP applicants and participants have the right to free interpreter services when the individual states a need or staff observes difficulty in communicating in English, whether or not the language they speak is considered a threshold language. Once a person is identified as LEP, interpreter services will be made available in all communication with or from the LACDA.

### **1.16.1 Formal Interpreters**

To provide meaningful access for LEP applicants and participants, the LACDA will provide qualified interpreters, including agency bilingual staff, and outside vendors to all identified LEP individuals or upon request.

The LACDA may require an interpreter to certify that he/she understood the matter communicated and rendered a competent interpretation.

- Only formal interpreters will be used at voucher issuance briefings; and
- Informal hearings.

Informal interpreters will not be used in lieu of formal interpreters provided by the LACDA.

For informal hearings, a LACDA staff interpreter may not be a subordinate to the person making the decision.

The LACDA maintains a list of qualified, bilingual employees who have applied for, and tested for proficiency in interpreting and/or translating languages from English into a language other than English. Those employees receive additional compensation for demonstrating non-English language proficiency and can provide assistance to LACDA staff and LEP clients as part of their regular job duties.

### **1.16.2 Informal Interpreters**

Informal interpreters may include the family members, friends, legal guardians, service representatives or advocates of the LEP individual. The use of informal interpreters is strongly discouraged. Minor children may not act as informal interpreters.

If the LEP individual wishes to rely solely on an informal interpreter, the LACDA staff will determine whether it is appropriate, depending upon the circumstances and subject matter of the communication. However, in many circumstances, informal interpreters may not be an appropriate option to provide accurate interpretations. There may be issues of confidentiality, competency, or conflict of interest. In those cases, the LACDA may require the use of a formal interpreter

despite the wish of the LEP individual to rely solely on his or her informal interpreter.

The LACDA will always offer a free interpreter. A LEP person may use an informal interpreter of his/her own choosing and at his/her expense, either in place of or as a supplement to the free language assistance offered by the LACDA. If possible, the LACDA will accommodate a LEP individual's request to use an informal interpreter in place of a formal interpreter.

If a LEP individual prefers an informal interpreter, after the LACDA has offered free interpreter services, the informal interpreter may interpret. In these cases, the LEP individual and interpreter will be asked to sign a waiver, in the LEP individual's preferred language or through oral translation, refusing interpreter services.

If a LEP individual wants to use his/her own informal interpreter, the LACDA reserves the right to also have a formal interpreter present.

### **1.16.3 Outside Resources**

Outside resources may include competent community volunteers or competent Housing Choice Voucher participants.

Outside resources may be used for interpreting services at public or informal meetings or events if a timely request has been made.

The LACDA will establish and maintain relationships with organizations that assist specific cultural and ethnic groups living in Los Angeles County. To help their clients obtain or keep housing assistance through the LACDA, these organizations may provide qualified interpreters for LEP persons.

## **1.17 TRANSLATION OF DOCUMENTS**

The LACDA will consider the following factors in determining whether a document requires translation:

- a. The document meets the threshold of a "vital document". Per the HUD guidance, "vital documents" are those that are critical for ensuring meaningful access by beneficiaries or potential beneficiaries generally and LEP persons specifically.
- b. The costs and benefits of translating documents for potential LEP groups, the barriers to meaningful translation or interpretation of technical housing information, the likelihood of frequent changes in documents, the existence of multiple dialects within a single language group, the literacy rate in an LEP group and other relevant factors. The LACDA will undertake this examination when an eligible LEP group constitutes 5 percent of an eligible group of beneficiaries or potential beneficiaries (for example, 5 percent of households receiving Section 8 assistance) or 1,000 persons, whichever is less.

Documents deemed "vital" by the LACDA will be translated into threshold languages.

In consideration of the above, the LACDA will annually assess its documents to identify any additional vital documents that need to be translated. The LACDA will then translate a portion of those documents identified every year as financially feasible. If the vital document has not been translated, the LACDA will provide the applicant or participant with oral translation.

As opportunities arise, the LACDA may work with other local public housing authorities (PHAs) to share the costs of translating common documents.

As HUD continues to translate standard housing documents in multiple languages, the LACDA will replace its translated versions with the official HUD versions.

#### **1.17.1 Audiovisual Materials**

The LACDA will make reasonable efforts to produce multiple translations of audiovisual materials, and it may use to inform or educate applicants, participants, and other client groups. For example, the LACDA will translate material to be presented at voucher issuance briefings into the threshold languages.

### **1.18 MONITORING**

The LACDA will review and revise this LEP policy annually. The review will include:

- a. Reports from the LACDA's software system on the number of LEP clients. Such reports may be supplemented by staff observations.
- b. A determination as to whether 5 percent or 1,000 participants from LACDA-administered programs or persons from the waiting list speak a specific language, which triggers consideration of document translation needs as described above.
- c. Review of demographic data that indicates prevalent languages in Los Angeles County.
- d. Analysis of staff requests for formal interpreters: the number of requests, the languages requested the costs, etc.

### **1.19 LEP PLAN DISTRIBUTION AND TRAINING**

The LACDA will ensure the LEP policy is distributed to the public and complied with by all staff by:

1. Distributing to all LACDA staff.
2. Posting on the LACDA's website at [www.lacda.org](http://www.lacda.org).
3. Posting at the LACDA's Administrative Offices in appropriate threshold languages.
4. Including notices summarizing the rights of LEP individuals under this policy in application and reexamination packets.

5. Conducting in-depth training for staff that interacts directly with applicants and participants. All other staff will receive at least a condensed training on LEP policies and procedures.

### **1.20 FAMILY OUTREACH**

Each time the LACDA enters into an Annual Contributions Contract (ACC) with HUD for new Section 8 existing units, it will be publicized in accordance with the specification in the criteria of the Equal Opportunity Housing Plan.

The LACDA will communicate the status of housing availability to other service providers in the community; advise them of housing eligibility factors and guidelines in order that they can make proper referrals for housing assistance.

Information regarding the program directed at prospective applicants/tenants will be disseminated in accordance with Equal Opportunity Housing Plan and HUD guidelines for fair housing.

### **1.21 OWNER OUTREACH**

#### **[24 CFR §982.1(a)]**

The LACDA encourages owners of decent, safe, and sanitary housing units to lease to families participating in its rental assistance programs. The LACDA maintains and regularly updates a list of interested landlords and available units for its rental assistance programs. When listings from owners are received, they are compiled by LACDA staff and made available through the phone hotline, by mail, or by Internet at [www.lacda.org](http://www.lacda.org).

Ongoing marketing efforts to recruit suburban owners for participation include, but are not limited to:

1. Brochures for owners;
2. Realty Board presentations;
3. Apartment Owner Association presentations;
4. Community Center presentations; and
5. Presentation to organizations serving the disabled and other similar organizations.

The LACDA periodically evaluates the distribution of assisted families to identify areas within the jurisdiction where owner outreach should be targeted. Special outreach efforts will be used to encourage participation of those groups who would not normally apply or participate.

### **1.22 PRIVACY RIGHTS**

#### **[24 CFR §5.212]**

Applicants and participants, including all adults in each household, are required to sign the HUD-9886-A Form (Authorization for the Release of Information). This

document incorporates the Federal Privacy Act Statement and describes the conditions under which HUD will release family information.

A statement of the LACDA's policy on release of information to prospective landlords will be included in the briefing packet that is provided to the family.

The LACDA's practices and procedures are designed to safeguard the privacy of applicants and program participants. All applicant and participant files are stored in a secure location that is only to be accessed by authorized staff.

LACDA staff will not discuss family information contained in files unless there is a business or legal reason to do so. Inappropriate discussion of family information or improper disclosure of family information will result in disciplinary action.

### **1.23 MONITORING PROGRAM PERFORMANCE**

#### **[24 CFR §985]**

In order to ensure quality control, supervisory staff will review the following functions:

1. At least 10 percent of all work completed by their staff, and
2. 100 percent of work completed by new staff for a minimum of 30 calendar days.

The LACDA's Section 8 Management Assessment Program (SEMAP) Analyst conducts audits of:

1. 5 percent of annual reexaminations /interim reexaminations, and
2. Minimum Housing Quality Standards (HQS) quality control inspections as dictated by SEMAP Indicator #5.

The LACDA has the ability to use credit checks and other similar tools to ensure program integrity on a case-by-case basis.

### **1.24 TERMINOLOGY**

#### **[24 CFR §982.4(b); §5.100 §5.2003 and §8.3; and Cal. Gov. Code 12926]**

- **“Actual Covered Cost”** in student financial assistance is defined as the actual costs of room and board, tuition, books, supplies, and other fees required and charged to a student by the educational institution, including supplies and equipment to support students with learning disabilities or other disabilities.
- **“Affiliated Individual”** is defined to mean with respect to an individual,
  - A spouse, parent, brother, sister, or child of that individual, or a person whom that individual stands in the place of a parent or guardian (for example, the affiliated individual is a person in the care, custody, or control of that individual); or
  - Any individual, tenant, or lawful occupant living in the household of that individual.

- **“Annual Income”** includes all amounts, not specifically excluded, received from all sources by each member of the family 18 years or older or is the head of household or spouse of the head of household, plus unearned income by or on behalf of each dependent who is under 18 years of age, and imputed returns on net family assets exceeding \$5,000 (adjusted annually using the CPI-W) when the value of the actual returns from a given asset cannot be calculated. Imputed returns are based on the current passbook savings rate, as determined by HUD.
- **“Bifurcate”** means to divide a lease as a matter of law, subject to the permissibility of such process under the requirements of the applicable HUD-covered program and state or local law, such that certain tenants or lawful occupants can be evicted or removed and the remaining tenants or lawful occupants can continue to reside in the unit under the same lease requirements or as may be revised depending upon the eligibility for continued occupancy of the remaining tenants and lawful occupants.
- **“Covered Person”** is defined as a tenant, any member of the tenant’s household, a guest, or another person under the tenant’s control.
- **“Covered Housing Provider”** refers to the individual or entity under a covered housing program, and as defined by each program in its regulation, that has responsibility for the administration and/or oversight of VAWA protections and includes PHAs, sponsors, owners, mortgagors, managers, state and local governments or agencies thereof, nonprofit or for-profit organizations or entities.
- **“Dating Violence”** is defined as violence committed by a person:
  - Who is or has been in a social relationship of a romantic or intimate nature with the victim; and
  - Where the existence of such a relationship shall be determined based on a consideration of the following factors:
    - The length of the relationship;
    - Type of relationship; and
    - Frequency of interaction between persons involved in the relationship.
- **“Day Laborer”** is an individual who is hired and paid one day at a time without an agreement that the individual will be hired or work again in the future.
- **“Dependent”** is a member of the family (which excludes foster children and foster adults) other than the family head or spouse who is under 18 years of age, is a person with a disability, or is a full-time student.
- **“Domestic Violence”** is defined as felony or misdemeanor crimes of violence committed by:
  - A current or former spouse or intimate partner of the victim;
  - A person with whom the victim shares a child in common;

- A person who is cohabitating with or has cohabitated with the victim as a spouse or intimate partner;
- A person similarly situated to a spouse of the victim under local and state domestic or family violence laws;
- Any other person against an adult or youth victim who is protected from that person's acts under local and state domestic or family violence laws.

The term "spouse or intimate partner of the victim" includes a person who is or has been in a social relationship of a romantic or intimate nature with the victim, as determined by the length of the relationship, the type of the relationship, and the frequency of interaction between the persons involved in the relationship.

- **"Earned Income"** is defined as income or earnings from wages, tips, salaries, other employee compensation, and net income from self-employment. Earned income does not include pension or annuity, transfer payments (meaning payments made or income received in which no goods or services are being paid for, such as welfare, social security, and governmental subsidies for certain benefits), or any cash or in-kind benefits.
- **"Elderly family"** means a family whose head (including co-head), spouse, or sole member is a person who is at least 62 years of age. It may include two or more persons who are at least 62 years of age living together, or one or more persons who are at least 62 years of age living with one or more live-in aids.
- **"Family"** refers to a single person or group of persons, who may include an elderly person(s), displaced person(s), disabled person(s), near-elderly person(s) or any other single person(s), or the remaining members of a tenant family; and is used interchangeably with "applicant" or "participant" and can refer to a single person family. "Tenant" refers to participants in terms of their relation to landlords See section 2.3 for full definition.
- **"Foster Child"** is a member of the household who meets the definition of foster child under state law. In general, a foster child is placed with the family by an authorized placement agency (e.g. a public child welfare agency) or by judgment, decree, or other order of any court of competent jurisdiction.
- **"Foster Adult"** is a member of the household who is 18 years of age or older and meets the definition of a foster adult under State law. In general, a foster adult is a person who is 18 years of age or older, is unable to live independently due to a debilitating physical or mental condition, and is placed with the family by an authorized placement agency or judgment, decree, or other order of any court of competent jurisdiction.
- **"Foster Youth"** are defined as youth between the ages of 18 and 24 who have either left foster care or will leave foster care within 90 days, and who are homeless or at risk of becoming homeless at age 16 or older, will be considered "single persons" to clarify their eligibility for assistance.
- **"Gender expression"** – means a person's gender-related appearance or behavior, or the perception of such appearance or behavior, whether or not stereotypically associated with the person's sex assigned at birth. (Cal. Gov. Code §12926(q)(C)(2))

- **“Gender identity”** - means the gender with which a person identifies, regardless of the sex assigned to that person at birth and regardless of the person’s perceived gender identity. Perceived gender identity means the gender with which a person is perceived to identify based on that person’s appearance, behavior, expression, other gender related characteristics, or sex assigned to the individual at birth or identified in documents.
- **“Genetic Information”** - means, with respect to any individual, information about any of the following (Cal. Gov. Code §12926(g)(1)):
  - i. The individual’s genetic tests;
  - ii. The genetic tests of family members of the individual;
  - iii. The manifestation of a disease or disorder in family members of the individual.
- **“Guest”** is defined as any person temporarily staying in the unit with the consent of a tenant or other member of the household who has express or implied authority to so consent on behalf of the tenant.
- **“Health and Medical Care Expenses”** are any cost incurred in the diagnosis, cure, mitigation, treatment, or prevention of disease or payments for treatments affecting any structure or function of the body. Health and medical care expenses include medical insurance premiums and long-term care premiums that are paid or anticipated during the period for which annual income is computed.
- **“Illegal Drugs”** are defined as any controlled substance, in any amount, as defined by the United States Code, Title 21, section 802, including but not limited to narcotics, amphetamines, hallucinogens, cocaine, marijuana, medical marijuana, designer drugs, or other intoxicants. This definition also specifically includes over the counter medications used in the manufacture of illegal drugs or for the purposes of becoming intoxicated, and pharmaceutical medications which are used either without being prescribed by a licensed physician or in excess of the amount prescribed by a physician for the purposes of becoming intoxicated.
- **“Independent Contractor”** is an individual who qualifies as an independent contractor, instead of an employee, under IRS federal income tax requirements and whose earnings are subject to self-employment tax.
- **“Independent Student Status”** is when the income of the student’s parents is not relevant or the student can demonstrate the absence of, or his or her independence from, parents. These criteria include but are not limited to the following:
  - The individual is 24 years of age or older by December 31 of the award year;
  - The individual is an orphan, in foster care, or a ward of the court or was an orphan, in foster care, or a ward of the court at any time when the individual was 13 years of age or older;

- The individual is, or was immediately prior to attaining the age of majority, an emancipated minor or in legal guardianship as determined by a court of competent jurisdiction in the individual's state of legal residence;
  - The individual is a veteran of the Armed Forces of the United States (as defined in subsection (c)(1) of HEA) or is currently serving on active duty in the Armed Forces for other than training purposes;
  - The individual is a graduate or professional student;
  - The individual is married;
  - The individual has legal dependents other than a spouse;
  - The individual has been verified during the school year in which the application is submitted as either an unaccompanied youth who is a homeless child or youth (as such terms are defined in section 725 of the McKinney-Vento Homeless Assistance Act) (42 U.S.C. 11431 et seq.), or as unaccompanied, at risk of homelessness, and self-supporting, by—
    - (i) A local educational agency homeless liaison, designated pursuant to section 722(g)(1)(J)(ii) of the McKinney-Vento Homeless Assistance Act;
    - (ii) The director of a program funded under the Runaway and Homeless Youth Act or a designee of the director;
    - (iii) The director of a program funded under subtitle B of title IV of the McKinney-Vento Homeless Assistance Act (relating to emergency shelter grants) or a designee of the director; or
    - (iv) A financial aid administrator; or
    - (v) The individual is a student for whom a financial aid administrator makes a documented determination of independence by reason of other unusual circumstances.
- **“Landlord”** and **“owner”** are used interchangeably.
  - **“Minor”** is a member of the family, other than the head of the family or spouse, who is under 18 years of age.
  - **“Net Family Assets”** are the net cash value of all assets owned by the family after deducting reasonable costs that would be incurred in disposing of real property, savings, stocks, bonds, and other forms of capital investment. This definition includes the cash value of family assets with the exception of the expanded and enumerated exclusions.
  - **“Non-recurring Income”** is defined as income that will not be repeated in the coming year based on information provided by the family. Income received as an independent contractor, day laborer, or seasonal worker is not excluded from income under this paragraph, even if the source, date, or amount of the income varies. The term “temporary income” has been replaced by this definition of non-recurring income.

- **“Other person under the tenant’s control”** is defined as a person, although not staying as a guest (as defined above) in the unit, is, or was at the time of activity in question, on the premises because of an invitation from the tenant or other member of the household who has express or implied authority to consent on behalf of the tenant. Absent evidence to the contrary, a person temporarily or infrequently on the premises solely for legitimate commercial purposes is not under the tenant’s control.
- **“Person with a Disability”** or **“People with Disabilities”** refers to a person who has a physical or mental impairment that limits one or more major life activities such as caring for oneself, manual tasks, walking, seeing, hearing, speaking, breathing or learning; has a record of such impairment; or is regarded as having such an impairment, and includes all people covered by either federal or state law.
- **“Seasonal Worker”** is an individual who is hired for a short-term position where employment begins about the same time each year. Typically, seasonal workers are hired to address seasonal demands.
- **“Sex”** also includes, but is not limited to, a person’s gender. “Gender” means sex and includes a person’s gender identity and gender expression. “Gender expression” means a person’s gender-related appearance and behavior whether or not stereotypically associated with the person’s assigned sex at birth. (Cal. Gov. Code §12926(r)(2))
- **“Sexual Assault”** is defined as any nonconsensual sexual act proscribed by Federal, tribal, or State law, including when the victim lacks capacity to consent.
- **“Sexual orientation”** - means one’s emotional or physical attraction to the same and/or opposite sex (e.g., homosexuality heterosexuality, or bisexuality).
- **“Stalking”** is defined:
  - To follow, pursue, or repeatedly commit acts with the intent to kill, injure, harass, or intimidate another person; or
  - To place under surveillance with the intent to kill, injure, harass, or intimidate another person; and
  - In the course of, or as a result of, such following, pursuit, surveillance, or repeatedly committed acts, to place a person in reasonable fear of the death of, or serious bodily injury to, or to cause serious emotional harm to that person, the spouse or intimate partner of that person, or a member of the immediate family of that person.
- **“Student”** is defined to mean all students enrolled either full-time or part-time at an institution of higher education.
- **“Suitable for Occupancy”**. A property will be considered “suitable for occupancy” unless the family can demonstrate that:
  - a) It does not meet the disability-related needs of all members of the family;
  - b) It is not sufficient for the size of the family;

- c) To reside in the property would be a hardship for the family due to its location (e.g., the distance or commuting time between the property and the family's place of work or school would be a hardship to the family);
  - d) It is unsafe to reside in because of the physical condition of the property (e.g., property's physical condition poses a risk to the family's health and safety and the condition of the property cannot be easily remedied);
  - e) It is not a property that a family may reside in under the State or local laws of the jurisdiction where the property is located;
  - f) The family does not have the legal authority to sell the property (i.e. due to litigation, fractional ownership, sale, or divorce);
  - g) The property is jointly owned by the family and another individual who does not live with the family but resides in the jointly owned unit; or
  - h) The property is up for sale.
- **“Tuition”** is defined as books and supplies (including supplies and equipment to support students with learning disabilities or other disabilities), room and board, and other fees required and charged to a student by an institution of higher education (as defined under Section 102 of the Higher Education Act of 1965 ([20 U.S.C. 1002](#))) and, for a student who is not the head of household or spouse, the reasonable and actual costs of housing while attending the institution of higher education and not residing in an assisted unit. **“Unearned Income”** is income received without active work, such as interest from investments, dividends, or rental income from investment properties.
  - **“Zero Income Family”** is when a family reports to have no source of income, which includes “excluded income” such as foster care. A family that receives income such as child support and/or family support is not considered to have a zero-income status.

## **Chapter 2:**

# **ADMISSION ELIGIBILITY FACTORS AND APPLICANT REQUIREMENTS**

### **2.1 INTRODUCTION**

#### **[24 CFR §982.54(d)]**

This chapter defines the criteria used by the LACDA to determine program eligibility, and the requirements that families and family members must meet in order to receive assistance under the program. This chapter also clarifies the circumstances that may lead to a denial of admission, and the process for notifying families if they are denied admission.

Family members being added to households that are currently receiving assistance are considered new applicants and are subject to the LACDA's admission and eligibility requirements.

The intent of these policies is to maintain consistency and objectivity in evaluating the eligibility of families who apply for the programs. The criteria listed in this chapter are the only factors used to review eligibility, to minimize the possibility of bias, or discrimination. Selection shall be made without regard to race, color, sex, religion, gender, gender identity and expression, family status, national origin, marital status, ancestry, age, sexual orientation, disability, source of income, medical condition, military and veteran status, genetic information, arbitrary characteristics, or any other basis prohibited by law.

### **2.2 ELIGIBILITY FACTORS AND REQUIREMENTS**

#### **[24 CFR §982.201 and 24 CFR §982.552]**

In accordance with HUD regulations, the LACDA has established the following eligibility criteria, which are detailed throughout this chapter. To be eligible for admission, an applicant family must:

1. Meet the definition of a "family;"
2. Be within the appropriate income limits;
3. Be a citizen, or a non-citizen with eligible immigration status [24 CFR §5.508]; and
4. Furnish and verify valid Social Security numbers for all family members [24 CFR §5.216].

The LACDA will also deny admission as follows:

1. If applicant fails to submit required consent forms, or any other LACDA-required information to verify family eligibility, composition, or income (including birth certificates and valid state identification);
2. If applicant is in violation of other criteria listed in Section 2.8 of this chapter;

3. If the applicant is a member, officer, or employee of the LACDA who formulates policy, or influences decisions with respect to federally funded rental assistance programs, or a public official, or a member of the local governing body, or member of Congress; or
4. If applicant is a student enrolled in an institution of higher learning and meets all the criteria listed in Section 2.5 of this chapter.

The LACDA's procedures regarding notification and informal reviews for applicants who are denied assistance can be found at the end of this chapter.

## **2.3 FAMILY COMPOSITION**

### **[24 CFR §982.201(c) and 24 CFR §5.403]**

The applicant must qualify as a family. The LACDA defines a family as a single person or a group of persons as follows, regardless of actual or perceived sexual orientation, gender identity, or marital status.

1. **An elderly family:** A family whose head, co-head, spouse, or sole member is a person who is at least 62 years of age. It may include two or more persons who are at least 62 years of age living together, or one or more persons who are at least 62 years of age living with one or more live-in aides.
2. **A disabled family:** A family whose head, co-head, spouse, or sole member is a person with disabilities. It may include two or more persons with disabilities living together, or one or more persons with disabilities living with one or more live-in aides.
3. **The remaining member of a tenant family:** The remaining member of a tenant family will be reassigned another bedroom size voucher, provided there is funding available.

The remaining member of a tenant family does not include a live-in aide of the former family whose service was necessary to care for the well-being of an elderly, disabled, or handicapped head of household, co-head, or spouse and whose income was not included for eligibility purposes.

4. **A group of persons:** Two or more persons sharing residency, who are not categorized as an elderly or disabled family, whose income and resources are available to meet family needs.
5. **A single person:** A person who lives alone, or intends to live alone, who is not categorized as elderly, disabled, or the remaining member of a tenant family.

A child who is temporarily away from home due to placement in foster care is considered a member of the family.

### **2.3.1 Head of Household**

#### **[24 CFR §5.504]**

The head of household is considered to be the adult member of the household who is designated by the family or the LACDA as head, is wholly or partly

responsible for paying the rent, to sign program-related documents, and has the legal capacity to enter into a lease under state/local law. However, since rental assistance is provided to the entire family, it is expected that every family member will uphold the LACDA's rules and regulations. Emancipated minors who qualify under State law will be recognized as head of household.

### **2.3.2 Spouse of Head**

Spouse means the husband or wife of the head of household. The marriage partner who, in order to dissolve the relationship would have to be divorced. It includes the partner in a common law marriage. The term "spouse" does not apply to boyfriends, girlfriends, significant others, or co-heads.

### **2.3.3 Co-Head**

A co-head is an individual in the household who is equally responsible for the lease with the head of household. A family may have a spouse or co-head, but not both. A co-head never qualifies as a dependent.

### **2.3.4 Live-In Aides**

**[24 CFR §982.316 and 24 CFR §5.403]**

A family may include a live-in aide if the live-in aide meets the following stipulations. The live-in aide:

1. Must be at least 18 years of age or older;
2. Is determined by the LACDA to be essential to the care and well-being of an elderly person or a person with a disability;
3. Is not obligated for the support of the person(s);
4. Would not be living in the unit except to provide care for the person(s); and
5. Must sign and submit a Criminal Background Acknowledgement and Consent form and must undergo and pass a criminal background screening.

**Note:** Occasional, intermittent, multiple or rotating care givers do not meet the definition of a live-in aide. Live-in aides must reside with a family permanently for the family unit size to be adjusted in accordance with the subsidy standards. An additional bedroom should not be approved for these caregivers, except when the family's composition or circumstances warrant the provision of an extra bedroom to permit disability-related overnight care and allow the family equal use and enjoyment of the unit.

A live-in aide is different from a family member in the following:

1. An aide's income will not be used to determine eligibility of family;
2. An aide is not subject to citizenship/eligible immigrant requirements;
3. An aide is not considered a remaining member of the tenant family, which means that they are not entitled to retain the voucher if the eligible family member(s) voluntarily leave the program, are terminated from the program, or have a voucher that expires.

Relatives are not automatically excluded from being live-in aides, but they must meet all the stipulations in the live-in aide definition described above to qualify for the income exclusion as a live-in aide.

A relative who does not qualify for income exclusion as a live-in aide may qualify for other exclusions, including if a family receives income from a state agency to offset the cost of services and equipment needed to keep a developmentally disabled family member at home. For a complete list of income exclusions, refer to Section 6.4 (Income Inclusions and Exclusions).

A live-in aide may only reside in the unit with the approval of the LACDA. The LACDA will require written verification from a reliable, knowledgeable professional, such as a doctor, social worker, or caseworker. The verification provider must certify that a live-in aide is needed for the care of the family member who is elderly and/or disabled. The verification must include the hours of care that will be provided.

The live-in aide will be subject to a criminal background check and must meet the same standards as an applicant. Please see Section 2.8 (Screening for Drug Abuse and Other Criminal Activity) for more information.

With authorization from the assisted family, the landlord, and the LACDA, a live-in aide may have a family member live in the assisted unit as long as it does not create overcrowding in the unit. The LACDA will not increase the family's subsidy to accommodate the family of a live-in aide.

### **2.3.5 Changes to the Household Prior to Program Admission**

The LACDA may only transfer Head of household status to a person listed on the waiting list or application as spouse or co-head under the following circumstances:

In the event of the death of the head of household, a person already listed as the Spouse or Co-Head on the waiting list or application may request a change of the Head of Household status by submitting a signed, written request along with a copy of the death certificate of the original head of household.

In all other cases (including but not limited to divorce, separation, abandonment, medical incapacity) the head of household status will be changed only when the original head of household submits to the LACDA a written release of the application to the Spouse or Co-Head, or if the Spouse or Co-Head requesting a transfer of Head of Household status submits to the LACDA legal documentation of his/her right to the application.

### **2.3.6 Multiple Families in the Same Household**

When families consisting of two families live together, (such as a mother and father, and a daughter with her own husband or children), apply together as a family, they will be treated as one-family unit.

### **2.3.7 Joint Custody of Children**

Children who are subject to a joint custody agreement but live with one parent at least 51 percent of the time will be considered members of that household. If both

parents on the waiting list are trying to claim the child, the parent whose address is listed in the school records will be allowed to claim the school-age child as a dependent.

Where court orders exist and provide guidance on custody issues, the LACDA will follow the directives outline in the court documents.

## **2.4 INCOME LIMITATIONS**

### **[24 CFR §982.201(b) and 24 CFR §5.603(b)]**

In order to be eligible for assistance, an applicant must be:

1. An extremely low-income family (a family whose gross annual income does not exceed 30 percent of the HUD-established median income for the Los Angeles-Long Beach Primary Metropolitan Statistical Area); **or**
2. A very low-income family (a family whose gross annual income does not exceed 50 percent of the median income for the Los Angeles-Long Beach Primary Metropolitan Statistical Area).
3. A low-income family (a family whose gross annual income does not exceed 80 percent of the median income for the Los Angeles-Long Beach Primary Metropolitan Statistical Area) who meets at least one of the following criteria:
  - i. Is “continuously assisted” (meaning the applicant has been receiving assistance under a program covered by the 1937 Housing Act, i.e. public housing); or
  - ii. Is displaced as a result of the prepayment of the mortgage or voluntary termination of an insurance contract on eligible low-income housing; or
  - iii. Qualifies for assistance as a non-purchasing family residing in a HOPE 1 or HOPE 2 project; or
  - iv. Qualifies for assistance as a non-purchasing family residing in a project subject to a resident homeownership program under 24 CFR §248.101.

As required by HUD regulations, 75 percent of all new admissions will be required to meet the definition of an extremely low-income family. To achieve the required balance, it may be necessary to skip over an otherwise eligible family. If this occurs, families that have been skipped over will retain the time and date of application and will be admitted as soon as an appropriate opening becomes available.

Families whose annual incomes exceed the income limit will be denied admission and offered an informal review.

### **2.4.1 Income Limits for Other Programs**

Periodically, HUD has provided funding to the LACDA for projects involving preservation opt-outs and/or the expiration of a project-based Section 8 contract. HUD provides the income limits applicable to those projects through specific

regulation. The LACDA will follow HUD directives in determining admissions for such programs.

## **2.5 ELIGIBILITY OF STUDENTS**

### **[24 CFR §5.612]**

The student rule applies to all individuals enrolled as a full or part-time student at an institution of higher education for the purpose of obtaining a degree, certificate, or other program leading to a recognized educational credential, except for a student who is living with his/her parents who are applying for or receiving section 8 assistance.

No assistance shall be provided to any individual that meets the following criteria:

- Is enrolled as a student at an institution of higher education, as defined under section 102 of the Higher Education Act of 1965 (20 U.S.C. 1002);
- Is under 24 years of age;
- Is not a veteran of the United States military;
- Is unmarried;
- Does not have a dependent child;
- Is not a person with disabilities, as such term is defined in section 3(b)(3)(F) of the United States Housing Act of 1937 and was not receiving assistance under such section 8 as of November 30, 2005; and
- Is not otherwise individually eligible (determined independent from his or her parents. See section 1.24 Terminology, Independent Student Status definition), or has parents, who individually or jointly, are not eligible on the basis of income to receive assistance.

Unless the student is determined independent from his or her parents, the eligibility of a student seeking assistance will be based on both the student and the parents being determined income eligible for assistance or whether the student's parents, individually or jointly, are income eligible for assistance. Both the student's income and the parents' income must be separately assessed for income eligibility.

## **2.6 CITIZENSHIP/ELIGIBLE IMMIGRATION STATUS**

### **[24 CFR §982.201(a) and §5.508]**

Eligibility for assistance is contingent upon a family's submission of evidence of citizenship or eligible immigration status. In order to receive assistance, a family member must be a U.S. citizen or eligible immigrant. Each family member, regardless of age, must submit a signed declaration of U.S. citizenship or eligible immigration status. The LACDA may request verification of the declaration according to verification guidelines detailed in Chapter 7.

The citizenship/eligible immigration status of each member of the family is considered individually before the family's status is defined.

This requirement does not apply to foster children or live-in aides.

### **2.6.1 Mixed Families**

**[24 CFR §5.504]**

An applicant family is eligible for assistance as long as at least one member is a citizen or eligible immigrant. A family that includes eligible and ineligible individuals is called a “mixed family.” Mixed family applicants will be given notice that their assistance will be prorated and that they may request a hearing if they contest this determination.

### **2.6.2 No Eligible Members**

**[24 CFR §982.552(b)(4)]**

The LACDA is required to deny admission if no member of the family is a U.S. citizen or eligible immigrant. Families will be provided the opportunity to appeal the decision in an informal review.

## **2.7 SOCIAL SECURITY NUMBER VERIFICATION REQUIREMENTS**

**[24 CFR §5.216(a)]**

Applicant families are required to provide verification of Social Security numbers for all family members prior to admission. If the applicant family is unable to comply with this requirement, they may retain their place on the waiting list but cannot become a participant until it can provide Social Security numbers for each member of the household.

If a child under the age of 6 years was added to the applicant household within the 6-month period prior to voucher issuance, the applicant may become a participant, so long as Social Security number verification is provided within 90-calendar days from the date of admission (HAP effective date). One additional 90-day extension must be granted, if the PHA determines (in its discretion) that the delay in providing verification is a result of uncontrollable circumstances.

The social security number verification requirement also applies to persons joining the family after the admission to the program.

The following individuals are exempt from the Social Security requirement:

- Individuals that were 62 years of age as of January 31, 2010, and that were determined eligible for the program on or before that date.
- Individuals not contending eligible immigration status.

Families who refuse to furnish verification of Social Security numbers will be denied admission to the program.

## **2.8 DENIALS OF ASSISTANCE**

**[24 CFR §982.552 – §982.553]**

This section includes HUD-required mandatory screening standards that lead to the denial of assistance, as well as discretionary standards allowed by HUD to deny assistance.

These guidelines apply to applicant families, and new members being added to the household of a family currently participating in a rental assistance program administered by the LACDA. The LACDA also screens families transferring under the portability option into its jurisdiction from other housing authorities, as authorized at 24 CFR §982.355(c)(9) and §982.355(c)(10).

### **2.8.1 Mandatory Denial of Assistance**

#### **[24 CFR §982.553(a)]**

HUD regulations require that the LACDA deny assistance in the following cases:

1. Any member of the household that has been evicted from federally assisted housing in the last 3 years for drug-related criminal activity. HUD permits, but does not require, the PHA to admit an otherwise-eligible family if the household member has completed a PHA-approved drug rehabilitation program or the circumstances, which led to the eviction no longer exists (e.g. the person involved in the criminal activity no longer lives in the household).

As permitted by HUD, the LACDA will make an exception under the following circumstances:

- If the LACDA is able to verify that the household member who engaged in the criminal activity has successfully completed a supervised drug rehabilitation program after the date of the eviction.
  - If the individual that committed the crime is no longer living in the household.
  - If the circumstances leading to the eviction no longer exist (i.e. the individual responsible for the original eviction is imprisoned or is deceased).
2. Any household member has ever been convicted of drug-related criminal activity for the production or manufacture of methamphetamine on the premises of federally assisted housing.
  3. The LACDA determines that any household member is currently engaging in the illegal use of a drug.
  4. The LACDA has reasonable cause to believe that any household member's current use or pattern of use of illegal drugs, or current abuse or pattern of abuse of alcohol, may threaten the health, safety, or right to peaceful enjoyment of the premises by other residents.
  5. Applicant(s) subject to a lifetime sex offender registration requirement.

The LACDA is required to deny admission if the applicant or any household member is subject to lifetime registration as a sex offender under a state registration program, regardless of longevity of conviction or completion of any rehabilitative program.

### **2.8.2 Other Permitted Reasons for Denial of Assistance**

The LACDA has the discretion to apply the following criteria, in addition to the HUD eligibility criteria, as grounds for denial of admission to the program.

1. Criminal Activity [24 CFR §982.553(a)(2)(ii)]

HUD permits, but does not require, the LACDA to deny assistance if the LACDA determines that any household member is currently engaging in or has engaged in during a reasonable time before the family would receive assistance, certain types of criminal activity.

For Fiscal Year 2017-2018, the LACDA removed its discretionary Criminal Activity prohibitions permitted under 24 CFR 982.553 and deleted them from this section. The LACDA will reevaluate this policy to be consistent with Board adopted revisions to the LACDA's Homeless preference.

2. Previous Behavior in Assisted Housing [24 CFR §982.552(c)]

HUD authorizes the LACDA to deny assistance based on the family's previous behavior in assisted housing. The LACDA will screen applicants for the following behaviors as follows:

- The family, or any household member, must not have violated any family obligations during a previous participation in a federally assisted housing program. The LACDA will review situations, on a case-by-case basis, for violations that occurred in the last 12 months.
- The family, or any household member, must not have engaged in serious lease violations while a resident of federally assisted housing or within the past 5 years had been evicted from a federally assisted housing program.
- The family, or any household member, must not be a past participant of any Section 8 or public housing program who has failed to satisfy liability for rent, damages, or other amounts to the LACDA, or another public housing agency, including amounts paid under a HAP contract to an owner for rent, damages, or other amounts owed by the family under the lease.

On a case-by-case basis, the LACDA will consider the nature of the debt and the amount of the debt. The LACDA may provide the applicant the opportunity to repay any such debt in full as a condition of admission. The LACDA will not enter into a repayment agreement for this purpose.

- No family household member may have engaged in or threaten abusive or violent behavior toward LACDA personnel.

**“Abusive or violent behavior”** includes verbal as well as physical abuse or violence. Use of expletives that are generally considered insulting, racial epithets, or other language, written or oral, that is customarily used to insult or intimidate, may be cause for denial of admission.

**“Threatening”** refers to oral or written threats or physical gestures that communicate intent to abuse or commit violence.

Actual physical abuse or violence will always be cause for denial.

- The family, or any household member, must not supply false, inaccurate, or incomplete information on any application for federal housing programs, including public housing and Section 8. The family may be denied for a period not to exceed 2 years from the date of such determination by the LACDA, that information which was provided was false, inaccurate or incomplete, provided that no further cause for denial exists [24 CFR §982.552(c)(2)(i)].
- The LACDA will deny admission if the applicant or any household member has committed fraud, bribery, or any other corrupt or criminal act in connection with any federal housing program. The LACDA may make an exception in determining admission if the family member(s) who participated or were culpable for the action do not reside in the assisted unit.
- The LACDA will not deny admission to an otherwise eligible family because the family previously failed to meet its obligations under the Family Self-Sufficiency (FSS) program.

### **2.8.3 Consideration of Circumstances**

#### **[24 CFR §982.553(C)(2)]**

HUD authorizes the LACDA to consider all relevant circumstances when deciding whether to deny assistance based on a family's past history, except in the situations for which denial of assistance is mandatory. In accordance with PIH Notice 2015-19, the LACDA will not use an arrest record or police report as the sole basis for a decision.

When considering the circumstances of the case, the LACDA will consider the following factors prior to making its decision:

- The seriousness of the case, especially with respect to how it would affect other residents.
- The extent of participation or culpability of individual family members, including whether the culpable family member is a minor, or a person with disabilities, or a victim of domestic violence, dating violence, sexual assault, stalking, as well as verbal, psychological, economic, or technological abuse.
- The length of time since the violation occurred, the family's recent history and the likelihood of favorable conduct in the future.
- In the case of drug or alcohol abuse, whether the culpable household member is participating in or has successfully completed a supervised drug or alcohol rehabilitation program or has otherwise been rehabilitated successfully. The LACDA will require the applicant to submit evidence of the household member's current participation in or successful completion of a supervised drug or alcohol rehabilitation program, or evidence of otherwise having been rehabilitated successfully.

### **2.8.4 Criminal Background Checks**

#### **[24 CFR §982.552 – §982.553, §5.903 – §5.905]**

The LACDA requests a criminal background check for all applicant household members (including live-in aides) 18 years of age and older. The criminal background check is used as a factor in screening applicants for criminal activities that would prohibit admission to the LACDA's Section 8 rental assistance programs.

All adult members of an applicant household must submit a signed Criminal Background Acknowledge and Consent [24 CFR §5.903(b)], authorizing the release of criminal conviction records from law enforcement agencies. Failure to sign the consent form will result in the denial of assistance.

The LACDA is additionally authorized by HUD to obtain access to sex offender registration information in order to prevent program admission to any household member, (including live-in aides) subject to a lifetime sex offender registration under a state sex offender registration program.

### **2.8.5 Requests for Criminal Records by Owners of Covered Housing for the Purposes of Screening**

#### **[24 CFR §5.903(d)]**

Owners of covered housing may request that the LACDA obtain criminal records on their behalf, for the purpose of screening applicants. The LACDA will charge a fee in order to cover costs associated with the review of criminal records. These costs could include fees charged to the LACDA by the law enforcement agency and the LACDA's own related staff and administrative cost.

Owners must submit the following items in order for the LACDA to process criminal records. Owner requests must include:

1. A copy of a signed consent form from each adult household member 18 years of age and older. Included in the consent form must be a legible name, the date of birth, a California Identification Number, and a Social Security number. This information will be used for the sole purpose of distinguishing persons with similar names or birth dates.
2. An owner's criteria or standards for prohibiting admission of drug criminals in accordance with HUD regulations (§ 5.854 of 24 CFR Parts 5 et al.), and for prohibiting admission of other criminals (§ 5.855 of 24 CFR Parts 5 et al.).

Once the LACDA obtains criminal records, a determination will be made as to whether a criminal act, as shown by a criminal record, can be used as a basis for applicant screening. The LACDA will base its determination in accordance with HUD regulations and the owner criteria. If the owner's criteria conflicts with HUD regulations, the regulations will have precedence.

It is important to note that the LACDA will not disclose the applicant's criminal conviction record or the content of that record to the owner.

### **2.8.6 Request for Criminal Records by Section 8 Project-Based Owners for the Purposes of Lease Enforcement or Eviction**

Section 8 project-based owners may request that the public housing agency in the location of the project obtain criminal conviction records of a household member

on behalf of the owner for the purpose of lease enforcement or eviction. The owner's request must include the following:

1. A copy of the consent form, signed by the household member, and
2. The owner's standards for lease enforcement and evicting due to criminal activity by members of a household.

### **2.8.7 Confidentiality of Criminal Records**

#### **[24 CFR §5.903(g)]**

Criminal records received by the LACDA are maintained confidentially, not misused, nor improperly disseminated and kept locked during non-business hours. All criminal records will be destroyed no later than 30 calendar days after a final determination is made.

### **2.8.8 Disclosure of Criminal Records to Family**

The applicant or family member requesting to be added to the household must be provided with a copy of the criminal record and an opportunity to dispute the record. Applicants will be provided an opportunity to dispute the record at an informal review. Participants may contest such records at an informal hearing [24 CFR §982.553(d)].

### **2.8.9 Explanations and Terms**

#### **[24 CFR §5.100]**

The following terms are used to determine eligibility when an applicant or a family member is added to an already assisted household and is undergoing a criminal background check.

- **“Covered housing”** includes public housing, project-based assistance under Section 8 (including new construction and substantial rehabilitation projects), and tenant-based assistance under Section 8.
- **“Drug”** means a controlled substance as defined in Section 102 of the Controlled Substance Act (21 U.S.C. 802).
- **“Drug-related criminal activity”** means the illegal manufacture, dispensation, distribution, sale, use, or possession of illegal drugs, with the intent to manufacture, dispense, distribute, sell or use the drug.
- **“Pattern”** is defined as the use of a controlled substance or alcohol if there is more than one incident during the previous 12 months. “Incident” includes but is not limited to arrests, convictions, no contest pleas, fines, and city ordinance violations.
- **“Premises”** is the building, complex, or development in which the public or assisted housing dwelling unit is located, including common areas and grounds.
- **“Sufficient evidence”** may include all or a number of personal certifications along with supporting documentation from the following sources; 1) probation

officer, 2) landlord, 3) neighbors, 4) social service workers, 5) review of verified criminal records.

- **“Violent criminal activity”** any activity that has as one of its elements the use, attempted use, or threatened use of physical force substantial enough to cause or be reasonably likely to cause serious bodily injury or property damage. (24 CFR §5.100)

## **2.9 SUITABILITY OF FAMILY**

### **[24 CFR §982.307(a)(2)]**

The LACDA may take into consideration any admission criteria listed in this chapter in order to screen applicants for program eligibility; however, it is the owner’s responsibility to screen applicants for family behavior and suitability for tenancy.

The LACDA will assist and advise applicants on how to file a complaint if they have been discriminated against by an owner.

## **2.10 DENYING ADMISSION TO INELIGIBLE FAMILIES**

### **[24 CFR §982.201(f)(1) and §982.552(a)(2)]**

Denial of assistance for an applicant family may include denying placement on the waiting list; denying or withdrawing a voucher; refusing to enter into a HAP contract or approve a lease; and refusing to process or provide assistance under portability procedures.

Families from the waiting list who are determined to be ineligible will be notified in writing of the reason for denial and be given an opportunity to request an informal review if they do not agree with the decision. This policy also applies to incoming families from other housing authorities that have not yet received assistance in the LACDA’s jurisdiction. Please refer to Chapter 16 for more information on the informal review process.

## **2.11 PROHIBITION AGAINST DENIAL OF ASSISTANCE TO VICTIMS OF DOMESTIC VIOLENCE, DATING VIOLENCE, SEXUAL ASSAULT AND STALKING.**

### **[24 CFR Part 5, Subpart L]**

The Violence Against Women Reauthorization Act of 2005 and 2013 (VAWA) prohibits denial of admission to an otherwise qualified applicant on the basis that the applicant is or has been a victim of domestic violence, dating violence, sexual assault, stalking, as well as verbal, psychological, economic, or technological abuse.

VAWA protections cover applicants when they are applying for admission to a covered housing program. VAWA protections are not limited to women. Victims of domestic violence, dating violence, sexual assault, stalking, as well as verbal, psychological, economic or technological abuse are eligible without regard to sex, gender identity, or sexual orientation. Victims cannot be discriminated against on the basis of any protected characteristic, including race, color, national origin, religion, sex, familial status, disability, or age. HUD programs must also operate

consistently with HUD's Equal Access Rule, which requires that HUD assisted programs are made available to all otherwise eligible individuals and families regardless of actual or perceived sexual orientation, gender identity, or marital status.

### **2.11.1 Determining Eligibility for VAWA Protections**

VAWA prohibits housing providers from denying assistance or admission, terminating participation in, or evicting a tenant based on an adverse factor, if the adverse factor is determined to be a direct result of the fact that the applicant is or has been a victim of domestic violence, dating violence, sexual assault, stalking, as well as verbal, psychological, economic or technological abuse.

An adverse factor refers to any factor that can be used as a basis for denying admission, terminating assistance, or evicting a tenant. However, if a denial or termination of assistance or eviction is required by a federal statute, based on a particular adverse factor, the LACDA must comply with that statute, even if the adverse factor is a direct result of domestic violence, dating violence, sexual assault, stalking, as well as verbal, psychological, economic or technological abuse.

### **2.11.2 Notification Requirement**

#### **[24 CFR §5.2005(a)(1)(i)(ii) and §5.2005(a)(2)(i)(ii)]**

The LACDA acknowledges that a victim of domestic violence, dating violence, sexual assault, stalking, as well as verbal, psychological, economic, or technological abuse may have an unfavorable history (e.g., a poor credit history, a record of previous damage to a unit, a prior arrest record) that would warrant denial under the LACDA's regulations and policies. Therefore, the LACDA will provide all applicants with information about VAWA at the time of housing assistance denial or cancelation, during admission, specifically when an applicant is officially leased, when adult members are added to the household after the family has been admitted to the program, and when a family's assisted is proposed terminated or terminated.

[This section must not be removed or modified until after November 2028]

The VAWA information provided to applicants and participants will consist of the following documents:

- Form HUD-5382, Certification of Domestic Violence, Dating Violence, Sexual Assault, or Stalking and Alternate Documentation.
- Form HUD-5380, Notice of Occupancy Rights Under the Violence Against Women Act.

### **2.11.3 Victim Documentation**

An applicant claiming that the cause of an unfavorable history is that a member of the applicant family is or has been a victim of domestic violence, dating violence, sexual assault, stalking, as well as verbal, psychological, economic, or technological abuse must provide documentation (1) demonstrating the connection between the abuse and the unfavorable history and (2) naming the

perpetrator of the abuse if safe to disclose. The documentation may consist of any of the following:

- A statement signed by the victim certifying that the information provided is true and correct and that it describes bona fide incident(s) of actual or threatened domestic violence, dating violence, sexual assault, stalking, as well as verbal, psychological, economic, or technological abuse.
- A record of a federal, state, tribal, territorial, or local law enforcement agency (such as a police report), court, or administrative agency documenting the domestic violence, dating violence, sexual assault, stalking, as well as verbal, psychological, economic, or technological abuse.
- Documentation signed by an employee, agent, or volunteer of a victim service provider, an attorney, a medical or mental health professional, from whom the victim has sought assistance in addressing domestic violence, dating violence, sexual assault, stalking, as well as verbal, psychological, economic, or technological abuse, or the effect of the abuse in which the professional attests under penalty of perjury to the professional's belief that the incident or incidents in question are bona fide incidents of abuse, and that the victim of domestic violence, dating violence, sexual assault, stalking, as well as verbal, psychological, economic, or technological abuse has signed or attested to the documentation. The victim must also sign the documentation.

The LACDA reserves the right to waive the documentation requirement if it determines that a statement of other corroborating evidence from the individual will suffice.

#### **2.11.4 Perpetrator Documentation**

When the perpetrator of the abuse is a member of the applicant family, the applicant must provide additional documentation consisting of one of the following:

- A signed statement (1) requesting that the perpetrator be removed from the application and (2) certifying that the perpetrator will not be permitted to visit or to stay as a guest in the assisted unit.
- Documentation that the perpetrator has successfully completed, or is successfully undergoing, rehabilitation or treatment. The documentation must be signed by an employee or agent of a domestic violence service provider, or by a medical or other knowledgeable professional, from whom the perpetrator has sought or is receiving assistance in addressing the abuse. The signer must attest under penalty of perjury to his or her belief that the rehabilitation was successfully completed or is progressing successfully. The victim and perpetrator must also sign or attest to the documentation.

#### **2.11.5 Conflicting Documentation**

##### **[24 CFR §5.2007(b)(2)]**

In the case where the LACDA receives conflicting certification documents from two or more members of the household, each claiming to be a victim and naming

one or more of the other petitioning household members as the perpetrator, the LACDA will determine who is the true victim by requiring third-party documentation within 30 calendar days in order to resolve the conflict.

If the applicants fail or refuse to provide third-party documentation where there is conflicting evidence, the LACDA does not have to provide the tenant(s) with the protections contained in Form HUD-5380 "Notice of Occupancy Rights under the Violence Against Women Act".

#### **2.11.6 Time Frame for Submitting Documentation**

##### **[24 CFR §5.2007(a)(2)]**

The applicant must submit the required documentation with the request for an informal review. At the discretion of the LACDA, the 14-business day deadline may be extended. The LACDA will postpone scheduling the applicant's informal review until after it has received the documentation, or the extension period has lapsed.

If after reviewing the documentation provided by the applicant, the LACDA determines that the family is eligible for assistance, no informal review will be scheduled and the LACDA will move forward with the admission of the applicant family.

#### **2.11.7 VAWA Confidentiality**

##### **[24 CFR §5.2007]**

All VAWA information provided to the LACDA, including the fact that an individual is a victim of domestic violence, dating violence, sexual assault, stalking, as well as verbal, psychological, economic, or technological abuse shall be retained in confidence, and will not be entered into any shared database or provided to any related entity, except to the extent that disclosure is:

- Requested or consented to by the individual in writing to release the information on a time-limited basis;
- Required for use in an eviction proceeding or hearing regarding termination of assistance from the covered program; or
- Otherwise required by applicable law.

This includes keeping confidential the new location of the dwelling unit of the participant, if one is provided, from the person(s) that committed a VAWA crime against the applicant/participant.

## **Chapter 3:**

### **ADMINISTRATION OF THE WAITING LIST**

#### **3.1 INTRODUCTION**

##### **[24 CFR §982.54(d)(1)]**

This chapter describes the policies and procedures that govern the initial application, placement and denial of placement on the LACDA's waiting list. It is the LACDA's objective to ensure that the families are placed on the waiting list in the proper order so that an offer of assistance is not delayed to any family or made to any family prematurely.

By maintaining an accurate waiting list, the LACDA will be able to perform the activities, which ensure that an adequate pool of qualified applicants will be available so that program funds are used in a timely manner.

#### **3.2 HOW TO REGISTER**

Interested persons may apply online at [www.lacda.org](http://www.lacda.org), or by calling the LACDA at (626) 262-4510 or (800) 731-4663.

##### **3.2.1 Preliminary Registration Waiting List**

###### **[24 CFR §982.204(b)]**

All families wishing to receive rental assistance through a LACDA rental assistance program are initially placed on the Preliminary Registration Waiting List, which is essentially an interest list. Families are placed on the Preliminary Registration Waiting List according to the LACDA's local preferences and then by date and time of registration. Applicants receive a confirmation letter that their name has been placed on the Preliminary Registration Waiting List.

During the preliminary registration process, the LACDA will obtain the following information:

- Residential, mailing, and/or employment address (if applicable) of the head of household;
- Name, date of birth, and social security number of head of household, co-head/marital type partner, and each additional member;
- Household's gross annual income;
- Disability status for each member;
- Veteran status;
- Homeless status;
  - Registrants experiencing homelessness within LACDA's jurisdiction will not require residency verification until they are selected from the waitlist. Once selected, verified homeless registrants living within the LACDA's jurisdiction will qualify for the local preference.
- Primary Language;
- VAWA status;
- Race and ethnicity of the head of household;

- Email address and contact number;
- Registrants preferred designated contact method; and
- If applicable, a point of contact (i.e., emergency number, social services contact person, etc.).

### **3.2.2 Active Waiting List**

When the LACDA determines that there is sufficient funding to issue additional vouchers, a pool of potential new applicants is drawn from the Preliminary Registration Waiting List. Families move onto the Active Waiting List according to the LACDA's admission policies. Once a family has been placed on the Active Waiting List, they will be asked to complete an application and provide all the necessary income and eligibility forms. At this point, all information will be confirmed through a third-party. Families must meet all admissions requirements to be issued a voucher.

### **3.2.3 Change in Circumstances**

#### **[24 CFR §982.204(b)]**

Applicants are required to notify the LACDA in writing, within 30 calendar days, when their circumstances change, including any change of address, income, or family composition.

### **3.2.4 Opening the Waiting List**

#### **[24 CFR §982.206(a)]**

When the LACDA opens its waiting list, it will give public notice by advertising in one or more of the following newspapers, minority publications, and media entities.

- Los Angeles Times
- La Opinion
- The Daily News
- International Daily News
- L.A. Sentinel
- Press Telegram
- Southwest Wave
- The Daily Breeze

The LACDA's public notice will contain:

- The dates, times, and locations where families may apply;
- The programs for which applications will be taken;
- A brief description of the program(s);
- A statement that public housing residents must submit a separate application if they want to apply to a rental assistance program;
- Any limitations on who may apply; and

- The Fair Housing Logo.

The notice will provide potential applicants with information that includes the LACDA's telephone number, website address, location address, information on eligibility requirements, and the availability of local preferences, if applicable. The notice will be made in an accessible format to persons with disabilities if requested.

Additional time for submission of an application after the stated deadline will be given as a reasonable accommodation at the request of a person with a disability.

### **3.2.5 Criteria Defining Who May Apply**

**[24 CFR §982.206(b)(1)]**

Upon opening the waiting list, the LACDA will disclose the criteria defining what families may apply for assistance under a public notice.

### **3.2.6 Closing the Waiting List**

**[24 CFR §982.206(c)]**

When the LACDA closes the waiting list, the same advertising methods described above will be used.

Notification of impending closure will be provided to the public for a minimum of 30 calendar days.

## **3.3 TIME OF SELECTION**

**[24 CFR §982.204(d)]**

When funding is available, families will be selected from the waiting list based on the LACDA's admission policies.

If the LACDA ever has insufficient funds to subsidize the unit size of the family at the top of the waiting list, the LACDA will not admit any other applicant until funding is available for the first applicant.

However, families may be skipped over to meet HUD-mandated income targeting requirements [24 CFR §982.201(b)]. See Section 2.4 (Income Limitations) for details.

## **3.4 CROSS-LISTING OF PUBLIC HOUSING AND SECTION 8 WAITING LISTS**

**[24 CFR §982.205(a)]**

The LACDA does not merge the waiting lists for public housing and Section 8. However, if the Section 8 waiting list is open when the applicant is placed on the public housing list, the LACDA must offer to place the family on the Section 8 waiting list. If the public housing waiting list is open at the time an applicant applies for Section 8 rental assistance, the LACDA must offer to place the family on the public housing waiting list.

### **3.5 PURGING THE WAITING LIST**

#### **[24 CFR §982.204(c)]**

The waiting list will be updated at least once every three years to ensure that all applicants and applicant information is current and timely.

When the LACDA is actively conducting outreach to applicants on the waiting list, the notification of available housing opportunities will serve as verification and will be used to purge the waiting list.

To update the waiting list, the LACDA will send a notice of update request via first class mail and/or email blast to a select amount or to all families on the waiting list to determine whether the family continues to be interested in, and to qualify for the program. The notice of update request will be sent to the last address that the LACDA has on record for the family. The notice of update request will provide a deadline by which the family must respond and will state that failure to respond will result in the applicant's name being removed from the waiting list.

The family's response must be in accordance with LACDA's prescribed method. Methods will include but are not limited to, responses required via logging in and providing updates through LACDA's Applicant Registration Portal, or by providing updates in writing. Responses in writing will require that the response be made via delivery in person, by mail, or by fax. Responses should be postmarked or received by the LACDA no later than 21 calendar days from the date of the LACDA notification.

If the family fails to respond within the time allotted, the family will be removed from the waiting list without further notice.

If the notice is returned by the post office with no forwarding address, the applicant will be removed from the waiting list without further notice.

If the notice is returned by the post office with a forwarding address, the notice will be resent to the address indicated. The family will have 21 calendar days to respond from the date the letter was resent.

If a family is removed from the waiting list for failure to respond, the Director of the Housing Assistance Division or designee may reinstate the family if it is determined that the lack of response was due to an administrative error, or to extenuating circumstances that are beyond the family's control. The family must be able to provide documentation of the circumstances for a decision to be rendered.

The decision to withdraw an applicant family that includes a person with a disability from the waiting list is subject to reasonable accommodation. If it is found that the applicant did not respond to the LACDA request for information or updates, and the LACDA determines that the family did not respond because of the family member's disability, the LACDA must reinstate the applicant family to their former position on the waiting list.

#### **3.5.1 Removing Applicants from the Waiting List**

##### **[24 CFR §982.204(c) and §982.201(f)(1)]**

The LACDA is authorized to remove names of applicants that do not respond to requests for information or updates. The LACDA will remove an applicant's name from the waiting list when:

- The applicant does not notify the LACDA of changes in circumstances in accordance with section 3.2.3 of this plan. This includes undeliverable mail received by the Postal Service which is returned to the LACDA;
- The applicant falsifies documents or makes false statements for any reason;
- The applicant requests in writing that their name be removed; or
- The applicant does not meet either the eligibility or screening criteria for the program (see Chapter 2 and Chapter 4).

If a family is removed from the waiting list because the LACDA has determined the family is not eligible for assistance, a notice will be sent to the family's address on record. The notice will state the reason the family was removed from the waiting list and will inform the family how to request an informal review (Chapter 16).

### **3.6 APPLICATION POOL**

The waiting list will be maintained in accordance with the following guidelines:

1. The application will be a permanent file;
2. Applications equal in preference will be maintained by date and time; and
3. All applicants must meet eligibility requirements outlined in Chapter 2 (Admission Eligibility Factors and Applicant Requirements).



## **Chapter 4:**

### **ADMISSION PROCESS**

#### **4.1 INTRODUCTION**

The policies outlined in this chapter are intended to ensure that all families who express an interest in housing assistance are given an equal opportunity to apply. The primary purpose of the intake function is to gather information about the family, so that an accurate, fair, and timely decision relative to the family's eligibility may be made. As such, applicants are placed on the waiting list in accordance with this plan.

#### **4.2 APPLICATION PROCEDURES**

##### **[24 CFR §982.204(c)]**

Once the applicant is transferred from the Preliminary Registration Waiting List to the Active Waiting List, the LACDA may require, issue, and/or receive applications for its program(s) through alternate mediums including electronically and/or via a Coordinated Access System. Applications issued via mail and/or electronic mail will be due back within 21 days from the date of mailing and/or emailing. If the application is returned undeliverable, the applicant will be cancelled from the waiting list (see section 3.5 exceptions to this rule).

Once an application is returned, the information provided by the applicant will be used to determine if the applicant is eligible for the program and any admissions preferences claimed.

If an applicant is ineligible based on the information provided on the application, or because they fail to return the documents by the due date, the applicant will be provided with a written notice of the reason for their disqualification and of their right to appeal the decision by requesting an informal review.

The application may capture the following information:

- Name of adult members and age of all members;
- Sex and relationship of all members;
- Street address and phone number;
- Mailing address;
- Amount(s) and source(s) of income received by household members;
- Information regarding disabilities relating to program requirements;
- Information related to qualification for preference(s);
- Social Security numbers;
- Race/ethnicity;
- Citizenship/eligible immigration status;
- Convictions for drug-related or violent criminal activity;

- Request for specific reasonable accommodation(s) needed to fully utilize program and services;
- Previous address;
- Current and previous landlords' names and addresses;
- Emergency contact person and address; and
- Program integrity questions regarding previous participation in HUD programs.

Applicants are required to inform the LACDA in writing within 30 calendar days of effective date of any changes in family composition, income, and address, as well as any changes in their preference status. Applicants must also comply with requests from the LACDA to update information. However, exceptions to this requirement may be found in section 3.5.

#### **4.2.1 Applicant Contact Methods**

The LACDA will make available a variety of contact methods when attempting to communicate with an applicant, including, but not limited to, during the application stage, the eligibility review stage and the selection stage, such as mail notification, email, phone calls, or contact with a designated point of contact, such as a family member or a social service agency. Once contact has been established, the LACDA will allow the applicant to designate a preferred method of contact; however, the LACDA will continue to use all methods when attempting to contact the applicant, unless otherwise advised due to safety concerns for the applicant. The LACDA will keep a record of attempts to contact the applicant and shall submit this record for any applicant upon request by HUD.

[This section must not be removed or modified until after November 2028]

#### **4.2.2 Interview Sessions/Mailings**

The LACDA may use mail, electronic forms, and/or interview sessions to obtain income, asset, and family composition information from applicants.

#### **4.2.3 Request for Information via Mail**

During times of high activity, the LACDA may mail income and asset forms or an application to applicants. Applicants will be given 21 calendar days to complete and return all required forms. If forms are not returned in a timely manner, the applicant will receive a final notice. The final notice will provide an additional 15-day grace period. If the required forms are not returned, as specified, the application will be cancelled. The LACDA will provide additional time as a reasonable accommodation and in special circumstances, such as an illness and/or death in the family.

#### **4.2.4 Application Interview Process**

During times for regular activity (average volume), the LACDA may utilize a full application interview to discuss the family's circumstances in greater detail, to clarify information that has been provided by the applicant, and to ensure that the information is complete.

Applicants are given two opportunities to attend an interview session. If the applicant does not respond to the second invitation, the application is cancelled. The LACDA will allow for a third interview appointment as a reasonable accommodation and in special circumstances, such as illness. An applicant may also request that the LACDA assign someone to conduct the interview at the applicant's home, as a reasonable accommodation.

All applicants must complete the following requirements [24 CFR §982.551(b)(1)].

1. At minimum, the head of household must attend the interview. The LACDA requests that all adult members of the applicant family attend when possible. This assures that all members receive information regarding their obligations and allows the LACDA to obtain signatures on critical documents quicker.
2. All adult members of the applicant family must sign the HUD-9886-A Form (Authorization for the Release of Information), and all supplemental forms required by LACDA. See Section 7.4 for additional information relating to Form HUD-9886-A.
3. Citizen declaration forms must be completed for all applicant family members, regardless of age.
4. All adult members of the applicant family must complete and sign a Criminal Background Acknowledge and Consent Form.
5. Identification information for all members of the applicant family such as birth certificates, valid driver's licenses or State (Department of Motor Vehicles) ID cards. Whichever is applicable based on the age of the family member, must be submitted for all members of the household regardless of age.

Information provided by the applicant will be verified, including citizenship status, full-time student status, and other factors related to preferences, eligibility and rent calculation. Verifications must be received no more than 60 calendar days before the time of issuance.

If they are requested, exceptions for any of the above listed items will be reviewed on a case-by-case basis. Exceptions will be granted based upon hardship. Reasonable accommodations will be made for individuals with disabilities. In these cases, a designee will be allowed to provide some information, but only with permission of the person with a disability.

Under both processes, all local preferences claimed on the application while the family is on the waiting list will be verified. Preference is based on the current status, so the qualifications for preference must exist at the time the preference is verified, regardless of the length of time an applicant has been on the waiting list.

#### **4.2.5 Secondary Reviews/Credit Reports**

##### **[24 CFR §982.551(b)(1)]**

The LACDA may retrieve credit reports for applicants and participants on a case-by-case basis. The information contained in the credit report will be used to confirm the information provided by the family. Specifically, the credit report will be used to confirm:

- **Employment**: A credit report will list any employers that the applicant has listed in any recent credit applications. If the credit report reveals employment, for any adult household member, within the last 12 months that was not disclosed, the family will be asked to provide additional documents to clear up the discrepancy. Failure to disclose current employment may result in cancellation of the family's application.
- **Aliases**: A credit report can provide information on other names that have been used for the purposes of obtaining credit. Common reasons for use of other names include a recent marriage or a divorce. If an alias has not been disclosed to the LACDA, the family will be asked to provide additional evidence of the legal identity of adult family members.
- **Current and previous addresses**: A credit report can provide a history of where the family has lived. This is particularly important because the LACDA provides a residency preference. If the family has provided one address to the LACDA and the credit report indicates a different address, the family will be asked to provide additional proof of residency. This may include a history of utility bills, bank statements, school enrollment records for children, credit card statements, or other relevant documents. Failure to provide adequate proof will result in the denial of a residency preference.
- **Credit card and loan payments**: A credit report will usually include a list of the family's financial obligations. Examples of the items that may show up include car loans, mortgage loans, student loans and credit card payments. The LACDA will review this information to confirm the income and asset information provided by the family. If the family's current financial obligations (total amount of current monthly payments) exceed the amount of income reported by the family, the LACDA will ask the family to disclose how they are currently meeting their financial obligations. Accounts that have been charged off or significantly delinquent are not included in this calculation. Failure to provide adequate proof of income will result in termination of the application.
- **Multiple Social Security numbers**: A credit report may list multiple Social Security numbers if an adult family member has used different Social Security numbers to obtain credit. If the credit report information does not match the information provided by an adult member of the family, the family member will be required to obtain written confirmation of the Social Security number that was issued to him/her from the Social Security Administration.

A family will not be issued a voucher until all discrepancies between the information provided by the applicant family, and the information contained in the credit report have been cleared by the applicant family.

When discrepancies are found, the family will be contacted by telephone or by mail. The family will be provided 15 calendar days to provide the necessary documentation to clear discrepancy. At the family's request, an additional 15 calendar days may be granted.

The family may be granted additional time under a reasonable accommodation. If additional time is granted, the family will receive a letter confirming the new deadline.

When the credit report reveals multiple discrepancies that are not easily communicated over the telephone, the LACDA will set up a face-to-face interview with the applicant. The LACDA will schedule up to two interview appointments. An additional interview may be scheduled as a reasonable accommodation. Failure to appear at the interview session will result in cancellation of the application.

Additionally, failure to provide the necessary information will result in cancellation of the application.

### **4.3 SELECTION AND FUNDING SOURCES**

#### **4.3.1 Special Admission (24. CFR 982.203)**

HUD may award funding for specifically named families living in specified types of units. The following are examples of types of program funding that may be designated by HUD for families living in a specified unit:

1. A family displaced because of demolition or disposition of a public or Indian housing project;
2. A family residing in a multifamily rental housing project when HUD sells forecloses or demolishes the project;
3. For housing covered by the Low-Income Housing Preservation and Resident Homeownership Act of 1990;
4. A family residing in a project covered by a project-based Section 8 HAP contract at or near the end of the contract term; and
5. A non-purchasing family residing in a HOPE 1 or HOPE 2 project.

In these cases, the LACDA may admit such families whether or not they are on the waiting list, and if they are on the waiting list, without considering the family's position on the waiting list. These families are considered non-waiting list selections. The LACDA must maintain records showing that families were admitted with special program funding.

#### **4.3.2 Conversion of Multifamily Apartment Complex (OPT-OUT):**

HUD may allocate funding to provide Housing Choice Voucher (HCV) tenant-based rental assistance for families residing in a HUD project-based subsidized multifamily apartment complex to coincide with the expiration of HUD's Subsidy Contract with the owner. Participants are admitted under targeted funding provisions and must meet applicable verification and eligibility requirements.

This may also include families residing in a project covered by a project-based Section 8 HAP contract at or near the end of the HAP contract term.

#### **4.3.3 Targeted Funding (24 CFR 982.204(2))**

HUD may award the LACDA funding for a specified category of families on the waiting list. The LACDA must use this funding only to assist the families within the specified category. In order to assist families within a targeted funding category, the LACDA is permitted to skip families that do not qualify within the targeted category. Within this category of families, the order in which such families are assisted is determined according to the policies in Section 4.4 below.

The LACDA administers the following targeted funding programs:

- Veterans Affairs Supportive Housing (VASH) Program – VASH Program vouchers are awarded to eligible homeless veterans and their families, in combination with case management and clinical services through the Department of Veterans Affairs Medical Center (VAMC) supportive services sites. The LACDA does not maintain a waiting list for the VASH Program.
- Non-Elderly Disabled (NED) Vouchers – NED vouchers are awarded to non-elderly disabled families on the HCV waiting list.
- Mainstream for Persons with a Disability- Mainstream vouchers are awarded to non-elderly disabled families on the HCV waiting list. The LACDA applies local preferences in determining the order in which Mainstream vouchers are awarded to eligible families.
- Family Unification Program (FUP) – FUP vouchers are awarded to families who are referred to the LACDA by the Los Angeles County Department of Children and Family Services. Once referred, the LACDA places FUP applicants on its HCV waiting list. See Chapter 18 Special Programs, specifically Section 18.4.

As provided by Section 8 Administrative Plan, Section 1.3 Addition of Programs, the LACDA will implement any applicable policies and procedures as may be required by participation in the program (and as may be approved by the Board) into this plan as if they were originally set forth herein. Specifics on the program will be added to the Section 8 Administrative Plan at the next scheduled revision.

#### **4.4 LOCAL PREFERENCES**

##### **[24 CFR §982.207]**

The LACDA is permitted to establish local preferences and to give priority to applicants that meet those criteria. HUD specifically authorizes and places restrictions on certain types of local preferences. HUD also permits the PHA to establish other local preferences, at its discretion. Any local preferences established must be consistent with the PHA plan and the consolidated plan and must be based on local housing needs and priorities that can be documented by generally accepted data sources. All preferences will be subject to the availability of funds and all applicants will be required to meet all eligibility requirements.

The LACDA will first assist families that were assisted under the Housing Choice Voucher Program but were terminated from the program due to insufficient funding. Further and in accordance with 983.261(b), the LACDA is required to give priority for continued tenant-based assistance to a project-based family that chooses to terminate their lease after the first year of occupancy, has given the owner advanced written notice of their intent to vacate, has notified the LACDA and requested to move with continued tenant-based assistance, prior to moving and only if in good standing with the project-based unit owner.

California State Required Priority: In accordance with California Health and Safety Code §34322.2, the LACDA will give priority to families of veterans and members of the armed forces in each of the categories below.

Therefore, in accordance with HUD requirements, the LACDA's discretionary policies for its local preferences are below. The local preferences are weighted highest to lowest, in the following order:

1. **Families Displaced by the Pacific Palisades and Eaton Los Angeles Wildfires:** The LACDA will open its waiting list to provide up to 50 families displaced by the 2025 Pacific Palisades and Eaton Los Angeles wildfires priority admission to the program.

Applicants must meet all Housing Choice Voucher eligibility requirements. Admission will be on a first come, first served basis and is subject to voucher availability. Families who are not selected will be removed from the waiting list.

2. **Emergency Housing Voucher (EHV) Super One-Time Limited Preference:** LACDA will grant up to 1,500 vouchers for families and individuals referred through the Continuum of Care (CoC) Coordinated Entry System (CES) that were found eligible under the LACDA's EHV program. To qualify for local preference eligibility, families and individuals must be holding an active EHV and must have not secured housing under an EHV-funded Housing Assistance Payment Contract for the first time.

On May 12, 2021, the LACDA accepted 1,964 EHV's as part of an allocation of 70,000 vouchers issued to public housing authorities nationwide by the U.S. Department of Housing and Urban Development (HUD). The EHV's were allocated as a part of the American Rescue Plan Act, intending to assist individuals and families most in need and for whom providing rental assistance will prevent the family's homelessness or having a high risk of housing instability. The LACDA was successful in utilizing its entire allocation of EHV's but has now found that a limited number of families and individuals are being adversely affected as a result of the LACDA's maximized allocation.

Applicants must meet all Housing Choice Voucher eligibility requirements and will be granted portability rights. Admission will be on a first come, first served basis and is subject to voucher availability.

3. **Homeless Preference:** LACDA will commit 50% of expected annual voucher attrition to assist Los Angeles County-based homeless individuals and families.

Homeless individuals and families must be referred for an application via the CoC, CES, and/or partner agencies under contract or Memorandum of Understanding with LACDA. Partner agencies must be participating in the homeless initiatives and may include those that assist homeless individuals and families in a transitional or permanent supportive housing program supported by homeless initiatives. The

referring agency must certify the homeless or housing status of those referred through the CoC CES.

Additionally, families already on the waiting list who declare themselves homeless, but are not referred by partner agencies, must provide certification from a CoC CES and/or partner agencies under contract or the Memorandum of Understanding with LACDA. The number of families who can qualify for this preference will be limited to a number as annually determined by the LACDA.

Once a referring agency verifies and certifies a family's homeless or housing status through the CES system, the LACDA will not conduct a second round of verification unless there is a valid reason to do so. Should HUD request a report on any cases where a second verification has taken place, the report will be provided promptly. [This section must not be removed or modified until after November 2028]

Applicants must meet all eligibility requirements. Admission will be on a first come, first served basis and is subject to funding availability.

4. LACDA will commit up to 50 vouchers for victims of human trafficking referred via a partner agency under contract or Memorandum of Understanding with LACDA.
5. LACDA rental assistance program transfers approved by the Director for the following programs.
  - Families that are currently served by the LACDA, in a Continuum of Care funded, permanent supportive housing project who no longer need supportive services to maintain housing stability. To be eligible for consideration, the current participant must be in good standing in LACDA's Continuum of Care Permanent Supportive Housing program projects. The sponsor agency providing services to the participant family must provide written certification that the family does not require permanent supportive housing services to maintain housing stability.
  - Youth that are currently served in the Family Unification Program (FUP) administered by the LACDA, whose FUP voucher is expiring due to the 36-month statutory time limit. To be eligible for consideration, the youth must have been found eligible or exempted statutorily and have exhausted the 24-month extension under FUP. In addition, a written certification must be received from the Los Angeles County Department of Children and Family Services (DCFS), certifying that the youth will have a lack of adequate housing as a result of the expiration of FUP voucher, and need a tenant-based voucher to ensure uninterrupted housing assistance.
  - Families that are currently served by the LACDA Housing Opportunities for Persons with AIDS (HOPWA) funding.

All program transfer preference applicants must meet eligibility requirements for the HCV program in accordance with HUD and this plan.

6. Families who live or work in the jurisdiction in the following categories that are subject to the approval by the Executive Director:
  - **Victims of Declared Disasters:** An admissions preference may be given to bona fide victims of declared disasters, whether due to natural calamity (e.g. earthquake), civil disturbance, or other causes recognized by the federal government. Victims must provide documentation to receive an admissions preference. Admissions preference may only be given within the allotted timeframe established by the federal government. If HUD provides specific funding, the LACDA will not exceed the allocated amount.
  - **Displacement Due to Government Actions:** Families or individuals who are certified as displaced due to the action of a federal government agency or local government agencies may be given an admissions preference.
7. Families that are homeless and are found eligible for a Violence Against Women Act, Emergency Transfer from the LACDA's Housing Assistance Division and Housing Operations Division rental assistance programs, subject to voucher and funding availability.
8. Elderly households who live and/or work in the LACDA's jurisdiction. Elderly households must meet the definition of an elderly family and the residency requirements of Section 4.4.2.
9. **Jurisdictional Preference:** Families who live and/or work in the LACDA's jurisdiction will be admitted before families outside of the LACDA's jurisdiction.

**Date and Time of Registration:** Families will be selected from the waiting list based on the preferences for which they qualify, and then by date and time.

#### **4.4.1 Other Preferences**

If HUD requires that the LACDA provide certain preferences or target certain populations as a condition of receiving funding, or if specific preferences or targeting is required to meet the conditions of a particular Annual Contributions Contract (ACC) or HUD grant, such preferences and targeting requirements are considered to be incorporated into this Administrative Plan, effective with the signing of the ACC or upon formal acceptance of the terms of the grant or funding by the LACDA Board of Commissioners, or by the Executive Director if so empowered by the Board.

#### **4.4.2 Verification of Preferences**

**[24 CFR §982.207(e)]**

**Families Displaced by the Pacific Palisades and Eaton Los Angeles Wildfire:**  
To qualify for this preference, documentation is needed to attest that a family's sole

primary residence was damaged to the extent that it's uninhabitable due to the 2025 Pacific Palisades and Eaton Los Angeles wildfires.

Acceptable verification may include documentation from a federal, state, and/or local government agency as well as online information accessible to the LACDA, i.e., GIS data and DataTree. It may also include tenant-provided documents from a federal, state, or local agency qualified to confirm the fire-related damage.

If the LACDA is unable to verify that the family meets the requirement for this preference, the family will be removed from the waiting list.

**EHV Super One-Time Limited Preference:** To verify eligibility for this preference, LACDA staff must confirm that internal files reflect that families and individuals were found program eligible under the LACDA's EHV program, have an active LACDA EHV (must not be expired), and that the family and/or individual has not secured housing under a LACDA EHV-funded Housing Assistance Payment Contract for the first time.

**Residency Preference:** Applicants who are residing in the LACDA's jurisdiction at the time of selection from the waiting list or have at least one adult member who works or has been hired to work in the LACDA's jurisdiction.

- In order to verify that an applicant is a resident, the LACDA will require documentation of residency as shown by the following documents: current rent receipts, leases, utility bills, employer or agency records, school records, driver's licenses, state identification or credit reports.
- In cases where an adult member of the household works or has been hired to work in the LACDA's jurisdiction, a statement from the employer will be required.
- At the LACDA's discretion, verification of residency may also include other documents, certifications, or declarations as needed to verify that a family lives or works in the jurisdiction.

**Homeless Preference:** Verification for an applicant's homeless status, eligibility for the Homeless Preference, must be certified through the Coordinated Entry System via the Los Angeles Homeless Services Authority (LAHSA).

**Elderly Family Preference:** An elderly family is a family whose head (including co-head), spouse, or sole member is a person who is at least 62 years of age. It may include two or more individuals who are at least 62 years of age living together, or one or more individuals who are at least 62 years of age living with one or more live-in aides.

**Veteran's Preference:** Acceptable documentation regarding veteran's status will include a DD-214 (discharge documents), proof of receipt of veteran's benefits, or documentation from the Veteran's Administration.

#### **4.4.3 Final Verification of Preferences**

**[24 CFR §982.207(e)]**

Preference information on applications will be updated as applicants are selected from the waiting list. At that time, the LACDA will obtain necessary verifications of preference at the interview and by third-party verification.

#### **4.4.4 Preference Denial**

If the LACDA denies a preference, the LACDA will notify the applicant in writing of the reasons why the preference was denied and offer the applicant an opportunity for an informal review. The applicant must request for an informal review in writing within 15 calendar days from the date of the notification. The request should also provide all the information and documents supporting the applicant's request. If the preference denial is upheld as a result of the informal review, the applicant will be placed on the waiting list without benefit of the preference. Applicants may exercise other rights if they believe they have been discriminated against.

If the applicant falsifies documents or makes false statements in order to qualify for any preference, or for any other reason, they will be removed from the waiting list.

#### **4.5 WAITING LIST REMOVAL OR REINSTATEMENT**

When an applicant is removed or returned to the waiting list after a failure to verify eligibility, the LACDA will send the applicant a notification providing an explanation for why their application was denied and information about requesting an informal review of the determination. An informal review, if requested, shall be conducted in accordance with applicable procedures set forth in Chapter 16 of this Administrative Plan. [This section must not be removed or modified until after November 2028]

#### **4.6 DENIAL OF ASSISTANCE**

**[24 CFR §982.204(c)(1) and §982.552]**

If an application is denied due to failure to attend the initial and final interviews, or for failure to provide eligibility related information, the applicant family will be notified in writing and be offered an opportunity to request an informal review. If the applicant misses two scheduled meetings, the LACDA will cancel the application and remove the applicant's name from the waiting list.

The LACDA may at any time deny program assistance to an applicant family because of actions or failure to act by members of the family such as any member of the family to sign and submit consent forms for obtaining information.

The LACDA will not deny admission of an applicant who is or has been a victim of domestic violence, dating violence, sexual assault, stalking, as well as verbal, psychological, economic, or technological abuse if the applicant otherwise qualifies for admission.

#### **4.7 FINAL DETERMINATION AND NOTIFICATION OF ELIGIBILITY**

**[24 CFR §982.301]**

If the applicant family is determined to be eligible after all applicable paperwork has been reviewed, they will be invited to attend a briefing session at which time they will receive information regarding their rights and responsibilities and they will be issued a voucher. See Chapter 8 (Voucher Issuance and Briefings) for more detail information.

#### **4.8 HUD WAITING LIST REQUESTS**

Upon request from HUD, the LACDA will submit the waiting list for the Housing Choice Voucher Program for the then-current period. This submission will include a list of all new admissions to the program from the previous year and a referral list of applicants from the same time frame. Each list will contain the name, contact information, age, race, ethnicity, and preferences assigned to each applicant. Additionally, the referral list must indicate the status of each applicant (e.g., denied, leased up, or pending) at the time of submission. Furthermore, the LACDA will provide HUD with the case file of any applicant or participant upon request. [This section must not be removed or modified until after November 2028]

## **Chapter 5: SUBSIDY STANDARDS**

### **5.1 INTRODUCTION**

#### **[24 CFR §982.402(a)]**

Program regulations require that the LACDA establish subsidy standards that determine the number of bedrooms needed for families of different sizes and compositions. Such standards must provide for a minimum commitment of subsidy, while avoiding overcrowding. The standards in determining the voucher size must be within the minimum unit size requirements of HUD's Housing Quality Standards (HQS).

This chapter lays out the factors used in determining the voucher size issued to a family initially and when there is a move to a new unit, as well as the LACDA's procedures for handling changes in family size, selection of unit size that are different from the voucher size and requests for waivers.

### **5.2 DETERMINATION OF VOUCHER SIZE**

#### **[24 CFR §982.402]**

Subsidy standards and determination of voucher bedroom size are based upon the number of family members who will reside in the assisted dwelling unit. All standards in this section relate to the number of bedrooms on the voucher, not the family's actual living arrangements.

The unit size on the voucher remains the same as long as the family composition remains the same.

As required by HUD, the LACDA's subsidy standards for determining voucher size shall provide for the smallest number of bedrooms needed to house a family without overcrowding. They will be applied consistently for all families of like size and composition, in a manner consistent with fair housing guidelines and HQS.

In accordance with HUD regulations, the unit size designated on the voucher should be assigned using the following LACDA subsidy standards, which are based on two people per bedroom:

<b><u>Number of Household Members</u></b>	<b><u>Number of Bedrooms</u></b>
<b>1-2</b>	<b>1- bedroom</b>
<b>3-4</b>	<b>2- bedroom</b>
<b>5-6</b>	<b>3- bedroom</b>
<b>7-8</b>	<b>4- bedroom</b>
<b>9-10</b>	<b>5- bedroom</b>
<b>11-12</b>	<b>6- bedroom</b>

1. At issuance, the bedroom size assigned should not require more than two people to occupy the same bedroom. The family may choose and live within a suitable unit in any grouping that is acceptable to the family, including using the living room for sleeping purposes.
2. Every household member is to be counted as a person in determining the family unit size [24 CFR §982.402(a)(4)-(6)]. Under this definition, household members include the unborn child of a pregnant woman; any live-in aides (approved by the LACDA to reside in the unit to care for a family member who is disabled or is at least 50 years of age); a full-time student who is away from home attending school but who spends school recess in the unit, and a child who is temporarily away from the home because of placement in foster care. A family that consists of a pregnant woman (with no other persons) must be treated as a two-person family.  
  
**Note:** An approved live-in aide is counted in determining the voucher size. Occasional, intermittent, multiple, or rotating care givers typically do not meet the definition of a live-in aide. A live-in aide must reside with the family permanently for the family unit size to be adjusted in accordance with the subsidy standards [24 CFR §982.402(7)]. For exceptions to this policy, please see Section 5.3 below.
3. An additional bedroom may be assigned if approved under a waiver by the LACDA (see Section 5.3 below).
4. If the family decides to move, the LACDA will issue a voucher based on the family's current composition.

**5.2.1 Maximum Unit Occupancy**

The maximum occupancy as determined by the LACDA is as follows:

<u>Number of Bedrooms</u>	<u>Maximum Occupancy</u>
0- bedroom	2
1- bedroom	4
2- bedroom	6
3- bedroom	8
4- bedroom	10
5- bedroom	12
6- bedroom	14

In cases where an additional person(s) joins the family and the family continues to occupy the same rental unit, i.e. no move is involved; the LACDA will not consider the family to be overcrowded if there are no more than two people per bedroom or living/sleeping room, provided that the unit meets other HQS.

Changes to household composition must be made according to LACDA policy detailed in Section 12.5 (Changes in Family Composition).

The LACDA will not increase the family's voucher size due to additions where the family will continue to occupy the same unit, unless the family was residing in a unit larger than the voucher size. The appropriate voucher size will be applied at the annual reexamination.

If the LACDA determines that the family is overcrowded, a larger voucher will be issued to the family and the family must try to move into a larger size dwelling unit. If an acceptable unit is available for rental by the family, the LACDA must terminate the HAP contract in accordance with its terms.

### **5.3 OCCUPANCY STANDARDS**

#### **[24 CFR §982.402(b)(8)]**

The standards discussed above should apply to the vast majority of assisted families. However, in some cases, the LACDA may grant exceptions to the subsidy standards as a reasonable accommodation to a disability.

For households that receive approval for a live-in aide, an extra bedroom will be added to the voucher size the family qualifies for without the live-in aide.

Occasional, intermittent, multiple or rotating care givers typically do not meet the definition of a live-in aide and usually do not justify any exceptions to the subsidy standards. However, a family's composition or circumstances may warrant the provision of an extra bedroom to permit disability-related overnight care and allow the family equal use and enjoyment of the unit. The LACDA will consider these requests on a case-by-case basis.

Requests must be verified, in writing, by a doctor or other medical professional. The request must specify the reason for the request and how providing a larger bedroom size would improve or accommodate the disability and/or medical condition.

Requests made as a reasonable accommodation will follow the reasonable accommodation policy as outlined in sections 1.10 and 7.11.10.

### **5.4 EXCEPTIONS FOR FOSTER CHILDREN**

#### **[24 CFR §982.402(b)(8)]**

Exceptions will be made to accommodate foster children. The Los Angeles County Department of Family and Children Services (DCFS) has very specific housing guidelines that must be met by foster families. In order to assure that foster children are able to remain with designated Section 8 foster families, the LACDA will utilize the guidelines published by the Los Angeles County DCFS, or specified in a court order, in situations involving foster children.

### **5.5 FLEXIBILITY OF UNIT SIZE ACTUALLY SELECTED**

#### **[24 CFR §982.402(d)]**

The family may select a dwelling unit with a different size than that listed on the voucher:

- Larger than the voucher size: The LACDA shall not prohibit a family from renting an otherwise acceptable unit because it is too large for the family, provided that the rent for the unit is comparable, and the family's total rent contribution (rent to the owner plus any applicable utility costs) does not exceed 40 percent of the family's adjusted monthly income (applies only if the gross rent for the unit exceeds the payment standard).
- Smaller than the voucher size: The LACDA will allow families to rent an otherwise acceptable unit with fewer bedrooms than the voucher size, if the unit does not exceed the maximum unit occupancy requirements.

#### **5.5.1 Calculating Assistance for a Different Unit Size**

To determine the family's maximum rent subsidy, the LACDA uses the payment standard for the voucher size or the selected unit size, whichever is lower [24 CFR §982.402(c)].

The utility allowance used to calculate the gross rent is based on the lower of the voucher size or the selected unit size. The LACDA may grant a higher utility allowance as a reasonable accommodation for a disabled family member, following the policies and procedures referenced in sections 1.10 and 7.11.10.

## **Chapter 6:**

# **DETERMINING THE TOTAL TENANT PAYMENT AND THE ABSENCE POLICY**

### **6.1 INTRODUCTION**

This chapter explains how the Total Tenant Payment (TTP) is calculated at admission and during annual reexaminations. It covers LACDA and HUD standards used to calculate income inclusions and deductions.

This chapter also provides the LACDA's definition of absence of household members and explains how the presence or absence of household members can affect the TTP.

The policies outlined in this chapter address those areas, which allow the LACDA discretion to define terms and to develop standards in order to assure consistent application of the various factors that relate to the determination of TTP.

### **6.2 INCOME DEFINITIONS**

1. **Total Tenant Payment (TTP)**: Represents the minimum amount a family must contribute toward rent and utilities regardless of the unit selected. The TTP is the greater of:
  - 30 percent of monthly adjusted income;
  - 10 percent of monthly gross income; or
  - The LACDA's minimum rent of \$50.
2. **Adjusted Income [24 CFR §5.611]**: The annual income minus any HUD allowable deductions.

Additional terminology may be found in Section 1.24.

### **6.3 INCOME DEDUCTIONS**

#### **[24 CFR §5.611(a)]**

The following deductions will be applied in the TTP calculation:

- **Dependent Allowance**: \$480 each for family members (other than the head, co-head, or spouse), who are minors, and for family members who are 18 years old and older who are full-time students or disabled. This allowance does not apply to foster children.
- **Elderly Family or Disabled Family Allowance**: \$400 for families whose head, co-head, or spouse is 62 or over or disabled.
- **Childcare Expenses**: Deducted for children under 13, including foster children, when childcare is necessary to allow an adult member to work, search for work, or attend school (see below for details).

- **Allowable Medical Expenses**: Deducted for unreimbursed medical expenses for members of any elderly family or disabled family.
- **Disability Assistance Expenses**: Deducted for individuals with disabilities if needed to enable the individual or an adult family member to work.

### **6.3.1 Childcare Expenses**

#### **[24 CFR §5.603(b) and 24 CFR §5.611(a)(4)]**

Childcare expenses for children under 13 years of age may be deducted from the annual income if they enable an adult to work, search for work, or attend school full time.

In the case of a child attending school, the only care during non-school hours can be counted as childcare expenses.

Families will be given a childcare allowance based on the following guidelines:

1. **Childcare to Work**: The maximum childcare expense allowed must be less than the amount earned by the person enabled to work. The "person enabled to work" will be the adult member of the household who earns the least amount of income from working.
2. **Childcare to Search for Work**: Childcare expenses cannot exceed the current amount of income received.
3. **Childcare for School**: The number of hours claimed for childcare may not exceed the number of hours the family member is attending school (including one hour travel time to and from school).
4. **Amount of Expense**: The LACDA will determine local average costs as a guideline. If the hourly rate materially exceeds the guideline, the LACDA may calculate the allowance using the guideline.

### **6.3.2 Health and Medical Care Expenses**

#### **[24 CFR §5.611(a)(3)(i)]**

The definition of medical expense has been expanded to include out-of-pocket health and medical care expenses that are paid or anticipated to be paid during the period for which annual income is calculated. This covers costs incurred for the diagnosis, cure, mitigation, treatment, or prevention of disease or payments for treatments affecting any structure or function of the body. Additionally, this definition continues to incorporate medical insurance and long-term care premiums within the income calculation period.

HUD does not allow PHAs to fully align their policies with the IRS Publication 502 regarding health and medical care expense deductions. Some expenses the IRS categorizes as non-medical may still qualify under HUD's definition. Consequently, a review of each reported expense must be conducted, even if ineligible in the IRS Publication 502, to determine if an expense will be granted.

Nonprescription medicines will be counted toward medical expenses for families who qualify if the family furnishes legible receipts and the expense qualifies under HUD's health and medical expense definition.

Acupressure, acupuncture, and related herbal medicines, and chiropractic services will be considered allowable medical expenses if these expenses fall under HUD's health and medical expense definition.

## **6.4 INCOME INCLUSIONS AND EXCLUSIONS**

### **6.4.1 Income Inclusions**

#### **[24 CFR §5.609(a)]**

Annual Income, as required by HUD, includes, with respect, the family:

1. All amounts, not specifically excluded by regulation [24 CFR 5.609(b)], received by all sources by each member of the family who is 18 years of age or older or is the head of household or spouse of the head of household, plus unearned income by or on behalf of each dependent who is under 18 years of age, and
2. The value of net family assets exceeds \$5,000 (which amount HUD will adjust annually in accordance with the Consumer Price Index for Urban Wage Earners and Clerical Workers) and the actual returns from a given asset cannot be calculated, imputed returns on the asset based on the current passbook savings rate, as determined by HUD.

### **6.4.2 Income Exclusions**

#### **[24 CFR §5.609(c)]**

The LACDA considers the following to be excluded from the family's annual income, as required by HUD:

1. Earned income from children under 18 years of age. All other sources of unearned income, except those specifically excluded by the regulations, are included in the family's annual income.
2. Earned income in excess of the dependent deduction is excluded for full-time students 18 years of age or older (and are not the head of household, spouse, or co-head). All other sources of unearned income, except those specifically excluded by the regulations, are included in the family's annual income.
3. The special pay to a family member serving in the Armed Forces who is exposed to hostile fire.
4. The low-income subsidy (extra help) received to assist low-income persons in paying for their Medicare Prescription Drug Plan cost.
5. Payments received for the care of foster children or adults, including State kinship, guardianship care payments, or tribal kinship payments.
6. Income from all sources (both earned and unearned) is excluded for foster children and foster adults.
7. Income from all sources (both earned and unearned) is excluded for live-in aides.

8. Any amount in or from, or any benefits, income, or distributions from, any Coverdell educational savings account of any or qualified tuition program under IRS sections 529 and 530 shall be excluded from income.
9. Adoption assistance payments for an adopted child in excess of the amount of the dependent deduction.
10. Amounts for, or in reimbursement of, health and medical care expenses for any family member.
11. Amounts received by a person with a disability that are disregarded for a limited time for purposes of Supplemental Security Income eligibility and benefits because they are set aside for use under a Plan to Attain Self-Sufficiency (PASS).
12. Incremental earnings and benefits resulting in any family member from participation in training programs funded by HUD or in qualifying Federal, State, Tribal, or local employment training programs (including training programs not affiliated with a local government) and training of a family member as resident management staff.
13. Insurance payments and settlements for personal or property loss, including, but not limited to, payments through health insurance, motor vehicle insurance, and workers' compensation.
14. Any amounts recovered in any civil action or settlement based on a claim of malpractice, negligence, or other breach of duty owed to a family member arising out of law, that resulted in a member of the family having a disability.
15. Civil rights settlements or judgments, including settlements or judgments for back pay.
16. Payments received by tribal members from claims relating to the mismanagement of assets held in a trust by the United States, including payments from tribal trust settlements.
17. Reparation payments paid by a foreign government for claims by people persecuted during the Nazi era.
18. Payments related to aid and attendance for veterans under 38 U.S.C. 1521.
19. Amounts received by a participant in other publicly assisted programs for or in reimbursement of expenses to allow program participation (e.g., special equipment, clothing transportation, childcare, etc.).
20. Resident service stipends of \$200 or less per month for performing a part-time service for the LACDA that enhances the quality of life in the development.
21. Income earned on amounts placed in a family's FSS account.
22. Replacement housing "gap" payments to offset increased rent and utility costs to families displaced from one federally subsidized housing unit to another.

23. Deferred periodic amounts from Supplemental Security Income and Social Security benefits or Department Veterans Affairs disability benefits that are received in a lump sum amount or prospective monthly amounts.
24. Refunds or rebates under state or local law for property taxes paid on the dwelling unit.
25. The net amount disbursed by a lender to a borrower under the loan terms (e.g., educational institution or car dealership).
26. Income received from any account under an IRS-recognized retirement plan. However, any distribution of periodic payments from these accounts shall be income at the time they are received by the family. Retirement accounts include individual retirement arrangements (IRAs), employer retirement plans, and retirement plans for self-employed individuals.
27. Payment made by an authorized state Medicaid managed care system or other state agency to a family to enable a disabled family member to live in the family's assisted unit.
28. Nonrecurring Income. Income received as an independent contractor, day laborer, or seasonal worker is not excluded from income, even if the source, date, or amount of the income varies. Examples of nonrecurring income include:
  1. Payments from the U.S. Census Bureau for employment (relating to the decennial census or the American Community Survey) lasting no longer than 180 days and not culminating in permanent employment.
  2. Direct Federal or State payments intended for economic stimulus or recovery.
  3. Amounts directly received by the family as a result of State refundable tax credits or State tax refunds at the time they are received.
  4. Amounts directly received by the family as a result of Federal refundable tax credits and Federal tax refunds at the time they are received.
  5. Gifts for holidays, birthdays, or other significant life events or milestones (e.g., wedding gifts, baby showers, anniversaries).
  6. Non-monetary, in-kind donations, such as food, clothing, or toiletries, received from a food bank or similar organization.
  7. Lump-sum additions to net family assets, including but not limited to lottery or other contest winnings.
29. Any assistance that Section 479B of the Higher Education Act of 1965 requires to be excluded from a family's annual income, including Bureau of Indian Affairs or Department of Education student assistance programs [See memo dated 2/8/2025] [24 CFR 5.609(b)(9) (Jan. 1, 2024)].

30. Student financial assistance, not excluded under Title IV of the Higher Education Act of 1965, for actual covered costs of higher education [See memo dated 2/8/2025] [24 CFR 5.609(b)(9) (Jan. 1, 2024)].
31. Income earned by government contributions to, or distributions from, 'baby bond' accounts created, authorized, or funded by federal, state, or local government.
32. Self-Employment Income. Gross income a family member receives through self-employment or operation of a business; except that the following shall be considered income to a family member:
  1. Net income from the operation of a business or profession. Expenditures for business expansion or amortization of capital indebtedness shall not be used as deductions in determining net income. An allowance for depreciation of assets used in a business or profession may be deducted, based on straight-line depreciation, as provided in Internal Revenue Service regulations; and
  2. Any withdrawal of cash or assets from the operation of a business or profession will be included in income, except to the extent the withdrawal is reimbursement of cash or assets invested in the operation by the family.
33. Irrevocable trust or revocable trust outside of the family or household control. Distributions of the principal, or corpus, of the trust and distributions of income from the trust used to pay the costs of health and medical care expenses for a minor are excluded.
34. Amounts specifically excluded by any other federal statute from consideration as income for purposes of determining eligibility or benefits under a category of assistance programs that includes assistance under the 1937 Act. A notice will be published in the Federal Register and distributed to PHAs identifying the benefits that qualify for this exclusion. Updates will be distributed when necessary. The following is a list of income sources that qualify for that exclusion:
  - (i) The value of the allotment provided to an eligible household under the Food Stamp Act of 1977 (7U.S.C.2017(b)). This exclusion also applies to assets;
  - (ii) Payments, including for supportive services and reimbursement of out-of-pocket expenses, for volunteers under the Domestic Volunteer Service Act of 1973 ([42 U.S.C. 5044\(f\)\(1\)](#), [42 U.S.C. 5058](#)), are excluded from income except that the exclusion shall not apply in the case of such payments when the Chief Executive Officer of the Corporation for National and Community Service appointed under [42 U.S.C. 12651c](#) determines that the value of all such payments, adjusted to reflect the number of hours such volunteers are serving, is equivalent to or greater than the minimum wage then in effect under the Fair Labor Standards Act of 1938 ([29 U.S.C. 201 et seq.](#)) or the minimum wage, under the laws of the State where such volunteers are serving, whichever is the greater ([42 U.S.C. 5044\(f\)\(1\)](#)). This exclusion also applies to assets;
  - (iii) Certain payments received under the Alaska Native Claims Settlement Act (43 U.S.C. 1626(c)). This exclusion also applies to assets;

(iv) Income derived from certain submarginal land of the United States that is held in trust for certain Indian tribes (25 U.S.C. 459e). This exclusion also applies to assets;

(v) Payments or allowances made under the Department of Health and Human Services' Low-Income Home Energy Assistance Program (42 U.S.C.8624 (f)). This exclusion also applies to assets;

(vi) Income derived from the disposition of funds to the Grand River Band of Ottawa Indians (Pub. L. 94–540, section 6). This exclusion also applies to assets;

(vii) The first \$2000 of per capita shares received from judgment funds awarded by the National Indian Gaming Commission or the U.S. Claims Court, the interests of individual Indians in trust or restricted lands, and the first \$2000 per year of income received by individual Indians from funds derived from interests held in such trust or restricted lands (25 U.S.C. 1407–1408). This exclusion does not include proceeds of gaming operations regulated by the Commission. This exclusion also applies to assets;

(viii) Amounts of scholarships funded under title IV of the Higher Education Act of 1965 (20 U.S.C. 1070), including awards under federal work-study programs or under the Bureau of Indian Affairs student assistance programs (20 U.S.C. 1087uu). For section 8 programs only (42 U.S.C. 1437f), any financial assistance in excess of amounts received by an individual for tuition and any other required fees and charges under the Higher Education Act of 1965 (20 U.S.C. 1001 et seq.), from private sources, or an institution of higher education (as defined under the Higher Education Act of 1965 (20 U.S.C. 1002)), shall not be considered income to that individual if the individual is over the age of 23 with dependent children (Pub.L. 109–115, section 327) (as amended);

(ix) Payments received from programs funded under title V of the Older Americans Act of 1965 (42 U.S.C.3056g);

(x) Payments received on or after January 1, 1989, from the Agent Orange Settlement Fund (Pub. L. 101–201) or any other fund established pursuant to the settlement in In Re Agent Orange Liability Litigation, M.D.L. No. 381(E.D.N.Y.). This exclusion also applies to assets;

(xi) Payments received under the Maine Indian Claims Settlement Act of 1980 (Pub. L. 96–420, 25 U.S.C. 1728). This exclusion also applies to assets;

(xii) The value of any childcare provided or arranged (or any amount received as payment for such care or reimbursement for costs incurred for such care) under the Child Care and Development Block Grant Act of 1990 (42 U.S.C. 9858q);

(xiii) Earned income tax credit (EITC) refund payments received on or after January 1, 1991, for programs administered under the United States Housing Act of 1937, title V of the Housing Act of 1949, section 101 of the Housing and Urban Development Act of 1965, and sections 221(d)(3), 235, and 36 of the National Housing Act (26 U.S.C. 32(l)). This exclusion also applies to assets;

(xiv) The amount of any refund (or advance payment with respect to a refundable credit) issued under the Internal Revenue Code is excluded from income and assets for a period of 12 months from receipt ([26 U.S.C. 6409](#));

(xv) Payments by the Indian Claims Commission to the Confederated Tribes and Bands of Yakima Indian Nation or the Apache Tribe of Mescalero Reservation (Pub. L. 95–433). This exclusion also applies to assets;

(xvi) Allowances, earnings, and payments to AmeriCorps participants under the National and Community Service Act of 1990 (42 U.S.C.12637(d));

(xvii) Any allowance paid to children of Vietnam veterans born with spina bifida ([38 U.S.C. 1802–05](#)), children of women Vietnam veterans born with certain birth defects ([38 U.S.C. 1811–16](#)), and children of certain Korean and Thailand service veterans born with spina bifida ([38 U.S.C. 1821–22](#)) is excluded from income and assets ([38 U.S.C. 1833\(c\)](#)).

(xviii) Any amount of crime victim compensation (under the Victims of Crime Act) received through crime victim assistance (or payment or reimbursement of the cost of such assistance) as determined under the Victims of Crime Act because of the commission of a crime against the applicant under the Victims of Crime Act (42 U.S.C. 10602(c)). This exclusion also applies to assets;

(xix) Allowances, earnings, and payments to individuals participating in programs under the Workforce Investment Act of 1998 (29 U.S.C.2931 (a) (2));

(xx) Any amount received under the Richard B. Russell School Lunch Act (42 U.S.C. 1760(e)) and the Child Nutrition Act of 1966 (42 U.S.C. 1780(b)), including reduced-price lunches and food under the Special Supplemental Food Program for Women, Infants, and Children (WIC). This exclusion also applies to assets;

(xxi) Payments, funds, or distributions authorized, established, or directed by the Seneca Nation Settlement Act of 1990 (25 U.S.C. 1774f (b)). This exclusion also applies to assets;

(xxii) Payments from any deferred U.S. Department of Veterans Affairs disability benefits that are received in a lump sum amount or in prospective monthly amounts (42 U.S.C. § 1437a(b)(4));

(xxiii) Any amounts (i) not actually received by the family, (ii) that would be eligible for exclusion under [42 U.S.C. 1382b\(a\)\(7\)](#), and (iii) received for service-connected disability under 38 U.S.C. chapter 11, or dependency and indemnity compensation under 38 U.S.C. chapter 13 ([25 U.S.C. 4103\(9\)\(C\)](#)) as provided by an amendment by the Indian Veterans Housing Opportunity Act of 2010 ([Pub. L. 111–269](#) section 2) to the definition of income applicable to programs under the Native American Housing Assistance and Self-Determination Act (NAHASDA) ([25 U.S.C. 4101 et seq.](#));

(xxiv) A lump sum or a periodic payment received by an individual Indian pursuant to the Class Action Settlement Agreement in the case entitled Elouise Cobell et al. v. Ken Salazar et al., 816 F.Supp.2d 10 (Oct. 5, 2011 D.D.C.), for a period of one year from the time of receipt of that payment as provided in the Claims Resolution Act of 2010 (Pub. L. 111–291 section 101 (f)(2)). This exclusion also applies to assets;

(xxv) Any amounts in an “individual development account” are excluded from assets and any assistance, benefit, or amounts earned by or provided to the individual development account are excluded from income, as provided by the Assets for Independence Act, as amended ([42 U.S.C. 604\(h\)\(4\)](#));

(xxvi) Per capita payments made from the proceeds of Indian Tribal Trust Settlements listed in IRS Notice 2013–1 and 2013–55 must be excluded from annual income unless the per capita payments exceed the amount of the original Tribal Trust Settlement proceeds and are made from a Tribe's private bank account in which the Tribe has deposited the settlement proceeds. Such amounts received in excess of the Tribal Trust Settlement are included in the gross income of the members of the Tribe receiving the per capita payments as described in IRS Notice 2013–1. The first \$2,000 of per capita payments are also excluded from assets unless the per capita payments exceed the amount of the original Tribal Trust Settlement proceeds and are made from a Tribe's private bank account in which

the Tribe has deposited the settlement proceeds ([25 U.S.C. 117b\(a\)](#), [25 U.S.C. 1407](#));

(xxvii) Federal assistance for a major disaster or emergency received by individuals and families under the Robert T. Stafford Disaster Relief and Emergency Assistance Act (Pub. L. 93–288, as amended) and comparable disaster assistance provided by States, local governments, and disaster assistance organizations (42 U.S.C. 5155(d)). This exclusion also applies to assets;

(xxviii) Any amount in an Achieving Better Life Experience (ABLE) account, distributions from and certain contributions to an ABLE account established under the ABLE Act of 2014 ([Pub. L. 113–295](#)), as described in Notice PIH 2019–09/H 2019–06 or subsequent or superseding notice is excluded from income and assets; and

(xxix) Assistance received by a household under the Emergency Rental Assistance Program pursuant to the Consolidated Appropriations Act, 2021 ([Pub. L. 116–260](#), section 501(j)), and the American Rescue Plan Act of 2021 ([Pub. L. 117–2](#), section 3201). This exclusion also applies to assets.

### 35. Earned Income Disallowance for individuals with disabilities [24CFR5.617]

(a) Initial 12-Month Exclusion [24CFR5.617(C)(1)]

(b) Second 12-Month Exclusion and Phase-In [24CFR5.617(C)2]

(c) Maximum 4-Year Disallowance [24 CFR 5.617(c)(3)]

Note: The Earned Income Disregard will not apply to any family not eligible for and already participating in the disallowance as of December 31, 2023. Earned Income Disallowance will no longer be available for new enrollment as of January 1, 2024.

Families eligible to receive the Jobs Plus Earned Income Disregard (JPEID) may continue to receive JPEID benefits and will not be impacted by the final rule, until HUD states otherwise.

### **6.4.3 Student Financial Assistance**

#### **[24 CFR 5.609(b)(9)] [PIH Notice 2023-27]**

HUD has codified the federally mandated income exclusions related to student financial assistance into two separate categories. Income exclusions from student financial assistance apply to both full-time and part-time students. Student financial assistance may be paid directly to the student or the educational institution on the student's behalf.

The two types of financial assistance include:

1. Assistance under the section 479B of the Higher Education Act (HEA) 1965 that includes:
  - 1) Pell grants
  - 2) Teach grants
  - 3) Federal work study programs

- 4) Income earned in employment training program under section 134 of the Workforce Innovation and Opportunity Act (WIOA)
  - 5) Bureau of Indian Affairs /Education Student Assistance programs
2. Other financial assistance that includes grants/scholarships from:
- 1) The federal government
  - 2) A state (including U.S. territories), tribe, or local government
  - 3) A private foundation registered as a nonprofit under 26 U.S.C 501(c)(3)
  - 4) A business entity (such as a corporation, general partnership, limited liability company, limited partnership, joint venture, business trust, public benefit corporation, or nonprofit entity)
  - 5) An institution of higher education

If financial aid is received by a head of household, co-head, or spouse under 23 or without dependents, all sources of financial assistance received (479B and other financial assistance) excess of tuition will be counted as income as indicated in the Consolidated Appropriations Act (See section 6.4.2(34)(viii)).

If financial aid is received by a head of household, co-head, or spouse over the age of 23 with dependent children, the full amount of financial assistance received under 479B of the HEA will be excluded as income but used to determine a student's actual covered cost for attending school. After determining a student's actual covered cost of tuition, any amount of financial aid received in excess of tuition will be counted as income, as established by the HOTMA calculation method.

Any year the Consolidated Appropriations Act is silent on the financial assistance treatment for participants in the Section 8 program, the calculation method established by HOTMA will be used for all students.

[See memo dated 2/28/2025]

#### **6.4.4 Earned Income Disallowance Exclusion Time Periods**

##### **[24 CFR §5.617(c)]**

1. **Initial 12-Month Exclusion**: During the initial 12-month exclusion period, the full amount of the increase in income due to employment or increase in earnings is excluded. Once a family member is determined eligible for the earned income disallowance, the 24-calendar month period starts.
2. **Second 12-Months Exclusion**: During the second 12-month exclusion and phase-in period, the exclusion is reduced to half, or 50 percent, of the increase in income due to employment or increased earnings.
3. **Lifetime Limit**: A participant has a total lifetime limit of 24-consecutive months that begins once the initial exclusion is given after the qualifying

event. No exclusion should be given after the lifetime limit has been reached.

## **6.5 FAMILY ASSETS**

### **[24 CFR §5.603(b)]**

#### **6.5.1 Included Assets**

1. Amounts in savings and checking accounts.
2. Stocks, bonds, savings certificates, money market funds, and other investment accounts.
3. Equity in real property or other capital investments. Equity is the estimated current market value of the asset less the unpaid balance on all loans secured by the assets and reasonable costs (such as broker fees), that would be incurred in selling the assets.

In the absence of an estimate of liquidation costs or verification of actual liquidation costs from a real estate agent or broker, the LACDA will use a standard 8% of market value to determine such costs.

4. Any distributions from a trust in the control of the family or household, except that any actual income earned by the trust, regardless of whether its distributed, shall be considered income to the family at the time it is received by the trust.
5. Assets, which although owned by more than one person, allow unrestricted access by the applicant.
6. Personal property held as an investment such as gems, jewelry, coin collections, antique cars, etc.
7. Cash value of life insurance policies.
8. Assets disposed of for less than fair market value during the two years preceding certification or recertification.

The LACDA must count assets disposed of for less than fair market value during the 2 years preceding certification or re-examination. The LACDA will count the difference between the market value and the actual payment received in calculating total assets.

Assets disposed of as a result of foreclosure or bankruptcy, separation or divorce are not considered to be assets disposed of for less than fair market value.

The LACDA's minimum threshold for counting assets disposed of for less than Fair Market Value is \$5,000. If the total value of assets disposed of within a 1-year period is less than \$5,000, they will not be considered an asset.

#### **6.5.2 Excluded Assets**

1. Necessary personal property, except as noted in #6 above at Section 6.5.1.

2. Interest in Indian trust IDs.
3. Assets that are part of an active business or farming operation.

If a household member's main occupation is the business from his/her rental property, the rental property is considered a business asset and therefore excluded. If a household member's rental property is considered a personal asset and held as an investment, it is considered an included asset.
4. Assets not controlled by or accessible to the family and which provide no income for the family.
5. Vehicles especially equipped for the disabled.
6. Equity in owner-occupied cooperatives and manufactured homes in which the family lives.

## **6.6 CALCULATING INCOME AND FAMILY CONTRIBUTION**

### **6.6.1 "Minimum Rent" and Minimum Family Contribution**

**[24 CFR §5.630(a)(2)]**

Minimum family contribution in the LACDA's rental assistance programs is \$50 for all new contracts, including moves.

The LACDA will waive the minimum rent requirement in cases where the family documents that they do not currently have any source of income such as in the case of some homeless families. In such cases, the family will be re-evaluated in 3 months. All families are required to report changes in income within 10 calendar days.

### **6.6.2 Minimum Income**

There is no minimum income requirement. Families who report zero income may be required to complete an interim re-examination periodically, up to once a quarter, at the LACDA's discretion.

### **6.6.3 Averaging Income**

**[24 CFR §982.516(c) and 24 CFR §5.609(d)]**

When annual income cannot be anticipated for a full 12 months, the LACDA may annualize current income and conduct an interim re-examination if income changes.

If there are bonuses or overtime which the employer cannot anticipate for the next 12 months, bonuses and overtime received the previous year may be used.

Income from the previous year may be analyzed to determine the amount to anticipate when third-party or check-stub verification is not available.

If by averaging, an estimate can be made for those families whose income fluctuates from month to month, this estimate will be used so that the housing payment will not change from month-to-month.

The method used depends on the regularity, source and type of income.

#### **6.6.4 Utility Allowance and Utility Reimbursement Payments**

##### **[24 CFR §982.517]**

The utility allowance is intended to help defray the cost of utilities not included in the rent and is subtracted from TTP to establish the family's rent to the owner. The allowances are based on rates and average consumption studies, not on a family's actual consumption. The LACDA will review the Utility Allowance Schedule on an annual basis and revise it if needed (10 percent increase or decrease).

The approved utility allowance schedule is given to families along with the voucher. The utility allowance is based on the lower of the family's voucher size or the actual unit size selected.

Where families provide their own range and refrigerator, the LACDA will establish an allowance adequate for the family to purchase or rent a range or refrigerator, even if the family already owns either appliance. Allowances for ranges and refrigerators will be based on the lesser of the cost of leasing or purchasing the appropriate appliance over a 12-month period.

If the utility allowance exceeds the family's TTP, the LACDA will provide a utility reimbursement payment for the family each month. The check will be made out directly to the family's head of household on record.

#### **6.6.5 Reduction in Welfare Assistance**

##### **[24 CFR §5.615]**

The LACDA will impute (count) welfare income not received by the family, if the welfare assistance was reduced specifically because of:

- Fraud;
- Failure to participate in an economic self-sufficiency program; or
- Noncompliance with work activities requirement.

Imputed welfare income is the amount that welfare benefits are reduced.

Imputed welfare income is not included in the family's annual income, if the family was not assisted at the time of the welfare sanction.

The LACDA will include in the family's annual income the amount of the imputed welfare income plus the total amount of other annual income and the family's rent will not be reduced.

However, the LACDA will reduce the rent if the welfare assistance reduction is a result of any of the following:

- The expiration of a lifetime time limit on receiving benefits;
- The family has complied with welfare program requirements, but cannot obtain employment; or
- The family member has not complied with other welfare agency requirements.

A family's request for rent reduction shall be denied upon the LACDA obtaining written verification from the welfare agency stating that the family's benefits have been reduced for fraud or noncompliance.

### **Offsets**

The amount of the imputed income is offset by the amount of additional income the family begins to receive after the sanction is imposed. The new income would be subtracted from the imputed welfare income. When the additional income equals or exceeds the imputed welfare income, the imputed income is reduced to zero.

### **6.6.6 Prior Overpayment of Social Security (SS) and Supplemental Security Income (SSI)**

When there is a payment reduction due to prior overpayments, staff will use the net amount of the SS/SSI benefit to calculate annual income only for that period of time for which the reduction occurs.

## **6.7 PRORATION OF ASSISTANCE FOR "MIXED" FAMILIES**

### **6.7.1 Applicability**

**[24 CFR §5.520(a)]**

Proration of assistance must be offered to any "mixed" applicant or participant family. A "mixed" family is one that includes at least one U.S. citizen or eligible immigrant and any number of ineligible members.

"Mixed" families that were participants on June 19, 1995, and that do not qualify for continued assistance must be offered prorated assistance. Mixed family applicants are entitled to prorated assistance. Families that become mixed after June 19, 1995, by addition of an ineligible member are entitled to prorated assistance.

### **6.7.2 Prorated Assistance Calculation**

**[24 CFR §5.520(c)]**

Prorated assistance is calculated by determining the amount of assistance payable if all family members were eligible and multiplying by the percent of the family members who actually are eligible.

## **6.8 DE MINIMIS ERRORS**

**[24 CFR 5.609(c)(4); 5.657(f); 960.257(f); 982.516(f); 882.515(f); 882.808(i)(5); 891.105; and 891.655]**

In accordance with HUD, the LACDA will take corrective action to credit or repay a family if the family was overcharged tenant rent because of de minimis errors in calculating family income. A family will not be required to repay the LACDA in instances resulting in a family being undercharged for rent when the PHA miscalculated the family's income.

De minimis is defined as a PHA calculation error of \$30 or less of the family's monthly adjusted income (or \$360 in annual adjusted income). The provision enables the LACDA to make a de minimis error income determination on a family-by-family basis rather than having HUD conduct a full portfolio review if the LACDA exceeds the threshold.

As required by HUD, under corrective action, the LACDA will grant the family credit toward future rents when it is discovered that there is a rent overcharge due to an administrative error calculation. The family is issued a credit retroactively to the effective date of the action when the error was made, regardless of the dollar amount associated with the administrative error.

## **6.9 ABSENCE POLICY**

The LACDA must compute all applicable income of every family member who is on the lease, including those who are temporarily absent. In addition, the LACDA must count the income of the spouse or the head of household if that person is temporarily absent, even if that person is not on the lease.

Income of individuals permanently absent will not be counted. If the head of household or spouse is temporarily absent and, in the military, all military pay and allowances (except hazardous duty pay when exposed to hostile fire and any other exceptions to military pay HUD may define) is counted as income.

It is the responsibility of the household to report absences and changes in family composition. The LACDA will evaluate absences from the unit using this policy [24 CFR §982.551(i)].

### **6.9.1 Absence of Entire Family**

#### **[24 CFR §982.312]**

These policy guidelines address situations when the family is absent from the unit but has not moved out of the unit. In cases where the family has moved out of the unit, the LACDA will terminate assistance in accordance with appropriate termination procedures contained in this plan.

Families are required both, to notify the LACDA before they move out of a unit and to give the LACDA information about any family absence from the unit.

Families must notify the LACDA if they are going to be absent from the unit for more than 30 consecutive calendar days.

If the family fails to notify the LACDA of an absence of longer than 30 consecutive calendar days, or if the entire family is absent from the unit for more than 60 consecutive calendar days, the unit will be considered to be vacated, and the assistance will be terminated. The LACDA at all times shall reserve the right to exercise its judgment regarding extensions on family absence from the unit on a case-by-case basis. However, HUD regulations require the LACDA to terminate assistance if the entire family is absent from the unit for a period of more than 180 consecutive calendar days.

"Absence of entire family" means that no family member is residing in the unit, and the unit has not been vacated. In order to determine if the family is absent from the unit, the LACDA may:

- Write letters to the family at the unit
- Telephone the family at the unit
- Interview the owner
- Interview neighbors
- Verify if utilities are in service
- Conduct an interim HQS Inspection

If the absence which resulted in termination of assistance was due to a person's disability, and the LACDA can verify that the person was unable to notify LACDA in accordance with the family's responsibilities, and if funding is available, the LACDA may reinstate the family as a reasonable accommodation if requested by the family.

#### **6.9.2 Absence of Any Member**

##### **[24 CFR §982.312(a)]**

Any member of the household will be considered permanently absent if s/he is away from the unit for 180 consecutive calendar days except as otherwise provided in this chapter.

#### **6.9.3 Absence Due to Medical Reasons**

##### **[24 CFR §982.312(e)(1)]**

If any family member leaves the household to enter a facility such as a hospital, nursing home, or rehabilitation center, the LACDA will seek advice from a reliable qualified source as to the likelihood and timing of their return. If the verification indicates that the family member will return in less than 180 calendar days, the family member will not be considered permanently absent.

If the verification indicates that the family member will be permanently confined to a nursing home, the family member will be considered to be permanently absent, out of the home, and removed from the family composition.

If the person who is determined to be permanently absent is the sole member of the household, assistance will be terminated in accordance with the LACDA's "Absence of Entire Family" policy.

#### **6.9.4 Absence Due to Incarceration**

##### **[24 CFR §982.312(e)(1)]**

If the sole member of the household is incarcerated for more than 30 calendar days, s/he will be considered permanently absent and the LACDA will initiate proposed termination procedures to terminate assistance.

Any member of the household, other than the sole member, will be considered permanently absent if s/he is incarcerated for 60 calendar days. Once a family

member is removed from the family composition, the family must seek LACDA's approval prior to allowing the family member to re-join the assisted household. Failure to adhere to this policy can result in termination of assistance.

The LACDA will determine if the reason for any family member's incarceration is for drug-related or violent criminal activity and, if appropriate, will pursue termination of assistance for the family if deemed appropriate.

#### **6.9.5 Foster Care and Absences of Children**

##### **[24 CFR §982.551(h)(4) and 24 CFR §982.551(e)(1)]**

If the family includes a child or children temporarily absent from the home due to placement in foster care, the LACDA will request information from the appropriate agency to determine when the child/children will be returned to the home.

If the time period is to be greater than 180 calendar days from the date of removal of the child/children, the voucher size may be temporarily reduced. If children are removed from the home permanently, the voucher size will be permanently reduced in accordance with the LACDA's subsidy standards.

#### **6.9.6 Absence of Adult**

##### **[24 CFR §982.312(e)]**

If neither parent remains in the household and the appropriate agency has determined that another adult is to be brought into the assisted unit to care for the children for an indefinite period, the LACDA will immediately add the new caretaker to the household composition while eligibility is reviewed, including criminal background checks.

If the caretaker does not pass any portion of the LACDA's eligibility screening, including the criminal background check, the caretaker will be removed from the voucher. If no other caretaker is identified and the ineligible individual remains the caretaker for the children, the assistance will be terminated.

When the LACDA approves a person to reside in the unit as a caretaker for the children, this person's income will be counted in the TTP for the family pending a final disposition. The LACDA will work with the appropriate service agencies and the owner to provide a smooth transition in these cases.

If a member of the household is subject to a court order that restricts him/her from the home for more than 180 calendar days, the person will be considered permanently absent.

If an adult family member leaves the household for any reason, the family must report the change in family composition to the LACDA within 30 calendar days.

The family will be required to notify the LACDA in writing within 30 calendar days when a family member leaves the household for any reason or moves out. The notice must contain a certification by the family as to whether the member is temporarily or permanently absent. The family member will be determined permanently absent if verification is provided.

If an adult child goes into the military and leaves the household, they will be considered permanently absent.

Time extensions may be granted as a reasonable accommodation upon request by a person with a disability.

#### **6.9.7 Students**

##### **[24 CFR §982.312(e)]**

Full time students who attend school away from the home and live with the family during school recess will be considered temporarily absent from the household. These family members will continue to be counted for the purpose of determining the family's appropriate voucher size.

#### **6.9.8 Visitors**

##### **[24 CFR §982.312(e)]**

Any person not included on the HUD-50058 who has been in the unit more than 30 calendar days, or a total of 60 calendar days in a 12-month period, will be considered to be living in the unit as an unauthorized household member.

Absence of evidence of any other address will be considered verification that the visitor is a family member.

Statements from neighbors and/or the owner will be considered in making the determination.

Use of the unit address as the visitor's current residence for any purpose that is not explicitly temporary shall be construed as permanent residence.

The burden of proof that the individual is a visitor rests on the family. In the absence of such proof, the individual will be considered an unauthorized member of the family and the LACDA will terminate assistance since prior approval was not requested for the addition.

In a joint custody arrangement, if the minor is in the household less than 180 calendar days per year, the minor will be considered to be an eligible visitor and not a family member.

#### **6.9.9 Reporting Absences**

##### **[24 CFR §982.551(h)(3) and §982.551(i)]**

If a family member leaves the household, the family must report this change to the LACDA, in writing, within 30 calendar days of the change and certify as to whether the member is temporarily absent or permanently absent. When available to do so, an adult family member who is leaving the household should remove him/herself in writing from the lease and voucher family composition.

The LACDA will conduct an interim re-examination for changes, which may affect the TTP in accordance with the interim policy. See Section 12.5 (Changes in Family Composition) for more information.

#### **6.9.10 Verification of Absence**

Please refer to Section 7.11.4 (Verification of Permanent Absence of Adult Member).





## **Chapter 7:**

### **VERIFICATION PROCEDURES**

#### **7.1 INTRODUCTION**

**[24 CFR §5.240(c), 24 CFR §5.210, 24 CFR §982.551(b)]**

HUD regulations require the LACDA to verify the factors of eligibility. Applicants and program participants must furnish proof of their statements whenever required by the LACDA, and the information they provide must be true and complete. The LACDA's verification requirements are designed to maintain program integrity. This chapter explains the LACDA's procedures and standards for verification of preferences, income, assets, allowable deductions, family status, and changes in household composition. The LACDA will ensure that proper authorization from the family is always obtained before making verification inquiries.

#### **7.2 METHODS OF VERIFICATION AND TIME ALLOWED**

The LACDA will use six levels of verification methods acceptable to HUD in the following order:

**Level Six: Up-Front Income Verification (UIV) using EIV** (highest priority): This level is mandatory and will be used when available.

**Level Five: Up-Front Income Verification (UIV) using a non-HUD system** (highest priority): In cases where EIV is not available, this level will be used when possible.

**Level Four: Third-party written verification** (high priority): This verification level is defined as tenant-provided documents obtained from a third-party source. The documents must be authentic, original, and computer-generated. Level four is used:

- To support the information reported through EIV/UIV,
- When there is a discrepancy between EIV/UIV and tenant-reported income, or
- When EIV or other forms of UIV are not available, the LACDA will accept authentic, original, computer-generated documents as verification of income, assets, or other family circumstances.

Families with fixed income sources such as benefits from the Social Security Administration, pension, service-connected benefits, annuities, and disability or death benefits may provide a statement dated within the appropriate benefit year. The LACDA will continue to monitor any cost-of-living adjustments (COLA) and apply them to fixed sources of income when necessary.

**Level Three: Third-party written verification form** (medium-low priority). The LACDA will send verification forms to third-party sources when:

- There is a discrepancy between EIV/UIV, and tenant-reported income and the tenant disputes the information in EIV, or

- Verification levels six through four are unavailable.

**Level Two: Third-party oral verification** (low priority). This level will be used when sending verification forms to third-party sources using level three is not possible, or the forms are not returned in a timely manner.

**Level One: Self-Declaration** (low priority). Certification/self-declaration verification will be the last level used if verification is not possible, or able to be obtained using the higher levels of verification. The LACDA may allow up to 10 calendar days for the return of third-party verification forms before using the next verification level.

### **7.3 TIMELINESS OF VERIFICATIONS**

Verifications may not be received more than 60 calendar days before voucher issuance for applicants [24 CFR §982.201(e)]. However, a voucher may be issued to a participant family without updating the verifications if the annual reexamination is current (within the last 12 months). Any reported changes that require an interim reexamination will be verified and processed before a voucher is issued.

All tenant-provided documents are current if dated within 120 days of the date of receipt. Please see section 7.9 for asset verification documents exceptions.

Exception for averaging income: When using consecutive verification documents to average income, such as consecutive pay stubs, only one of the documents must be dated within 120 days of the date of receipt if the documents are also the most recent received by the family.

#### **7.3.1 Up-Front Income Verification (UIV)**

The LACDA will utilize up-front income verification tools. The use of the Enterprise Income Verification (EIV) system is mandatory and will be used whenever possible. Other UIV systems, such as the Leader Replacement System (LRS) system for the Temporary Assistance of Needy Families (TANF) and Work Number, will be used whenever possible when EIV is unavailable.

If there is a difference in source of income or a substantial difference (\$2400 annually or \$200 monthly) in reported income between EIV verification and family-provided documents, and the tenant disputes the discrepancy or cannot provide adequate documentation to validate the discrepancy, the LACDA shall follow the guidelines below:

- The LACDA will send written third-party verification forms to the discrepant income source.
- The LACDA may review historical income data for patterns of employment, paid benefits, and/or receipt of other income, when the LACDA cannot readily anticipate income, such as in cases of seasonal employment, unstable working hours, and suspected fraud.
- The LACDA will analyze all data (UIV data, third-party verification documents provided by the family, and verification forms returned by the discrepant income source), and attempt to resolve the income discrepancy.

- The LACDA will use the most current information available to calculate the anticipated annual income.

In cases where UIV income data is different than tenant-reported income and the tenant does not dispute the discrepancy and can provide adequate documentation to validate the discrepancy, the LACDA will use the written third-party documents provided by the family to calculate the anticipated annual income.

### **7.3.2 Third-Party Written Verification**

Third-party written verification is defined as original, authentic, computer-generated documents from a third-party source, but obtained from the family. All documents will be photocopied and retained in the family file. The LACDA will accept the following documents, among others, from the family, provided that the document is such that tampering would be easily noted:

- Printed wage stubs
- Computer printouts from the employer
- Letters printed on official letterhead

Third-party written verification documents will be used to support the information reported through the UIV source, or as primary verification when UIV is not available.

The LACDA will accept faxed documents, however, a hard copy may be requested for verification.

If at least two check stubs cannot be obtained to verify employment income, the LACDA will request third party verification directly from the source to support EIV data or as primary verification.

### **7.3.3 Third-Party Written Verification Forms**

Third-party verification forms will be sent directly to the source when a participant disputes a discrepancy on the UIV, or cannot provide adequate documentation to validate the discrepancy, or when the LACDA rejects third-party written verification documents provided by the family.

The family will be required to sign an authorization for the information source to release the specified information.

Verifications received electronically directly from the source are acceptable. Written letters obtained from the source are acceptable under this level.

### **7.3.4 Third-Party Oral Verification**

Oral third-party verification will be used when written third-party verification forms are not possible or are delayed. When third-party oral verification is used, staff will be required to document the file, noting with whom they spoke, the date of the conversation, and the facts provided.

### **7.3.5 Self-Certification/Self-Declaration**

Self-certification, or “tenant declaration,” is used as a last resort when the LACDA is unable to obtain third-party verification.

When information cannot be verified by a third-party or by review of documents, family members will be required to submit self-certifications attesting to the accuracy of the information they have provided to the LACDA.

The LACDA may require a family to certify that a family member does not receive a particular type of income or benefit.

Self-certification means a signed statement/affidavit/certification under penalty of perjury. This level may be used when:

1. UIV is unavailable; and
2. Third-party written documents cannot be provided by the family, and
3. Staff made at least two documented efforts (mail, fax, telephone call, or email) to obtain third-party verification from the source and no response is received; or

An independent source does not have the capability to send written third-party verification directly to the LACDA or does not facilitate oral third-party verification. Self-certification, however, is an acceptable form of verification when:

- A source of income is fully excluded.
- Net family assets total \$5,000 or less and the LACDA has adopted a policy to accept self-certification at annual recertification, when applicable.
- The LACDA has adopted a policy to implement streamlined annual recertifications for fixed sources of income (See Chapter 12).

When the LACDA was required to obtain third-party verification but instead relies on a tenant declaration for verification of income, assets, or expenses, the family's file must be documented to explain why third-party verification was not available.

## **7.4 RELEASE OF INFORMATION**

### **[24 CFR §5.230]**

Each member of your family who is 18 years of age or older must sign the Form HUD-9886-A Form. Additional signatures must be obtained from new adult members joining the family or whenever members of the family become 18 years of age. The Form HUD-9886-A does not have an expiration date.

In accordance with HUD guidelines, families have the right to withdraw their consent forms by providing a written notice to the LACDA. However, if the HOH or a family member revokes their consent forms, the LACDA will use HUD's permitted discretionary policy and initiate the family's termination of assistance or cancellation of their application.

In cases where a family member other than the HOH revokes consent, the family will be given the opportunity to remove the member and continue with assistance or the application review process. When a family revokes their consent, the LACDA is required to inform our local HUD office.

The family will be required to sign specific authorization forms when information is needed that is not covered by the HUD-9886-A Form (Authorization for the Release of Information).

Each member requested to consent to the release of information will be provided with a copy of the appropriate forms for their review and signature.

Family refusal to cooperate with the HUD prescribed verification system will result in denial of admission or termination of assistance because it is a family obligation to supply any information requested by the LACDA or HUD.

## **7.5 COMPUTER MATCHING**

### **[24 CFR §5.210(a)]**

Where allowed by HUD and/or other state or local agencies, computer matching will be done.

#### **7.5.1 Data Sharing**

##### **[State of California Health and Safety Code, §34217]**

The LACDA will share applicant and participant information that is necessary to determine eligibility for County Welfare Department programs or services for which the client has applied or is receiving.

#### **7.5.2 Release of Information**

LACDA personnel, shall not release or otherwise make available HCV lists or any other confidential information to any outside organization, or entity without the express written approval of the Executive Director, Deputy Executive Director, or their designee. This restriction on the release of HCV lists or any other confidential information shall also apply to all other divisions of the LACDA. To the extent information is released, such release(s) shall be in a manner consistent with section 33 of the Settlement Agreement United States v. Housing Authority of the County of Los Angeles, No.2:15-cv-5471 (C.D.Cal), applicable federal law governing the HCV program and other housing information. In the event that the LACDA provides information covered under this section within 15 days, the LACDA will provide the following information to the Department of Justice.

1. The legitimate non-discriminatory purpose the information was provided for;
2. To whom the information was provided to; and
3. A copy of the information provided.

## **7.6 ITEMS TO BE VERIFIED**

### **[24 CFR §982.551(b)]**

- All income not specifically excluded by the regulations.

- Zero-income status of household.
- Full-time student status including high school students who are age of 18 or over.
- Current assets including assets disposed of for less than fair market value in preceding two years.
- Childcare expense where it allows an adult family member to be employed, seek employment, or to further his/her education.
- Total medical expenses of all family members in households whose head, co-head, or spouse is elderly or disabled.
- Disability assistance expenses to include only those costs associated with attendant care or auxiliary apparatus, which allow an adult family member to be employed.
- Identity.
- U.S. citizenship/eligible immigrant status.
- Social Security numbers for all family members.
- Preference status, based upon local preferences.
- Displacement status of single applicants who are involuntarily displaced through no fault of their own.
- Familial/marital status when needed for head or spouse definition.
- Disability for determination of preferences, allowances or deductions.
- Enrollment in a Medicare prescription drug plan.
- The amount of prescription drug benefits received.
- Actual or threatened incidents of domestic violence, dating violence, sexual assault, stalking, as well as verbal, psychological, economic, or technological abuse.

## **7.7 VERIFICATION OF INCOME**

### **[24 CFR §982.516(a)(2)(i)]**

This section defines the methods the LACDA will use to verify various types of income.

#### **7.7.1 Employment Income**

##### **[24 CFR §5.609(a) and § 5.609(b)(1)]**

Acceptable methods of verification include, but are not limited to the following:

1. Enterprise Income Verification (EIV) system, or if EIV is unavailable, other Up-Front Income Verification (UIV) tools, such as Work Number.
2. At minimum 2 check stubs or an earnings statement, which indicate the employee's gross pay, frequency of pay or year-to-date earnings, or W-2

forms to supplement EIV data, or as primary verification in the event EIV, or other UIV tools are unavailable.

3. Employment verification form completed by the employer.
4. Income tax returns signed by the family may be used for verifying self-employment income, or income from tips and other gratuities.

Verification forms request the employer to specify the:

- Dates of employment
- Amount and frequency of pay
- Date of the last pay increase
- Likelihood of change of employment status and effective date of any known salary increase during the next 12 months
- Year-to-date earnings
- Estimated income from overtime, tips, bonus pay expected during next 12 months

In cases where there are questions about the validity of information provided by the family, the LACDA will send third-party verification forms to the employer and may require the most recent federal income tax statements.

#### **7.7.2 Social Security, Pensions, Disability, Supplementary Security Income** **[24 CFR §5.609(b)(4)]**

Acceptable methods of verification include, but are not limited to the following:

1. Enterprise Income Verification (EIV) system.
2. Award or benefit notification letters prepared and signed by the providing agency.
3. Computer report electronically obtained or in hard copy.

The LACDA may request a complete Social Security Earnings Statement (SSA Form 7004) to resolve discrepancies with Social Security income

#### **7.7.3 Unemployment Compensation** **[24 CFR §5.609(b)(5)]**

Acceptable methods of verification include, but are not limited to the following:

1. Enterprise Income Verification (EIV) System.
2. Computer printouts from unemployment office stating payment dates and amounts.
3. Payment stubs.

Unemployment and State Disability Insurance may no longer be verified through the Employment Development Department (EDD) [EDD Letter, 5/23/2006].

#### **7.7.4 Welfare Payments or General Assistance**

##### **[24 CFR §5.609(b)(6)]**

Acceptable methods of verification include, but are not limited to the following:

1. Leader Replacement System (LRS) report for the Temporary Assistance of Needy Families (TANF)
2. Computer-generated Notice of Action.
3. LACDA verification form completed by payment provider.
4. Written statement from payment provider indicating the amount of grant/payment, start date of payments, and anticipated changes in payment in the next 12 months.

#### **7.7.5 Alimony or Child Support Payments**

##### **[24 CFR §5.609(b)(7)]**

Acceptable methods of verification include, but are not limited to the following:

1. Computerized official printout of payments made, if through a state agency.
2. Copy of latest check and/or payment stubs from Court Trustee. The LACDA must record the date, amount, and number of the check.
3. Copy of a separation, settlement agreement, or a divorce decree stating the amount and type of support and payment schedules.
4. LACDA verification form completed by payment provider.
5. Family's self-certification of the amount received, and the likelihood of support payments being received in the future, or that support payments are not being received.
6. If payments are irregular, the family must provide at least one of the following:
  - A copy of the separation or settlement agreement or a divorce decree stating the amount and type of support and payment schedules.
  - A statement from the agency responsible for enforcing payments to show that the family has filed for enforcement.
  - A welfare notices of action showing amounts received by the welfare agency for child support.
  - A written statement from the District Attorney's office or other appropriate agency certifying that a collection or enforcement action has been filed.

The County of Los Angeles Child Support Services Department will no longer respond to written or oral third-party verification attempts by the LACDA. [See memo, 2/8/2007]

### **7.7.6 Net Income from a Business**

#### **[24 CFR §5.609(b)(2)]**

In order to verify the net income from a business, the LACDA will view IRS and financial documents from prior years and use this information to anticipate the income and expenses for the next 12 months.

Acceptable methods of verification include, but are not limited to the following:

1. IRS Form 1040, including:
  - Schedule C (Small Business)
  - Schedule E (Rental Property Income)
  - Schedule F (Farm Income)
2. If accelerated depreciation was used on the tax return or financial statement, an accountant's calculation of depreciation expense computed using straight-line depreciation rules.
3. Audited or unaudited financial statement(s) of the business.
4. Third-party verification forms for each customer/contract indicating the amounts of income received in a specified time period.

Expenses for rent and utilities will not be allowed for operations or businesses based in the subsidized unit, as these expenses are a required family contribution in the Housing Choice Voucher program and are calculated based upon the family's income.

### **7.7.7 Child Care Business**

If a family is operating a licensed day care business, income and expenses will be verified as with any other business.

If the family is operating a cash and carry operation (which may or may not be licensed), the LACDA will require that the family complete a form for each customer which indicates: name of person(s) whose child/children is/are being cared for, phone number, number of hours child/children is/are being cared for, method of payment (check/cash), amount paid, and signature of person.

If childcare services were terminated, third-party verification will be sent to the parent whose child was receiving childcare.

### **7.7.8 Recurring Gifts**

#### **[24 CFR §5.609(b)(7)]**

The family must furnish a self-certification containing the following information:

- The person who provides the gifts
- The value of the gifts
- The regularity (dates) of the gifts
- The purpose of the gifts

### **7.7.9 Zero-Income Status**

Families claiming to have no income may undergo a credit review. The information contained in the credit report will be used to confirm the information provided by the family. The LACDA will utilize records provided by the Department of Public Social Services (DPSS) and may check records of other departments in the jurisdiction that have information about income sources of customers, to confirm information provided by a family claiming to have zero income.

### **7.7.10 Full-Time Student Status**

#### **[24 CFR §5.609(c)(11)]**

Only the first \$480 of the earned income of full-time students 18 years or older (including those who are temporarily absent), other than head of household, co-head, or spouse, will be counted towards family income.

Verification of full-time student status includes:

1. School records indicating enrollment for sufficient number of credits to be considered a full-time student by the educational institution;
2. A copy of final grades; or
3. Written verification from the registrar's office or other school official.
4. For 18-year-old high school students, verification of enrollment for the current academic year may include, but is not limited to a progress report, an attendance report, or an enrollment letter from the school.

Due to administrative cost burden, the LACDA may no longer attempt to verify student enrollment in any educational institution that participates in the National Student Clearinghouse using written third-party verification forms or oral third-party verification methods.

## **7.8 INCOME FROM ASSETS**

### **7.8.1 Savings Account Interest Income and Dividends**

#### **[24 CFR §5.609(b)(3)]**

Acceptable documents for verifications include, but are not limited to the following:

1. Account statements, passbooks, certificates of deposit, or LACDA verification forms completed by the financial institution.
2. Broker's statements showing value of stocks or bonds, and the earnings credited the family. Earnings can be obtained from current newspaper quotations or oral broker's verification.
3. IRS Form 1099 from the financial institution, provided that the LACDA must adjust the information to project earnings expected for the next 12 months.

### **7.8.2 Interest Income from Mortgages or Similar Arrangements**

#### **[24 CFR §5.609(b)(3)]**

Acceptable documents for verification include, but are not limited to the following:

1. A letter from an accountant, attorney, real estate broker, the buyer, or a financial institution stating interest due for next 12 months. (A copy of the check paid by the buyer to the family is not sufficient unless a breakdown of interest and principal is shown.)
2. Amortization schedule showing interest for the 12 months following the effective date of the certification or re-examination.

### **7.8.3 Net Rental Income from Property Owned by Family**

#### **[24 CFR §5.609(b)(3)]**

Acceptable documents for verification include, but are not limited to the following:

1. IRS Form 1040 with Schedule E (Rental Income).
2. Copies of the latest rent receipts, leases, or other documentation of rent amounts.
3. Documentation of allowable operating expenses of the property: tax statements, insurance invoices, bills for reasonable maintenance and utilities, and bank statements or amortization schedules showing monthly interest expense.

## **7.9 VERIFICATION OF ASSETS**

### **[24 CFR §982.516(a)(2)(ii)]**

For families with net assets totaling \$5,000 or less, the LACDA will accept the family's self-certification of the value of family assets and anticipated asset income when applicable. The family's declaration must show each asset, and the amount of income expected from that asset. All family members 18 years of age and older must sign the family's declaration. The LACDA will use third-party documentation for assets as part of the admissions process and whenever a family member is added to the household, to verify the individual's assets, and every three years thereafter.

For all other families, each must provide the LACDA with acceptable, written third-party documents to verify the value of or income from an asset. A written third-party verification document for an asset is considered current if at the time of receipt, the document is:

- A monthly statement not more than 120 days old, or
- The most recent quarterly statement, or
- A savings passbook that has been updated by the financial institution within the last 120 days, or
- The most recent annual statement, or
- The most recent document or statement issued to the family, including but not limited to a closing escrow statement or closing bank statement.

### **7.9.1 Family Assets**

The LACDA will determine the current cash value (the net amount the family would receive if the asset were converted to cash). Acceptable documents for verification include, but are not limited to the following:

1. Verification forms, letters, or documents from a financial institution or broker.
2. Passbooks, checking account statements, certificates of deposit, bonds, or financial statements completed by a financial institution or broker.
3. Quotes from a stockbroker or realty agent as to net amount family would receive if they liquidated securities or real estate.
4. Real estate tax statements, if the approximate current market value can be deduced from assessment.
5. Software database or internet-based real estate valuation sites to determine the market value of real estate assets.
6. Financial statements for business assets.
7. Copies of closing documents showing the selling price and the distribution of the sales proceeds.
8. Appraisals of personal property held as an investment.
9. Verification forms from a financial institution or broker.

### **7.9.2 Assets Disposed of for Less than Fair Market Value (FMV)**

#### **[24 CFR §5.603(b)(3)]**

This includes assets disposed of for 2 years preceding effective date of certification or re-examination:

1. For all certifications and re-examinations, the LACDA will obtain the family's certification as to whether any member has disposed of assets for less than fair market value during the 2 years preceding the effective date of the certification or re-examination.
2. If the family certifies that they have disposed of assets for less than fair market value, verification [or certification] is required that shows:
  - All assets disposed of for less than FMV;
  - The date they were disposed of;
  - The amount the family received; and
  - The market value of the assets at the time of disposition. Third-party verification will be obtained wherever possible.

## **7.10 VERIFICATION OF ALLOWABLE DEDUCTIONS FROM INCOME**

### **[24 CFR §5.611]**

### **7.10.1 Childcare Expenses**

#### **[24 CFR §5.611(a)(4)]**

Acceptable documents for verification include, but are not limited to the following:

1. Verification documents the family obtained from the childcare provider that specify the childcare provider's name, address, telephone number, the names of the children cared for, the number of hours the childcare occurs, the rate of pay, and the typical yearly amount paid, including school and vacation periods.
2. Written verification form returned by the person or agency who receives the payments. The written verification form requests the amount charged to the family for their services and whether any of the amounts owed have been or will be paid by sources outside the family.
3. Family's certification as to whether any of those payments have been or will be paid or reimbursed by outside sources.

### **7.10.2 Medical Expenses**

#### **[24 CFR §5.611(a)(3)]**

Families who claim medical expenses or expenses to assist a person(s) with a disability will be required to submit a certification as to whether any expense payments have been, or will be, reimbursed by an outside source.

Acceptable documents for verification include, but are not limited to the following:

1. Written verification by a doctor, hospital or clinic personnel, dentist, pharmacist, of
  - The anticipated medical costs to be incurred by the family and regular payments due on medical bills, and
  - Extent to which those expenses will be reimbursed by the insurance or a government agency.
2. Written confirmation by the insurance company or employer of health insurance premiums to be paid by the family.
3. Written confirmation from the Social Security Administration's written of Medicare premiums to be paid by the family over the next 12 months. A computer printout will be accepted.
4. For attendant care:
  - A reliable, knowledgeable, professional's certification that the assistance of an attendant is necessary as a medical expense and a projection of the number of hours the care is needed for calculation purposes.
  - Attendant's written confirmation of hours of care provided and amount and frequency of payments received from the family or agency (or copies of canceled checks the family used to make those payments) or stubs from the agency providing the services.

5. Receipts, canceled checks, or pay stubs that verify medical costs and insurance expenses likely to be incurred in the next 12 months.
6. Copies of payment agreements or most recent invoices that verify payments made on outstanding medical bills that will continue over all or part of the next 12 months.
7. Receipts or other record of medical expenses incurred during the past 12 months that can be used to anticipate future medical expenses. The LACDA may use this approach for general medical expenses, such as non-prescription drugs and regular visits to doctors or dentists, but not for one-time, nonrecurring expenses from the previous year.
8. The LACDA will use mileage at the IRS rate, or cab, bus fare, or other public transportation cost for verification of the cost of transportation directly related to medical treatment.

Medical expenses may not be verified through third-party verification from Walgreen's Pharmacy [see memo dated 04/16/09].

### **7.10.3 Assistance to Persons with Disabilities**

#### **[24 CFR §5.611(a)(3)(ii)]**

1. The LACDA may require:
  - Written certification from a reliable, knowledgeable, professional that the person with disabilities requires the services of an attendant and/or the use of auxiliary apparatus to permit him/her to be employed, or to function sufficiently independently to enable another family member to be employed.
  - Family's certification as to whether they receive reimbursement for any of the expenses of disability assistance and the amount of any reimbursement received.
2. Attendant Care:
  - If the family pays for any portion of the attendant care expense, the attendant's written certification of amount received from the family, frequency of receipt, and hours of care provided.
  - Certification of family and attendant and/or copies of canceled checks family used to make payments.
3. Auxiliary Apparatus:
  - Receipts for purchases or proof of monthly payments and maintenance expenses for auxiliary apparatus.
  - In the case where the person with disabilities is employed, a statement from the employer that the auxiliary apparatus is necessary for employment.

### **7.11 VERIFYING NON-FINANCIAL FACTORS**

#### **[24 CFR §982.551(b)(1)]**

### **7.11.1 Verification of Legal Identity**

In order to prevent program abuse, the LACDA will require applicants to furnish verification of legal identity for all family members.

The documents listed below will be considered acceptable verification of legal identity for adults. If a document submitted by a family is invalid or otherwise questionable, more than one of these documents may be required.

- Certificate of birth, naturalization papers
- Church issued baptismal certificate
- Current, valid Driver's License
- U.S. military discharge (DD 214)
- U.S. passport
- Board approved Consulate General identification cards, which are currently Mexico's and Argentina's "Matricula Consular" identification cards
- Company/agency Identification Card
- Department of Motor Vehicles Identification Card
- Hospital records

Documents considered acceptable for the verification of legal identity for minors may be one or more of the following:

- Certificate of birth
- Adoption papers
- Custody agreement
- Health and Human Services ID

If acceptable verification of legal identity documents listed above are not available due to a declared disasters or emergencies, whether due to natural calamity (e.g., earthquake), civil disturbance, public health emergencies, or other cause recognized by the local, state or federal government, the LACDA may use for the initial leasing process a certified statement and/or documentation that the family has undertaken actions to obtain proper documentation. For these instances, the LACDA will obtain acceptable verification of legal identity at the time of processing the annual reexamination.

### **7.11.2 Verification of Marital Status**

- Verification of a divorce status will be a certified copy of the divorce decree, signed by a Court Officer.
- Verification of a separation may be a copy of court-ordered maintenance or other records.
- Verification of marriage status is a marriage certificate.

### **7.11.3 Familial Relationships**

The following verifications may be required if applicable:

- Verification of relationship:
  - Official identification showing names
  - Birth certificates
  - Baptismal certificates
- Verification of guardianship:
  - Court-ordered assignment
- Verification from Social Services Agency
- School records
  - Affidavit of parent
- Evidence of a stable family relationship:
  - Joint bank accounts or other shared financial transactions
  - Leases or other evidence of prior cohabitation
  - Credit reports showing relationship

#### **7.11.4 Verification of Permanent Absence of Adult Member**

If an adult member who was formerly a member of the household is reported permanently absent by the family, the LACDA may require one or more of the following as verification:

1. Husband or wife institutes divorce action.
2. Husband or wife institutes legal separation.
3. Order of protection/restraining order obtained by one family member against another.
4. Proof of another home address, such as utility bills, canceled checks for rent, driver's license, or lease or rental agreement, if available.
5. Statements from other agencies such as social services or a written statement from the owner or manager that the adult family member is no longer living at that location.
6. If the adult family member is incarcerated, a document from the Court or prison should be obtained stating how long they will be incarcerated.
7. A statement by the adult member of the household removing him/herself from the lease and voucher household and providing a forwarding address and effective date of the move.

#### **7.11.5 Verification of Change in Family Composition**

**[24 CFR §982.516(c)]**

The LACDA may verify changes in family composition (either reported or unreported) through letters, telephone calls, utility records, inspections, owners, neighbors, credit data, school or DMV records, and other sources.

### **7.11.6 Verification of Disability**

#### **➤ Family Members Receiving SSA Disability Benefits**

Verification of the receipt of disability benefits from the Social Security Administration (SSA) is sufficient verification of disability for the purpose of qualifying for waiting list preferences, (if applicable) or certain income disallowances and deductions [VG, p. 23].

For family members claiming disability who receive disability benefits from the SSA, the LACDA will attempt to obtain information about disability benefits through the HUD Enterprise Income Verification (EIV) system. If documentation from HUD's EIV System is not available, the LACDA will request a current (dated within the last 120 days) SSA benefit verification letter from each family member claiming disability status. If the family is unable to provide the document(s), the LACDA will ask the family to request a benefit verification letter by either calling SSA at 1-800- 772-1213, or by requesting it from [www.ssa.gov](http://www.ssa.gov). Once the applicant or participant receives the benefit verification letter, they will be required to provide it to the LACDA.

#### **➤ Family Members Not Receiving SSA Disability Benefits**

Receipt of veteran's disability benefits, worker's compensation, or other non-SSA benefits based on the individual's claimed disability are not sufficient verification that the individual meets HUD's definition of disability in 24 CFR5.603.

For family members claiming disability who do not receive disability benefits from the SSA, written third-party verification by the appropriate diagnostician such as physician, psychiatrist, psychologist, therapist, rehabilitation specialist, or licensed social worker, using the HUD language as the verification format must be provided. The written third-party verification (VOD) that the family member meets the HUD definition of disability must be clearly indicated. The knowledgeable professional ultimately will verify whether the family member does or does not meet the HUD definition.

### **7.11.7 Verification of Citizenship/Eligible Immigrant Status**

#### **[24 CFR Part 5, Subpart E]**

To be eligible for assistance, individuals must be U.S. citizens, or non-citizens with eligible immigrant status based on the eligible categories specified by regulations. Individuals who are neither, may elect not to contend their status. Each family member must declare their status once. If a family member reports a change to their citizenship status, only that member will be required to declare their updated citizenship status. Assistance cannot be delayed, denied, or terminated while verification of the status is pending, except that assistance to applicants may be delayed while the LACDA hearing is pending.

1. Citizens or Nationals of the United States: Required to sign a declaration under penalty of perjury [24 CFR §5.508(b)(1)].

2. Eligible Immigrants Age 62 and Over: Required to sign a declaration of eligible immigration status and provide proof of age [24 CFR §5.508(b)(2)].
3. All Other Eligible Immigrants: Required to sign a declaration of status and verification consent form, and to provide an acceptable document of eligible immigration as follows:
  - Resident Alien Card (I-551)
  - Alien Registration Receipt Card (I-151) (With receipt for application of I-551)
  - Foreign Passport with I-551 stamp
  - Arrival-Departure Record (I-94) with no annotation accompanied by:
    - A final court decision granting asylum (if no appeal is taken);
    - A letter from an INS or USCIS asylum officer granting asylum (if application is filed on or after 10/1990) or from and INS director granting asylum (application filed before 10/1/90);
    - A court decision granting withholding of deportation; or
    - A letter from an asylum officer granting withholding of deportation (if application filed on or after 10/1/90).
  - Arrival/Departure Record (I-94) stamped with one of the following:
    - “Admitted as a Refugee Pursuant to Section 207”
    - “Section 208” or “Asylum”
    - “Section 243(h)” or “Deportation stayed by Attorney General”
    - “Paroled Pursuant to Section 221(d)(5) of the INS (or USCIS)”
  - Temporary Resident Card (I-688) annotated “Section 245A” or Section “210”
  - Employment Authorization Card (I-688B) annotated “Provision of Law 274a. 12(11)” or “Provision of Law 274a.12”
  - Employment Authorization Document (I-766) annotated “Provision of Law 274a. 12(11)” or “Provision of Law 274a.12”
  - Any official revision of the acceptable documents listed above
  - Receipt issued by the United States Citizenship and Immigration Service (USCIS) for issuance of replacement of any of the above documents that shows individual’s entitlement has been verified

The document is copied front and back and returned to the family. A birth certificate is not an acceptable verification of eligible immigrant status. All documents in connection with U.S. citizenship/eligible immigrant status must be kept for 5 years.

Eligible immigrants must have their status verified by the USCIS. The LACDA verifies the status through the USCIS SAVE system. If this primary verification fails to verify the status, the LACDA must request within 10 calendar days that the USCIS conduct a manual search [24 CFR §5.512(c)].

4. Ineligible Family Members: Family members who do not claim to be citizens or eligible immigrants, must be listed on a statement of ineligible family members signed by the head of household, co-head, or spouse [24 CFR §5.508(e)].
5. Non-Citizen Students on Student Visas: Ineligible, even though they are in the country lawfully. They must provide their student visa, but their status will not be verified, and they do not sign a declaration but are listed on the statement of ineligible members [24 CFR §5.522].
6. VAWA Self-Petitioners (PIH 2017-02)

VAWA self-petitioners are those who claim to be victims of “battery and extreme cruelty”. VAWA covers the following types of battery or extreme cruelty: domestic violence, dating violence, sexual assault, stalking, as well as verbal, psychological, economic, or technological abuse. A VAWA self-petitioner can indicate that they are in “satisfactory immigration” status when applying for housing or continued assistance. “Satisfactory immigration status” means an immigration status which does not make the individual ineligible for financial assistance. Once the LACDA verifies the applicant’s immigration status in the Department of Homeland Security (DHS) SAVE System, the LACDA will make the final determination as to the self-petitioner’s eligibility for assistance.

Not every noncitizen victim who has been subjected to battery or extreme cruelty will qualify under these procedures. To qualify, the noncitizen victim must have been battered or subject to extreme cruelty by their spouse or parent, who is a U.S. citizen or Lawful Permanent Resident (LPR). The LACDA may receive a petition at any time, but submissions will most likely be related to a request for VAWA protections pursuant to 24 CFR 5 Subpart L (e.g. with a request for an emergency transfer or family breakup resulting from domestic violence, dating violence, sexual assault, or stalking; PIH 2016-09).

When the LACDA receives a self-petition (INS Form I-360 or I-130) or INS Form 797, the LACDA is prohibited from requesting any additional information from the VAWA self-petitioner, other than what is required below to complete the verification.

#### VAWA Self-Petitioner Verification Procedure

When the LACDA receives a self-petition or INS Form 797 “Notice of Action”, the HA will initiate verification in the SAVE System as outlined in PIH 2017-02. During the verification process, housing assistance and all other VAWA protections will be granted to the self-petitioner throughout the verification process until a final determination of LPR status is made. If this primary verification fails to verify status, the LACDA must request within ten days that the USCIS conduct a manual search. If the final determination is

to deny the VAWA self-petition or LPR petition, the LACDA will alert the petitioner and take the appropriate actions.

**Failure to Provide:** If an applicant or participant family member fails to sign the required declarations and consent forms or provide documents, as required, they must be listed as an ineligible member. If the entire family fails to provide and sign as required, the family may be denied or terminated for failure to provide required information [24 CFR §5.508(i)].

**Time of Verification:** For applicants, verification of U.S. citizenship/eligible immigrant status occurs at the same time as verification of other factors of eligibility for final eligibility determination. For family members added after other members have been verified, the verification occurs at the first interim or annual re-examination after the new member moves in. Once verification has been completed for any covered program, it need not be repeated except that, in the case of port-in families, if the initial public housing agency does not supply the documents, the LACDA must conduct the determination [24 CFR §5.508(g)].

**Extensions of Time to Provide Documents:** Extensions must be given for individuals who declare their eligible immigration status but need time to obtain the required documents. The length of the extension shall be based on individual circumstances. The LACDA will generally allow up to 30 calendar days to provide the document or a receipt issued by the USCIS for issuance of replacement documents [24 CFR §5.508(h)].

**Determination of Ineligibility:** After the LACDA has made a determination of ineligibility, the family will be notified of the determination and the reasons and informed of the option for prorated assistance (if applicable).

### **7.11.8 Verification of Social Security Numbers**

#### **[24 CFR §5.216]**

Social Security numbers must be provided as a condition of eligibility for all family members, except for family members who were determined eligible on or before January 31, 2010, and were at least 62 years old on that date, and family members who are not eligible to obtain a Social Security number. Social Security numbers will be verified through a Social Security card issued by the Social Security Administration. If a family member cannot produce a Social Security card, only the documents listed below may be used for verification. [24 CFR §5.216(g)(1)]:

- A document issued by the Social Security Administration that contains the name and Social Security number of the individual; or
- A document issued by a federal, state, or local government agency that includes the name, Social Security number, and other identifying information about the individual.

To facilitate access to programs for family members who do not have access to their Social Security card or other documentation, HUD has expanded the acceptable documents for Social Security Number verification through the release of HOTMA [Notice PIH 2023 -27]. If the LACDA is unsuccessful in obtaining a Social Security card or other acceptable documentation as listed in this section, the LACDA may accept a family's self-certification of their Social Security number.

In addition to the self-certification, at least one third-party document, such as a bank statement, utility or cell phone bill, benefits letter, etc., containing the individual's name must be provided as verification of the Social Security number. In these cases, the tenant's file must include documentation explaining why other Social Security number documentation methods were unavailable.

If the member's Social Security number is subsequently verified in EIV, no further verification is required. If the member's Social Security number fails the EIV Social Security number match, the LACDA will obtain a valid card issued by the SSA or an original document issued by a federal or state government agency that contains the name and Social Security Number of the member, along with other identifying information of that individual.

All new family members, except children age of 5 and under, who have not been assigned a number, will be required to produce their Social Security card or provide the substitute documentation described above. This information is to be provided at the time the change in family composition is reported to the LACDA and the family member will not be added to the household composition until it is provided [24 CFR §5.216(e)(2)(i)].

A child age of 5 or under who has not been assigned a Social Security number may be added to the household before providing a Social Security number. However, the parent or guardian will be required to sign a form attesting that the child was never issued a Social Security number. The family must disclose the child's Social Security number within 90 days of being added to the household composition.

If a participant was never assigned a Social Security number, the individual will be required to sign a form attesting to the fact. The family member will be required to provide proof of the Social Security number before the current annual reexamination is processed [24 CFR §5.216(e)(2)(ii)].

A 90-day extension may be granted by a LACDA supervisor if the family was unable to provide the information due to good cause, and there is a reasonable likelihood they will be able to provide the information during the extended time period. If the family fails to provide the information within the approved time period, the family's assistance will be terminated. If the family fails to provide required documentation of a member's Social Security number, the family's assistance will be terminated [24 CFR §5.216(g)].

If any of the verification documents listed above are not available due to declared disasters or emergencies, whether due to natural calamity (e.g., earthquake), civil disturbance, public health emergencies, or other cause recognized by the local, state or federal government, the LACDA may use for the initial leasing process a certified statement and/or documentation that the family has undertaken actions to obtain proper documentation. The LACDA can make any corrections or adjustments after the HUD form 50058 has been validated in IMS/PIC and made available to the LACDA in the EIV system or at the time of processing the annual reexamination, whichever is first.

### **7.11.9 Medical Need for Larger Unit**

A written certification that a larger unit is medically necessary must be obtained from a reliable, knowledgeable, medical professional. If the request is a reasonable accommodation for a disabled family member, the following policy will be followed.

### **7.11.10 Reasonable Accommodation**

In order to verify the necessity for a reasonable accommodation, the LACDA will usually require the disabled individual or a third-party acting on their behalf, to return the Reasonable Accommodation Request form, or other written documentation, completed by a qualified professional with direct experience with the individual's disability. Qualified professionals may include, but are not limited to:

- A medical doctor
- A psychiatrist
- A social worker
- Other unlicensed care providers

If the need for the requested accommodation is visibly apparent, the LACDA may grant the request immediately without requiring further verification. If the disabled individual is unable to return a written request due to their disability, the LACDA will work with the individual to ascertain the specific accommodation being requested and whether it conforms to the requirements stated in section 1.10

### **7.11.11 Secondary Review/Credit Checks**

The LACDA may use credit reports obtained from reliable sources to conduct secondary verifications on a case-by-case basis.

The methodology used to evaluate the information obtained from the credit report in relation to new applicants is outlined in Chapter 4 (Establishing Preferences and Maintaining the Waiting List).

The secondary review includes a comparison between the information contained in the credit report, for each adult household member, and the information provided by the family to the LACDA for eligibility purposes. Specifically, the LACDA reviews the credit report to verify:

**Employment:** If the credit report reveals employment during the subsidized period that was not disclosed to the LACDA, the family will be required to provide documentation that the employment did not occur or provide information regarding the amount of earnings received during the employment period.

If the family contends that the employment was made up for the purposes of obtaining credit or was erroneously placed on the credit report, the family must supply a letter from the employers listed confirming such information. On a case-by-case basis, the LACDA may accept a certified statement from the family.

If the family failed to disclose employment for a period longer than 6 months, the LACDA will propose termination of the family's assistance and seek repayment of

any overpayment. On a case-by-case basis the LACDA may counsel the family before proposing termination and seeking repayment of any overpayment.

If the family failed to disclose employment for less than 6 months, the family will be required to attend a counseling interview and re-sign all program documents re-enforcing the family's obligations. The family will also be required to repay any overpayment amount. A second violation of this nature will result in a proposed termination.

**Assets:** The credit report information will be used to verify assets, particularly, large items such as real estate property. If the credit report reveals that the family owns property, the family will be required to provide the appropriate documentation regarding the property.

If all documentation confirms that the family (any family member) owns real estate property that was purposely concealed, the LACDA will propose termination of assistance and seek repayment of any overpayment amount.

**Aliases:** A credit report can provide information on other names that have been used for the purposes of obtaining credit. Common reasons for use of other names include a recent marriage or a divorce. If an alias has not been disclosed to the LACDA, the family will be asked to provide additional evidence of the legal identity of adult family members.

**Current and Previous Addresses:** For a continuously assisted family, it is assumed that the family's primary residence is the assisted address. If the credit report indicates the continuous use of an address, other than that of the assisted unit during the subsidized period, the family will be asked to provide documentation that the assisted address is being used as the family's primary residence. This may include a history of utility bills, bank statements, school enrollment record for children, credit card statements, or other relevant documents. Failure to provide adequate proof may result in termination of assistance.

If the family is not using the subsidized unit as their primary residency and/or is subletting the assisted unit, the file will be referred for proposed termination and the LACDA will seek full repayment of any overpayment amount.

**Credit Card and Loan Payments:** A credit report will usually include a list of the family's financial obligations. Examples of the items that may show up include car loans, mortgage loans, student loans, and credit card payments. The LACDA will review this information to confirm the income and asset information provided by the family. If the family's current financial obligations (total amount of current monthly payments) exceed the amount of income reported by the family, the LACDA will ask the family to disclose how they are currently meeting their financial obligations. Accounts that have been charged off or significantly delinquent are not included in this calculation. Failure to provide adequate proof of income will result in the file being referred for proposed termination. Additionally, the LACDA will seek full repayment of any overpayment amount.

**Multiple Social Security Numbers:** A credit report may list multiple Social Security numbers if an adult family member has used different Social Security numbers to obtain credit. If the credit report information does not match the information provided by an adult member of the family, the family member will be required to obtain written confirmation of the Social Security number that was issued to him/her from the Social Security Administration.

Whenever a violation results in a proposed termination, the family is entitled to request an informal hearing. Procedures governing the informal hearing process are outlined in Chapter 16 Informal Reviews/Hearings.

## **Chapter 8:**

### **VOUCHER ISSUANCE AND BRIEFINGS**

#### **8.1 INTRODUCTION**

This chapter covers the LACDA's process for issuing vouchers, including the contents of the briefing that is conducted for families receiving a voucher. It also includes policies on the term of the voucher.

#### **8.2 ISSUANCE OF HOUSING CHOICE VOUCHERS**

When funding is available, the LACDA will issue vouchers to applicants whose eligibility has been determined.

The number of vouchers issued must ensure that the LACDA stays as close as possible to 100 percent lease-up. The LACDA performs a calculation to determine whether applications can be processed, the number of vouchers that can be issued, and to what extent the LACDA can over-issue.

The LACDA may over-issue vouchers only to the extent necessary to meet leasing goals. All vouchers that are over-issued will be honored, as long as there is funding to support the over-issued vouchers. If the LACDA finds it is over-leased, and a voucher holder has found an approvable unit, the LACDA is under no obligation to the family, to the owner, or to any other person, to approve a tenancy. As the LACDA nears 100 percent lease-up, vouchers will be honored in the order they were issued. All voucher holders whose vouchers are not honored due to over-leasing will be placed back on the waiting list.

#### **8.3 BRIEFING TYPES AND REQUIRED ATTENDANCE**

##### **8.3.1 Initial Applicant Briefing**

###### **[24 CFR §982.301(a)]**

When the family is initially issued a voucher, the LACDA conducts a briefing session, as required by HUD. The briefing session is mandatory.

Briefing sessions will be conducted in groups or individual meetings.

The LACDA will not issue a voucher to a family unless the household representative has attended a briefing and signed the voucher. Applicants who provide prior notice of inability to attend a briefing will automatically be scheduled for the next briefing. Applicants who fail to attend scheduled briefings, without prior notification and approval of the LACDA, may be denied admission based on failure to supply information needed for certification. The LACDA will conduct individual briefings for families with disabilities at their home, upon request by the family, if required for reasonable accommodation.

Families who attend group briefings and still have the need for individual assistance will be referred to the appropriate staff person.

### **8.3.2 Re-Issuance Briefing**

A briefing will be held for participants who will be re-issued vouchers to move. This briefing may include incoming and outgoing portable families. Families failing to attend a scheduled briefing twice will be denied a new voucher based on failure to provide required information.

### **8.3.3 Owner Briefing**

Briefings are held for owners at least annually. Invitations are sent to all owners. Prospective owners are also welcome. The purpose of the briefing is to assure successful owner participation in the program.

## **8.4 INFORMATION PROVIDED AT THE BRIEFING SESSION**

The LACDA's objectives are to assure that families selected to participate are successful in obtaining an acceptable housing unit and that they have sufficient knowledge to derive maximum benefit from the program and to comply with program requirements.

The purpose of the briefing session is to provide information on the LACDA's process for voucher holders who intend to lease a unit. This will enable families to utilize the program to their advantage and prepare them to discuss it with potential owners and property managers.

When the family is selected to participate, the briefing session includes information as follows.

### **8.4.1 Topics Covered in the Briefing Session**

#### **[24 CFR §982.301(a)]**

The person conducting the briefing will describe how the program works and include information on the following subjects:

- A description of how the program works, including reasonable accommodation policies and procedures;
- Family and owner responsibilities;
- Where a family may lease a unit inside and outside the LACDA's jurisdiction;
- How portability works for families eligible to exercise portability; and
- Advantages of moving to an area that does not have a high concentration of poor families, for families living in high poverty census tracts in the LACDA's jurisdiction.

If the family includes a person with disabilities, the LACDA will ensure compliance with 24 CFR §8.6 to ensure effective communication.

### **8.4.2 Briefing Packet**

#### **[24 CFR §982.301(b)]**

The LACDA provides families with a briefing packet that contains more detailed information about the program. The packet includes forms and information required by HUD, as well as additional resources. The person conducting the briefing session will explain the documents in the briefing packet.

1. Instructions: This explains the term of the voucher, the LACDA's policies on extensions and suspensions, and how families may request tenancy approval.
2. Payment Standard Flyer: This flyer explains the LACDA's current payment standard schedule for each zip code within the LACDA's service area. A copy of the payment standard schedule is attached to the flyer.
3. Subsidy Estimation: A worksheet on rent calculations, including a description of the method used to calculate the assistance payment, how the minimum and maximum allowable rent is determined, how the payment standard is determined, and a calculation of the estimated maximum rent to suit the tenant's budget.
4. Utility Allowance Schedule: Utility allowance amounts for rental units, by unit size and utility type, for cities and unincorporated areas within the LACDA's jurisdiction.
5. Information on where the family can lease a unit, including portability procedures, a list of area housing authorities, and a form for participants who are requesting to transfer.
6. Form HUD-52641-A: The HUD-required "tenancy addendum" that must be included in the lease.
7. Request for Tenancy Approval (RTA): Families request LACDA approval of the assisted tenancy with this form. The RTA includes a statement of LACDA policy on providing family information to prospective owners.
8. Subsidy Standards and Requests for Waivers: Explains how the number of bedrooms (unit size) relates to family composition, and when and how exceptions are made in regard to requests for additional bedrooms.
9. A Good Place to Live: HUD's brochure on selecting a unit that complies with HQS.
10. Are You a Victim of Housing Discrimination: HUD's pamphlet on fair housing which contains the complaint form. The LACDA also includes available state and local information on equal opportunity laws.
11. Marketing List of Available Properties: The LACDA provides information for the Los Angeles County Housing Resource Center, which is an internet-based property listing and search service for owners and participants. The LACDA includes an information sheet on how to access the system online.
12. Family Obligations: Families sign to acknowledge program obligations, and consequences including termination of assistance for failure to comply.

13. Informal Hearing Information: Includes procedures and explanations of when participant families have the opportunity for an informal hearing, and how to request a hearing.

The packet may also include the following materials:

- Three Way Partnership: Explains the relationship between owners, participants, and the LACDA.
- Protect Your Family from Lead in Your Home: Federal brochure on the hazards of lead-based paint and resources for additional information.
- Searching for a Rental Home: Guidance on finding a unit and submitting a successful rental application.
- Additional Standards for HQS Inspections and inspection process details.
- Owner materials including information on the New Contracts Process and the Benefits of Participation.
- Owner forms including IRS W-9, Letter of Authorization, Authorization Agreement for Direct Deposit, and a sample Lead-Based Paint Disclosure.
- Request for Voucher Extension form
- What You Should Know About EIV: A federal brochure describing the Enterprise Income Verification (EIV) System, how it is used, and from where the information is generated.

## **8.5 ENCOURAGING PARTICIPATION IN AREAS WITHOUT LOW INCOME OR MINORITY CONCENTRATION**

### **[24 CFR §982.301(a)(3)]**

At the briefing, families are encouraged to search for housing in non-impacted areas. The LACDA provides assistance to families who wish to do so.

The assistance provided to such families includes:

- Direct contact with owners;
- Counseling with the family;
- Providing information about services in various non-impacted areas;
- Meeting with neighborhood groups to promote understanding;
- Formal or informal discussions with owner groups;
- Formal or informal discussions with Social Service Agencies;
- Meeting with rental referral companies or agencies; and
- Meeting with fair housing groups or agencies.

The LACDA currently utilizes the Los Angeles County Housing Resource Center, an internet-based housing search service. This service, lists rental properties, listed by owners within the LACDA's jurisdiction to ensure greater mobility and housing choice to very low-income households. Each property listed indicates if it is in an area of low-poverty concentration.

The LACDA also maintains a listing of job, education, transportation and other information for cities not impacted by poverty or minority concentration. The cities for which the LACDA maintains this information are:

- Alhambra
- Azusa
- Bellflower
- Covina
- Downey
- Lakewood
- Lawndale
- Lomita
- Paramount
- Santa Fe Springs
- West Covina
- West Hollywood
- Whittier

This information may be obtained at the Section 8 Administrative Office.

## **8.6 SECURITY DEPOSIT REQUIREMENTS**

### **[24 CFR §982.313]**

Security deposits charged by owners may not exceed those charged to unassisted families (nor the maximum prescribed by state or local law.)

For lease-in-place families, responsibility for first and last month's rent is not considered a security deposit issue. In these cases, the owner should settle the issue with the family prior to the beginning of assistance.

## **8.7 TERM OF VOUCHER**

### **[24 CFR §982.301(b)(1)]**

During the briefing session, each family is issued a voucher, which represents a contractual agreement between the LACDA and the family, specifying the rights and responsibilities of each party. It does not constitute admission to the program, which occurs when the lease and contract become effective.

### **8.7.1 Expirations**

#### **[24 CFR §982.303(a)]**

The initial term of the voucher is 60 calendar days from the date of issuance. At the time the family is provided the voucher, the LACDA will automatically approve

one 60-day extension. The family must submit a Request for Tenancy Approval and lease within the 120-calendar day period, unless the family requests an extension and the LACDA grants the extension.

Under a local, state, and/or federally declared disaster, and at the discretion of the Director or designee, the LACDA may grant voucher extensions as necessary without the need for a family's formal request.

If the voucher has expired and has not been extended by the LACDA or expires after an extension, the family will be denied assistance. The family will not be entitled to a review or hearing. If the family is currently assisted, they may remain as a participant in their unit if there is an assisted lease/contract in effect.

### **8.7.2 Extensions of Voucher Term**

#### **[24 CFR §982.303(b)]**

The LACDA has the authority to grant extensions to vouchers, to specify the length of an extension, and to determine the circumstances under which extensions will be granted. LACDA's discretionary policies related to voucher extensions are below.

LACDA may approve an extension in a 60-day increment not to exceed a maximum voucher term of 180 calendar days. LACDA supervisors may authorize voucher extensions, in 30 or 60-day increments, up to a maximum term of 365 calendar days.

Extensions beyond 365 calendar days will only be considered as a reasonable accommodation for a person with disabilities. In such cases, the policy and procedure in section 7.11.10 will be followed.

As stated above, under a local, state, and/or federally declared disaster, and at the discretion of the Director or designee, the LACDA may grant voucher extensions as necessary without the need for a family's formal request.

### **8.7.3 Mainstream Voucher Program Requirements**

Initial Search Term: The initial search term for the Mainstream Voucher program participants must be at least 120 days. This is applicable to current participants that request to move with continued assistance.

Extension of Term: Extensions must be in minimum increments of 90 days. The first extension request must be approved (whether it was requested orally or in writing) as long as the request is made on or before the expiration date of their Mainstream voucher and is consistent with applicable requirements.

The LACDA must notify the family prior to the initial voucher term expiration, at least once, the following:

1. The upcoming expiration date of their Mainstream voucher;
2. The process for requesting an extension; and
3. Inquire if the family requires assistance in their housing search.

**8.7.4 HQS Abatement Voucher Requirements – Owner Deficiencies**

A family whose HAP contract is terminated due to an owner's failure to address HQS deficiencies, resulting in a unit abatement, will receive a 90-day voucher term with an automatic 90-day extension. The LACDA will continue its regular extension policy beyond the initial 180 days as stipulated in section 8.7.2, except that any extension granted will be for a minimum of 90 days.

A voucher must be issued to the family at least 30 days prior to the termination of the HAP contract. The family has the discretion to terminate their lease agreement, which will occur either immediately or when the family vacates the unit, whichever is earlier.

If the family is unable to lease a new unit within this time, the LACDA will offer the family a preference in the Public Housing program. Under this preference, the family will be offered the first unit that becomes available for occupancy after the voucher (including any extensions) expires, as long as the family accepts the offer. This option must be provided to the family no later than 30 days prior to the expiration of the final voucher period.

**8.7.5 Suspension of Voucher Term (Tolling)**

**[24 CFR 982.303(c)]**

When a Request for Tenancy Approval is received, the LACDA will not deduct the number of calendar days required to process the request from the term of the voucher.

**8.8 VOUCHER ISSUANCE DETERMINATION FOR SPLIT HOUSEHOLDS**

**[24 CFR §982.315]**

In those instances when a family assisted under the Housing Choice Voucher program becomes divided into two otherwise eligible families due to divorce, legal separation, or the division of the family, and the new families cannot agree as to which new family unit should continue to receive the assistance, and there is no determination by a court, the LACDA shall consider the following factors to determine which of the families will continue to be assisted:

1. Which of the two new family units has custody of dependent children.
2. Which family member was the head of household when the voucher was initially issued (listed on the initial application).
3. The composition of the new family units, and which unit contains elderly or disabled members.
4. Whether domestic violence was involved in the breakup.
5. Which family members remain in the unit.
6. Recommendations of social service professionals.

Documentation of these factors will be the responsibility of the requesting parties.

If documentation is not provided, the LACDA will terminate assistance on the basis of failure to provide information necessary to complete the annual re-examination.

Where the breakup of the family also results in a reduction of the size of the voucher, the family will be required to move to a smaller unit if the current owner is unwilling to accept the rent level of the smaller sized certificate.

**8.8.1 Assistance to Voucher Holders**

**[24 CFR §982.301(b)(11)]**

The LACDA has contracted with the Los Angeles County Housing Resources Center (Emphasys) to provide an internet-based property listing and search service for owners and participants. The LACDA includes in the briefing packet an information sheet on how to access the Los Angeles County Housing Resources Center (Emphasys).

**8.9 REMAINING MEMBER OF FAMILY – RETENTION OF VOUCHER**

To be considered the remaining member of the family, the person must have been previously approved by the LACDA to be living in the unit.

A live-in aide, by definition, is not a member of the family and will not be considered a remaining member of the family.

In order for a minor child to continue to receive assistance as a remaining family member:

1. The court has to have awarded an emancipated minor status to the minor, or
2. The LACDA has to have verified that social services and/or the Juvenile Court has arranged for another adult to be brought into the assisted unit to care for the child/children for an indefinite period.

A reduction in family size may require a reduction in the voucher size.

**8.10 FAMILY VOLUNTARILY RELINQUISHES HOUSING CHOICE VOUCHER**

The family may voluntarily relinquish their voucher at any time. In such cases, the LACDA will provide the owner of the property with a 30 calendar day's notice indicating that rental assistance will terminate based on the family's request. The family will become fully liable for the contract rent after 30 calendar days.

Generally, the LACDA will not reinstate a family once a request for voluntary termination has been received. However, as a reasonable accommodation, the LACDA will review requests for reinstatements received within 6 months and make a determination on a case-by-case basis.

If a family voluntarily relinquishes their voucher in lieu of facing termination, the LACDA will continue to seek to recover any monies that may be due to the LACDA as a result of misrepresentation or other breach of program regulations and will report the amount of debt owed to EIV.

## **Chapter 9:**

# **THE NEW CONTRACT PROCESS - REQUEST FOR TENANCY APPROVAL AND CONTRACT EXECUTION**

### **9.1 INTRODUCTION**

**[24 CFR §982.302 and 24 CFR §982.353(a)(b)]**

After families are issued a voucher, they may search for a unit anywhere within the LACDA's jurisdiction, or outside of the LACDA's jurisdiction if they qualify for portability. The family must find an eligible unit under the program rules, with an owner who is willing to enter into a Housing Assistance Payment (HAP) contract with the LACDA. This chapter defines the types of eligible housing, the LACDA's policies which pertain to lease requirements, owner disapproval, and the processing of Requests for Tenancy Approval (RTA).

### **9.2 REQUEST FOR TENANCY APPROVAL**

**[24 CFR §982.302 and §982.305]**

No RTA for a current participant will be processed, unless there is a copy of the lease termination notice for the currently assisted unit in the family's file.

Both the owner and the voucher holder must sign the RTA.

The LACDA will not permit the family to submit more than one RTA at a time.

The RTA will be approved if [24 CFR §982.302(d)]:

1. The unit is an eligible type of housing;
2. The unit passes an inspection (based on HUD's Housing Quality Standards and the LACDA's requirements, detailed in Chapter 10);
3. The rent is reasonable and affordable to the voucher holder;
4. The security deposit amount is approvable;
5. The proposed lease complies with HUD and the LACDA requirements, and state and local law.
6. The owner is approvable, and there are no conflicts of interest; and
7. All applicable lead-based paint disclosure requirements have been met. See Section 10.4 (Lead-Based Paint) for additional policies.

#### **9.2.1 Disapproval of RTA**

**[24 CFR §982.302(d); §982.305, and §982.306]**

If the LACDA determines that the RTA cannot be approved for any reason, the owner and the family will be notified in writing. The LACDA will instruct the owner and family of the steps that are necessary to approve the request.

The owner will be given 5 calendar days to submit an approvable RTA from the date of disapproval, unless the reason for the disapproval is the result of multiple failed inspections (three or more failed HQS inspections).

When, for any reason, an RTA is not approved, the LACDA will furnish another RTA form to the family along with the notice of disapproval, so that the family can continue to search for eligible housing.

The LACDA will suspend the term of the voucher while the RTA is being processed. Therefore, the length of time allotted to a family for the purpose of locating another unit will be based on the number of days left on the term of the voucher at the time the RTA was submitted to the LACDA [24 CFR §982.303(b)].

### **9.3 ELIGIBLE TYPES OF HOUSING**

#### **[24 CFR §982.352]**

The LACDA will approve the following types of housing in the voucher program:

- Single-family dwellings, including condos and townhouses.
- Manufactured homes where the family leases the mobile home and the pad [24 CFR §982.620(a)(2)].
- Manufactured homes where the family owns the mobile home and leases the pad [24 CFR §982.620(a)(3)].
- Multifamily dwellings (apartment buildings).
- Units owned but not subsidized by the LACDA (HUD-prescribed requirement).

A family can own a rental unit but cannot reside in it while being assisted, except in the cases involving manufactured homes when the family owns the mobile home and leases the pad. A family may lease in and have an interest in a cooperative housing development.

The LACDA may not permit a voucher holder to lease a unit that is receiving project-based Section 8 assistance or any duplicative rental subsidies.

#### **9.3.1 Special Requirements for Manufactured Owners Who Lease a Space**

##### **[24 CFR Part 982 Subpart M]**

**Lease and HAP Contract:** A designated HAP Contract (Form HUD-52642) and Tenancy Addendum (Form HUD-52642-A) are used for a manufactured homeowner who leases the space.

**Housing Assistance Payment:** The HAP for a manufactured home space under the HCV program is the lower of the family's payment standard minus the Total Tenant Payment (TTP) or the family's manufactured home space rent, including eligible housing expenses, minus the TTP.

**Eligible Housing Expenses:** A family's eligible housing expense will be the total of:

- a. The rent charged by the owner for the manufactured home space.

- b. Charges for maintenance and management of the space.
- c. The monthly payments made by the family to amortize the cost of purchasing the manufactured home, as established at the time of applying for financing from a lender. This includes any necessary insurance and property taxes that are part of the loan payment to the lender, provided that the monthly payments are still being made.

The amortization cost does not include increases in debt service or changes to the loan term due to refinancing after a home purchase. Debt service from installation charges may be included in monthly payments. If payments are ongoing, installation charges incurred before a family receives assistance can also be part of the amortization cost.

**Distribution of HAP:** If the LACDA's HAP exceeds the portion of the monthly rent due to the owner, the LACDA will pay the balance of the HAP to the family.

**Rent Reasonableness:** Initially, and at least annually thereafter, the LACDA must determine that the rent for the manufactured home space is reasonable based on rents for comparable manufactured home spaces.

### **9.3.2 Special Housing Types**

#### **[24 CFR §982 Subpart M]**

A Public Housing Agency may permit a family to use any of the special housing types below. However, the Public Housing Agency is not required to permit families receiving assistance to use these housing types, except that the Public Housing Agency must permit use of any special housing type if needed as a reasonable accommodation for a person with a disability.

In accordance with regulatory discretion, the LACDA will permit families to request tenancy to use any of the special housing types below. However, the housing type requested must meet the definition of the housing type and must pass Housing Quality Standards in accordance with the housing type's standards.

- **Congregate housing** - Housing intended for use by elderly individuals or individuals with disabilities. It contains a shared central kitchen and dining area and a private living area for the individual household of at least a living room, bedroom, and bathroom. Food service for residents must be provided. Elderly individuals or individuals with disabilities may live in congregate facilities. With PHA approval, a live-in aide may live in the congregate unit with a person with disabilities or an elderly person.
- **Group home** - A state-licensed facility intended for occupancy by elderly persons and/or persons with disabilities. The group home consists of residents' bedrooms, which can be shared by no more than two people, and a living room, kitchen, dining area, bathroom, and other appropriate social, recreational, or community space that may be shared with other residents. No more than 12 people may reside in a group home. Elderly individuals or individuals with disabilities may live in group homes. If approved by the PHA, a live-in aide may live in the group home with a person with disabilities. Except for live-in aides, all individuals living in a group home, whether assisted or not, must be elderly

or with disabilities. Individuals living in a group home must not require continual medical or nursing care.

- **Shared housing** - A single housing unit occupied by an assisted family and another resident or residents. The shared unit consists of both common space for use by the occupants of the unit, and a separate private space for each assisted family. The family and any LACDA approved live-in aide may reside in a unit with other individuals who are either:
  1. Not assisted under the tenant-based program,
  2. Assisted under the tenant-based program (If there are multiple assisted families in the shared unit, there must be separate HAP contracts for each assisted family.),
  3. The owner of the shared housing unit. (While the owner may reside in the shared unit, the owner may not be related to the family by blood or marriage and no assistance may be paid on behalf of the owner.)
- **Cooperative housing (excluding families that are not cooperative members)** – Housing owned by a nonprofit corporation or association, where a member of the corporation or association has the right to reside in a particular apartment and to participate in management of the housing. There are no program restrictions on who may occupy a cooperative housing unit.
- **Single Room Occupancy (SRO)** - An SRO unit is a unit that provides living and sleeping space for the exclusive use of the occupant but requires the occupant to share sanitary and/or food preparation facilities. There is no federal limitation on the number of SRO units in an SRO facility. An SRO unit may not be occupied by more than one person. Program regulations do not place any limit on the number of units in an SRO facility, although the size of a facility may be limited by local laws.
- **Homeownership** (if homeownership program is available)

### **9.3.3 Ineligible Housing Types**

**[24 CFR §982.352(a)]**

The LACDA will not approve:

- A unit occupied by the owner or by any person with an interest in the unit, other than manufactured homes described above.
- Nursing homes or other institutions that provide care.
- School dormitories and institutional housing.
- Structures that have not been properly converted. Owners will be required to provide finalized permits for all conversion work when the integrity and/or soundness of a structure is in question.
- Converted garages or other structures not intended to be living areas.
- Any other types of housing prohibited by HUD.

#### **9.4 RESTRICTIONS ON RENTING TO RELATIVES**

##### **[24 CFR §982.306(d)]**

In accordance with HUD policy, the family will not be allowed to rent a unit from an owner (including a principal or other interested party) who is the spouse, parent, child, grandparent, grandchild, and sister or brother of any member of the family. This restriction applies to all new contracts entered into after June 16, 1998.

Exceptions may be made to this policy as a reasonable accommodation for individuals with a disability. The LACDA will review all such requests on a case-by-case basis. The family will be required to provide documentation of disability and how the particular unit, owned by the relative, could benefit the disabled person. Owners must provide the current address of their residence (not a Post Office box). If families lease properties owned by relatives, the owner's current address will be compared to the subsidized unit's address.

Owners must provide an Employer Identification Number or Social Security number and may also be required to provide a copy of their driver's license or other photo identification. In addition, the LACDA may request a copy of the owner's current utility bills and a bank statement.

Failure to provide adequate documentation, within the specified time period (2 weeks), will be grounds for denial of such request.

In all cases, the owner of the assisted unit may not reside in the unit with the assisted household at any time during the term of the Housing Assistance Payment (HAP) Contract between the LACDA and the owner.

#### **9.5 LEASE AGREEMENTS**

##### **[24 CFR §982.308 - §982.309]**

The tenant and the owner must enter into a written lease for the unit. If the owner uses a standard lease form for rental to unassisted tenants in the locality or the premises, the lease must be in such standard form, plus the required HUD Tenancy Addendum, which the LACDA will provide to the owner.

The LACDA will review the lease for compliance with regulations. At minimum, the lease must specify the following information:

- The names of the owner and tenant(s);
- The address of the unit rented;
- The term of the lease including the initial term and any provisions for renewal;
- The amount of the monthly rent to owner; and
- A specification of which utilities and appliances will be supplied by the owner, and which by the family.

The lease must provide that the following are grounds for the owner to terminate tenancy [24 CFR §982.310(c)]:

- Drug-related criminal activity engaged in, on or near the premises by any tenant, household member, or guest, or such activity engaged in on the

premises by any other person under the tenant's control. In addition, the lease must provide that the owner may evict a family when the owner determines that a household member is illegally using a drug or when the owner determines that a pattern of illegal use of a drug interferes with the health, safety, or right to peaceful enjoyment of the premises by other residents.

- Any of the following types of criminal activity by a covered person:
  - Any criminal activity that threatens the health, safety, or right to peaceful enjoyment of the premises by other residents (including property management staff residing on the premises);
  - Any criminal activity that threatens the health, safety, or right to peaceful enjoyment of their residences by individuals residing in the immediate vicinity of the premises; or
  - Any violent criminal activity on or near the premises by a tenant, household member, or guest, or any such activity on the premises by any other person under the tenant's control.
- If a tenant is:
  - Fleeing to avoid prosecution, or custody, or confinement after conviction for a crime, or attempt to commit a crime, that is a felony under the laws of the place from which the individual flees, or
  - Violating a condition of probation or parole imposed under federal or state law.

When needed, the LACDA may require the owner and family to execute a lease rider to include changes to the rent amount, changes to utility responsibilities and/or effective date on the owner's original lease.

### **9.5.1 Separate Agreements**

#### **[24 CFR §982.510(c)]**

Separate agreements are not necessarily prohibited. Families and owners will be advised of the prohibition of illegal side payments for additional rent, or for items normally included in the rent of unassisted families, or for items not shown on the approved lease.

Owners and families may execute separate agreements for services (parking space), appliances (other than range and refrigerator), and other items that are not included in the lease if the agreement is in writing and approved by the LACDA.

Any appliances, services or other items which are routinely provided to unassisted families as part of the lease (such as air conditioning, dishwasher or garage) or are permanently installed in the unit, cannot be put under separate agreement and must be included in the lease. For there to be a separate agreement, the family must have the option of not utilizing the service, appliance, or other item.

The LACDA is not liable for unpaid charges for items covered by separate agreements and nonpayment of these agreements cannot be cause for eviction.

If the family and owner have come to a written agreement on the number of allowable charges for a specific item, so long as those charges are reasonable and not a substitute for higher rent, they will be allowed.

All agreements for special items or services must be attached to the lease approved by the LACDA. If agreements are entered into at a later date, they must be approved by the LACDA and attached to the lease.

**9.6 INITIAL INSPECTIONS**

See Chapter 10 (Housing Quality Standards and Inspections).

**9.7 RENT LIMITATIONS**

**[24 CFR §982.508]**

In accordance with HUD regulations, at the time the family initially receives assistance for a new unit, the family's share of the rent for the unit (includes utilities and the rent to the owner) may not exceed more than 40 percent of the family's adjusted monthly income if the gross rent for the unit exceeds the payment standard.

**9.8 RENT REASONABLENESS**

**[24 CFR §982.507(a)(1)]**

A rent reasonable test will be used to determine if the rent amount requested by the owner can be approved. The LACDA's rent reasonableness policy is covered in Chapter 11 (Setting Payment Standards and Determining Rent Reasonableness).

**9.9 WHEN A NEW CONTRACT IS REQUIRED FOR AN EXISTING TENANCY**

A new tenancy must be approved, and a new contract must be executed for an existing tenancy only under the following circumstances:

- If the owner or family request a new lease;
- If there are any changes in lease requirements governing tenant or owner responsibilities for utilities or appliances; or
- If there are changes to provisions governing the terms of the lease.

**9.10 INFORMATION TO OWNERS**

**[24 CFR §982.307(b)]**

The LACDA is required to provide prospective owners with the address of the applicant and the names and addresses of the current and previous owner if known. The LACDA will make an exception to this requirement if the family's whereabouts must be protected due to domestic abuse or witness protection. The LACDA will not release any other information regarding the family.

The LACDA will inform owners that it is the responsibility of the owner to determine the suitability of prospective tenants. Owners will be encouraged to screen applicants for rent payment history, eviction history, damage to units, and other factors related to the family's suitability as a tenant [24 CFR §982.307(a)].

Information regarding the LACDA's policy on this subject is included in the briefing packet and as an attachment to the Request for Tenancy Approval. This policy will apply uniformly to all families and owners.

In addition to the information listed above, the LACDA provides owner workshops at least twice a year. At the workshops, current and prospective owners are given an overview of the program and information about any significant program changes. There is also ample time for a question-and-answer session.

## **9.11 OWNER DISAPPROVAL**

### **[24 CFR §982.306(a) - §982.306(c)(4)]**

For purposes of this section, "owner" includes a principal or other interested party, and to disapprove an owner means to prevent the participation of an owner in LACDA programs.

The LACDA is required to disapprove an owner for the following reasons:

- HUD has informed the LACDA that the owner has been debarred, suspended, or subject to a limited denial of participation under 24 CFR Part 24.
- HUD has informed the LACDA that the federal government has instituted an administrative or judicial action against the owner for violation of the Fair Housing Act or other federal equal opportunity requirements and such action is pending.
- HUD has informed the LACDA that a court or administrative agency has determined that the owner violated the Fair Housing Act or other Federal equal opportunity requirements.
- If the owner is the spouse, parent, child, grandparent, grandchild, sister, or brother of any member of the family.

The LACDA also maintains the discretion to disapprove an owner for the reasons listed below. The LACDA may disapprove an owner for a period of 1 year for the following reasons:

- The owner has violated obligations under a Housing Assistance Payment contract under Section 8 of the 1937 Act (42 U.S.C. 1437f).
- The owner has a history or practice of non-compliance with the HQS for units leased under the tenant-based programs or with applicable housing standards for units leased with project-based Section 8 assistance or leased under any other federal housing program.
- The owner has a history or practice of renting units that fail to meet state or local housing codes;
- The owner has not obtained a business license for rental property for the assisted unit, where required by local ordinance; or

- The owner has not paid state or local real estate taxes, fines or assessments.

An owner may be disapproved for a period of up to 5 years for the following reasons:

- The owner has committed fraud, bribery, or any other corrupt or criminal act in connection with any federal housing program.
- The owner has a history or practice of failing to terminate tenancy of Section 8-assisted tenants, or tenants assisted under any other federally assisted housing program, for activity engaged in by the tenant, any member of the household, guest, or another person under the control of any member of the household that:
  - Threatens the right to peaceful enjoyment of the premises by other residents;
  - Threatens the health or safety of other residents, employees of the LACDA, or owner employees or other individuals engaged in management of the housing;
  - Threatens the health or safety of, or the right to peaceful enjoyment of their residences, by persons residing in the immediate vicinity of the premises; or commits drug related criminal activity or violent criminal activity.

An owner may be disapproved for a period of up to 10 years for the following reason:

- The owner has engaged in any drug-related criminal activity or any violent criminal activity.

If an owner disagrees with the LACDA's disapproval, the owner may appeal the decision in writing within 10 calendar days from receiving the LACDA's decision. A supervisor will review the appeal and prepare a written decision within 30 calendar days after receiving the request. The decision of the supervisor is final.

## **9.12 CHANGE IN TOTAL TENANT PAYMENT (TTP) PRIOR TO HAP EFFECTIVE DATE**

When the family reports changes in factors that will affect the Total Tenant Payment (TTP) prior to the effective date of the HAP contract, the information will be verified and the TTP will be recalculated. If the family does not report any change, the LACDA need not obtain new verifications before the HAP contract becomes effective.

If the contract is for a participant move and is processed as an annual reexamination, the family's income and other circumstances will be re-verified.

## **9.13 HAP CONTRACT EXECUTION PROCESS**

### **[24 CFR §982.305(c)]**

Provided that the unit passes inspection, the LACDA will prepare the HAP contract for execution. The family and the owner will execute the lease agreement, and the

owner and the LACDA will execute the HAP contract. Copies of the documents will be furnished to the parties who signed the respective documents.

The LACDA makes every effort to execute the HAP contract before the commencement of the lease term. The HAP contract may not be executed more than 60 calendar days after commencement of the lease term and no payments will be made until the contract is executed.

The following LACDA representatives are authorized to execute a contract on behalf of the LACDA: Housing Assistance Division Director, Assistant Director, Managers, Assistant Managers, and Supervisors.

Owners must provide the current address of their residence (not a Post Office box). If families lease properties owned by relatives, the owner's current address will be compared to the subsidized unit's address.

Owners must provide an Employer Identification number or Social Security number and may also be required to provide a copy of their driver's license or other photo identification.

#### **9.13.1 Extenuating Circumstances**

In extenuating circumstances that prevent or prevented the LACDA from meeting the 60-day HAP contract execution deadline, the LACDA may submit a request for an extension to the HUD field office. The request will be submitted no later than two weeks after the 60-day deadline and will include an explanation of the extenuating circumstances and any supporting documentation. HUD will determine if the extension request is approved at its sole discretion.

#### **9.13.2 Determining the Contract Effective Date**

The effective date and the amount of the rental payment are communicated in writing to both the owner and family.

The lease and the terms of the tenancy are made effective at the LACDA's approval only. The earliest date the LACDA may approve the lease effective date is the date the unit passed HQS inspection.

The HAP contract is drafted after the LACDA approved lease is received and is effective in accordance with the lease effective date.

#### **9.13.3 Prorating First Month's Rent**

When the effective date of a new contract begins on a day other than the first of the month, the LACDA will determine a prorated contract rent amount. For consistency with rental industry standards, prorated amounts will be calculated by using the actual days in the month to establish a daily rate.

#### **9.13.4 Proof of Ownership**

The LACDA will use property profile information obtained from a private vendor to confirm ownership of the assisted unit. If third-party information cannot confirm ownership of the unit, the LACDA may also request a recorded deed or closing escrow statement to prove ownership.

Owners may also be required to provide a copy of a business rental license if the assisted unit is in a city where one is required.

Any requested information must be provided prior to execution of the HAP contract. Failure to provide the requested information within a reasonable period of time, generally not more than 30 calendar days, will result in a cancellation of the RTA.

#### **9.13.5 Establishing Eligibility to Execute HAP Contract and Related Documents**

In cases involving multiple owners, the LACDA will accept the signature of a designee on all contracts and related paperwork if all the legal owners have jointly agreed on the person/persons who may act on their behalf.

In cases involving multiple owners, the LACDA requires that all individuals who have interest in the property sign or provide a letter of authorization, giving one or more parties the right to sign contracts and other program documents.

In cases involving a partnership or corporation, the LACDA may request the partnership agreement or incorporation documents to determine who is designated to act on the group's behalf. In cases involving a trust, the LACDA may request a copy of the trust in order to verify the names of the trustees.

The LACDA will not execute a HAP Contract until all proper authorization, from all appropriate parties, has been provided. Failure to provide information needed to establish authority to execute the HAP contract within a reasonable time, generally 30 calendar days, may result in a cancellation of the RTA.

Once the LACDA has established proper authorization, the letter of authorization will remain valid for the specified unit or building as detailed in the letter until it is terminated by the owner or replaced by a different authorization.

#### **9.13.6 Payment to the Owner**

##### **[24 CFR §982.311(a)]**

Once the HAP contract is executed, the LACDA begins processing payments to the owner. Since the LACDA's sole method of payment to owners is direct deposit, new and existing owners must provide the necessary information for enrollment in the LACDA's direct deposit program. Payments will be made via direct deposit by the first of each month. Owners must notify the LACDA of any missing payments as soon as possible. The LACDA will accept report of missing payment both via a telephone call and/or in writing.

### **9.14 CHANGE IN OWNERSHIP**

A change in ownership does not require execution of a new contract.

The LACDA will process a change of ownership only upon the written request of the previous or new owner and only if accompanied by a copy of the escrow statement or other documents showing the transfer of title and the Employee Identification Number or Social Security number of the new owner.

In order to complete a change of ownership, the new owner must complete an Assumptions of Obligations and Benefits contract. This form obligates the new owner to the HAP contract. The LACDA will provide this document once a written request for a change is received.

When the assumption contract has been executed, the LACDA will send a copy of it, along with a copy of the original HAP contract and lease, to the new owner.

If a change in ownership occurs due to a foreclosure, the new owner automatically assumes the obligations of the HAP contract. The LACDA will make every attempt to ascertain the identity of the new owner and obtain any documents necessary to release payments to the appropriate party.

New owners are subject to the LACDA's owner disapproval policy as detailed in Section 9.11 of this chapter.

## Chapter 10: HOUSING QUALITY STANDARDS AND INSPECTIONS

### 10.1 INTRODUCTION

HUD requires that all units receiving housing assistance meet HUD's Housing Quality Standards (HQS) and permits the LACDA to establish additional requirements. The term "HQS" in this plan refers to the combination of both HUD and the LACDA's discretionary policies. HUD requires that HQS inspections be conducted before the Housing Assistance Payments (HAP) Contract is signed and at least biennially during the term of the HAP Contract. This chapter explains the different types of inspections, the responsibilities of the owner and family, and the consequences for noncompliance with HQS by the owner and family.

### 10.2 TYPES OF INSPECTIONS

#### **[24 CFR §982.405]**

The LACDA conducts the following inspections, which will be explained in greater detail throughout the chapter:

- **New Contracts Inspections**: A unit must pass New Contract (initial) HQS inspection before the LACDA enters into a HAP Contract with the owner.
- **Biennial Inspections**: HUD requires that the LACDA inspect each unit under lease at least biennially to confirm that the unit still meets HQS.
- **Inspections at Other Times as Needed**:
  - **Interim Inspection**: HQS inspection conducted upon request of the owner, family, or agency.
  - **Emergency Inspection**: HQS inspection conducted for life-threatening violations.

**Extraordinary Circumstances**: In extraordinary circumstances, such as when a unit is located in a presidentially declared disaster area, the LACDA may request an exception from HUD regarding the 24-hour inspection requirement for life-threatening deficiencies and the 15-day inspection requirement for non-life-threatening deficiencies, until an inspection can be conducted [24 CFR 982.405(d)(3)].

- **Quality Control Inspection**: The LACDA is required to conduct supervisor quality control HQS inspections.

### 10.3 HOUSING QUALITY STANDARDS (HQS)

#### **[24 CFR §982.401]**

HQS is the minimum quality standards set forth by HUD for tenant-based programs. These standards are in place to ensure that assisted housing is decent, safe, and sanitary. All program housing must meet the HQS performance

requirements both at commencement of assisted occupancy, and throughout the assisted tenancy.

Efforts will be made at all times to encourage owners to provide housing above the HQS minimum standards.

HQS applies to the building and premises, as well as the unit. In order for a unit to pass an HQS inspection, the following standards must be met.

### **10.3.1 Unit Space and Size**

**[24 CFR §982.401(d)(2)(i)]**

At minimum, a living room, kitchen area, and bathroom must be located in the unit.

### **10.3.2 Living Room / Sleeping Room**

**[24 CFR §982.401(d)(2)(ii)], [24 CFR §982.401(h)(2)(iv)], [24 CFR §982.401(f)]**

- The dwelling unit must have at least one bedroom or living/sleeping room for each two persons. Children of opposite sex, other than very young children, may not be required to occupy the same bedroom or living/sleeping room.
- There must be at least one window in the living room and in each sleeping room. If the window is designed to be openable, the window must open and close properly and be large enough to provide emergency egress.
- The living room and each bedroom must have at least two electrical outlets in proper operating condition. Permanent overhead or wall-mounted light fixtures may count as one of the required electrical outlets.
- Bedrooms must also have a built-in closet or wardrobe, be located within the unit (e.g., no garages), and be private (have a closing door separating it from the rest of the unit). Bedrooms should also be finished in a quality similar to other bedrooms in the home.
- In cases where an owner has modified the rental unit without obtaining the proper city and/or county building permits, the LACDA may rely on the legal property description for the purposes of negotiating the rent and determining how many actual sleeping rooms are in the rental unit.

### **10.3.3 Sanitary Facilities (Bathroom)**

**[24 CFR §982.401(b)], [24 CFR §982.401(h)(2)(iii)], [24 CFR §982.401(f)(2)(ii)]**

- The bathroom must be located in a separate private room and contain a working flush toilet.
- Bathroom areas must have one openable window or other adequate exhaust ventilation.
- The unit must have a fixed sink. The bathroom sink may be located separately from other bathroom facilities, but the kitchen sink may not also be used for the bathroom sink.

- The unit must have a shower or tub in proper operating condition, with hot and cold running water. The shower or tub need not be in the same room with other bathroom facilities, but they must be private.
- All walls in a tub or shower area must be covered with ceramic tile or other material that is impervious to water to prevent water damage and deterioration.
- Sinks and commode water lines must have shut off valves, unless faucets are wall mounted. All sinks in the unit must have functioning stoppers.
- The bathroom must have a permanent ceiling or wall light fixture in proper operating condition.
- All bathrooms in the unit must be in proper operating condition.

#### **10.3.4 Food Preparation (Kitchen)**

##### **[24 CFR §982.401(c)], [24 CFR §982.401(f)(2)(ii)]**

- The dwelling unit must have suitable space and equipment to store, prepare, and serve foods in a sanitary manner (i.e., kitchen).
- The dwelling unit must have an oven, and a stove or range, and a refrigerator of appropriate size for the family. All the equipment must be in proper operating condition. The stove and oven must be properly hooked up to the gas, with no hazards present. The refrigerator must be able to maintain a temperature sufficient to keep food from spoiling over a reasonable period of time. The equipment may be supplied by either the owner or the family.
- A microwave oven may be substituted for a tenant-supplied oven and stove or range. A microwave oven may be substituted for an owner-supplied oven and stove or range if the tenant agrees, and microwave ovens are furnished instead of an oven and stove or range to both subsidized and unsubsidized tenants in the building or premises.
- The kitchen area must have a permanent ceiling or wall light fixture in proper operating condition, and at least one electrical outlet in proper operating condition.
- The dwelling unit must have a permanently attached kitchen sink in proper operating condition, with a sink trap, and hot and cold running water. The sink must have a shut off valve, unless faucets are wall-mounted, and must drain into an approvable public or private system. All sinks in the unit must have functioning stoppers.
- There must be facilities and services for the sanitary disposal of food waste and refuse, including temporary storage facilities where necessary (e.g., garbage cans).

#### **10.3.5 Ceilings, Walls, Floors and Building Exterior**

##### **[24 CFR §982.401(g)]**

- The unit must be structurally sound. The structure must not present any threat to the health and safety of the occupants and must protect the occupants from the environment.

- Ceilings, walls, floors, and fences must not have any serious defects such as severe bulging or leaning, large holes, loose surface materials, severe buckling, missing parts, or other serious damage.
- Wood floors must be sanded to a smooth surface and sealed. Any loose or warped boards must be re-secured and made level. If the boards cannot be leveled, they must be replaced.
- The exterior wall structure and surface must not have any serious defects such as serious leaning, buckling, sagging, large holes, or defects that may result in air infiltration or vermin infestation.
- In areas where plaster or drywall is sagging, severely cracked, bulging or leaning, or has large holes, it must be repaired or replaced.
- The condition and equipment of interior and exterior stairs, halls, porches, walkways, etc., must not present a danger of tripping and falling. For example, broken or missing steps or loose boards are unacceptable. Stairs with four or more steps must have a secure handrail.
- A porch or balcony at least 30 inches or more from the ground must have secure railings.
- The roof must be structurally sound and weather tight and must not have any serious defects, such as buckling or sagging. Gutters, downspouts and soffits must not show signs of serious decay and must not allow entry of significant air or water into the interior of the structure.
- The chimney must not be seriously leaning or showing evidence of significant disintegration.
- Building foundations must not have any severe structural defects that may create a hazardous condition, including allowing significant entry of ground water.

### **10.3.6 Windows**

#### **[24 CFR §982.401(f)(1)(ii)], [24 CFR §982.401(d)(2)(iii)]**

- All window sashes must be in good condition, solid, intact, and fit properly in the window frame. Damaged or deteriorated sashes must be replaced.
- Windows must be weather-stripped as needed to ensure a weather tight seal.
- Windows must not have missing or broken-out panes, or panes that are dangerously loose or have large cracks.
- If window security bars or security screens are present on emergency exit windows, they must be equipped with a quick release system. The owner is responsible for ensuring that the family is instructed on the use of the system.
- Dwelling unit windows that are accessible from the outside, such as basement, first floor, and fire escape windows, must be lockable (such as window units with sash pins or sash locks, and combination windows with latches).
- Windows that are nailed shut are acceptable only if these windows are not needed for ventilation or as an alternate exit in case of fire.

### **10.3.7 Doors and Unit Access**

**[24 CFR §982.401(d)(2)(iv)], [24 CFR §982.401(k)]**

- All exterior doors must be solid core and weather tight to avoid any air or water infiltration, have no holes, and have all trim intact.
- All interior doors must have no holes, have all trim intact, and be openable without the use of a key.
- All exterior doors must have dead bolt locks.
- The unit must be able to be used and maintained without unauthorized use of other private properties. The building must provide an alternate means of exit in case of fire (such as fire stairs or egress through windows).

### **10.3.8 Thermal Environment**

**[24 CFR §982.401(e)]**

There must be a safe system for heating the unit, in proper operating condition. The heating unit must be affixed to the unit and be able to provide adequate heat, either directly or indirectly, to each room. The dwelling unit must not contain unvented room heaters that burn gas, oil, or kerosene. Electric heaters are acceptable, whereas portable heaters are not acceptable. Heating equipment also must not pose other unsafe conditions, such as improper flue connection or installation of equipment.

### **10.3.9 Electricity**

**[24 CFR §982.401(f)]**

The unit must not contain any electrical hazards, such as exposed electrical connections; broken, non-insulated or frayed wiring; improper types of wiring, connections or insulation, or wires lying in or near standing water or other hazardous locations.

The improper installation of a three-pronged outlet is considered an electrical hazard. All three-pronged outlets must be properly grounded or protected by a ground fault circuit interrupter (GFCI) outlet. An outlet is considered protected by a GFCI outlet if:

- The outlet is a GFCI outlet; or
- A GFCI outlet is located up stream on the circuit from the ungrounded, three-pronged outlet and will shut off current to the ungrounded outlet in case of a surge in the electrical current; or
- The ungrounded, three-pronged outlet is located on a GFCI circuit.

### **10.3.10 Smoke Detectors/Carbon Monoxide Detectors**

**[24 CFR §982.401(n)]**

#### **Smoke Detectors**

- Each assisted unit must be equipped with at least one properly working battery-operated or hard-wired smoke detector on each level of the unit.
- Whenever possible, smoke detectors should be installed in a hallway adjacent to a bedroom.
- If an assisted unit is occupied by a household with hearing-impaired individuals, a permanently installed smoke detector designed for people with hearing-impaired persons must be located in each bedroom that is occupied by a hearing-impaired person.
- Effective December 29, 2024, all assisted dwelling units undergoing an initial or interim inspection must have a qualifying smoke alarm installed in accordance with the NFPA 72.

A qualifying smoke alarm is defined as a smoke alarm that:

1. Is hard-wired, or
2. Uses a 10-year non-rechargeable, nonreplaceable primary batteries and:
  - a. Is sealed.
  - b. Is tamper resistant.
  - c. Contains silencing means; and
  - d. Provides notification for persons with hearing loss as required by the NFPA Standard 72, or any successor standard.

In the case of a dwelling unit built or substantially rehabilitated *after* the effective date of December 29, 2024, the dwelling unit's smoke alarms must be hard-wired.

### **Carbon Monoxide Detectors**

In order to reflect California law (The Carbon Monoxide Poisoning Prevention Act of 2010), the LACDA requires carbon monoxide detectors be installed as follows: Any unit having a fossil fuel burning heater or appliance, fireplace, or an attached garage must have a carbon monoxide detector installed. (A fossil fuel is coal, kerosene, oil, wood, fuel gases, and other petroleum or hydrocarbon products that emit carbon monoxide as a byproduct of combustion)

Placement of the device should be as follows:

- There must be one carbon monoxide detector centrally located outside of each separate sleeping area in the immediate vicinity of the bedrooms, and each detector shall be located on the wall or ceiling. Any other location is only acceptable if specified in the installation instructions that accompany the device. If there are distinctly separate sleeping areas in the unit, there must be a detector for each sleeping area.
- There must be at least one Carbon Monoxide detector on each level of the unit.
- Carbon Monoxide detectors cannot be installed directly above, or next to a fuel burning appliance.

- If the device is a combination carbon monoxide device and smoke detector, then the combined device must emit an alarm or voice warning in a manner that clearly differentiates between a carbon monoxide alarm warning and a smoke detector warning.

Units that do not meet the requirements outlined above will fail the Housing Quality Standards (HQS) inspection and will be subject to rejection or abatement in accordance with HUD regulations and LACDA policy.

#### **10.3.11 Neighborhood and Site Conditions; Sanitation and Environment**

##### **[24 CFR §982.401(l)], [24 CFR §982.401(m)]**

- The site and neighborhood may not be subject to serious adverse environmental conditions, natural, or manmade. These can include dangerous walks or steps; instability; flooding, poor drainage, septic tank back-ups or sewage hazards; mudslides; abnormal air pollution, smoke or dust; excessive noise, vibration or vehicular traffic; excessive accumulations of trash; vermin or rodent infestation; or fire hazards.
- Adequate covered facilities for the disposal of rubbish must be present at the site, such as covered dumpsters and other covered refuse containers approvable by the local health and sanitation department.
- The unit and its equipment must be in sanitary condition, and free from vermin and rodent infestation.

#### **10.3.12 Elevators**

##### **[24 CFR §982.401 (g)(2)(v)]**

All elevators in a building must be operating safely. The LACDA requires all elevators to have a current permit issued by the State of California. If the permit is expired and the owner can provide documentation from the State of California that the application is being processed, the LACDA will pass the elevator in accordance with Section 7302 of the Labor Code as long as there are no obvious safety concerns present.

#### **10.3.13 Manufactured Homes/Mobile Homes HQS Requirements**

##### **[24 CFR 982.621]**

In addition to meeting all other HQS requirements, a mobile home must meet the following requirements:

- It must be situated on a site that is stable and free from hazards such as sliding or wind damage.
- Must be appropriately anchored by a tie down device that distributes and transfers the load imposed by the unit to appropriate ground anchors to resist wind overturning and sliding. Alternative types of anchors, beams and foundation bolts are permissible if they meet manufacturer's specifications.
- One operable smoke detector is required.

---

### **10.3.14 Additional Housing Quality Standards**

#### **[24 CFR §982.401(a)(4)]**

The LACDA is authorized to enhance HQS, provided that by doing so the LACDA does not overly restrict the number of units available for leasing. The enhancements adopted by the LACDA are meant to ensure that assisted units are safe in relation to other units rented throughout Los Angeles County.

In addition to the HQS identified by HUD, all assisted units must also be in compliance with the following items derived from California and Los Angeles County Code, in order to pass an HQS inspection.

- **Double Cylinder Locks**: Double-keyed deadbolts, or any other lock requiring special knowledge or a tool to open, are prohibited in a residential unit. All doors that provide an exit from the residence must be openable from the inside without the need of a key or any other special knowledge, effort or tool.
- **Swimming Pools**: Swimming pools in multifamily structures must be enclosed by a gate from 48 inches to 60 inches tall. The gate must be self-closing with a self-closing latch and a protected panel must surround the latch.
- **Hot Water Heater**: Water heaters must have a temperature pressure relief valve and discharge line (directed toward the floor or outside of the living area) as a safeguard against build-up of steam if the water heater malfunctions. Gas or oil-fired water heaters must be vented into a properly installed chimney or flue leading outside. Electric water heaters do not require venting. A gas water heater must have a safety divider or shield if it is located in a bedroom or other living area.

If the water heater is located in a large apartment building (at least 25 units) and the unit is inaccessible, staff must check inconclusive on the inspection report. The item may be cleared if the owner or manager can provide documentation to show it has passed a local inspection.

- **Earthquake Straps for Water Heaters**: Must be secured for seismic stability. All water heaters must be braced, anchored or strapped to prevent falling or movement during an earthquake.
- **Garages**: Garages, whether attached or detached, must be accessible. Garages are not to be used as a living space.

### **10.3.15 Single Room Occupancy (SRO) HQS Requirements**

#### **[24 CFR §982.605]**

The HQS requirements outline in the above sections (specifically in §982.401) apply to SRO housing. However, the standards in this section apply in place of §982.401(b) (sanitary facilities), §982.401(c) (food preparation and refuse disposal), and §982.401(d) (space and security). Since the SRO units will not house children, the Housing Quality Standards in §982.401(j), concerning lead-based paint, do not apply to SRO housing.

- ❑ **Access:** Access doors to the SRO unit must have working locks for privacy. The occupant must be able to access the unit without going through any other unit. Each unit must have immediate access to two or more approved means of exit for the building, appropriately marked and leading to a safe and open space at ground level.
- ❑ **Fire Safety:** All SRO facilities must have a sprinkler system that protects major spaces. "Major spaces" are defined as hallways and common areas. SROs must also have hard-wired smoke detectors.
- ❑ **Sanitary Facilities:** At least one flush toilet that can be used in privacy, a lavatory basin, a bathtub or shower in proper operating condition must be provided for each six persons (or fewer) residing in the SRO facility. If the SRO units are leased only to men, flush urinals may be substituted for up to one half of the required number of toilets.

Sanitary facilities must be reasonable accessible from a common hall or passageway and may not be located more than one floor above the SRO unit. They may not be located below grade unless the SRO units are located on that level.

- ❑ **Space and Security:** An SRO unit must contain at least 110 square feet of floor space, and at least four-square feet of closet space with an unobstructed height of at least five feet, for use by the occupant. If the closet space is less than four square feet, the habitable floor space in the SRO unit must be increased by the amount of the deficiency. Exterior doors and windows accessible from the outside the SRO unit must be lockable.

#### **10.3.16 Serious Deficiencies**

Assisted units must meet all HQS performance requirements in order to pass an inspection. The LACDA has compiled the following list of specific conditions that are considered serious deficiencies that may cause a unit to fail an inspection. This list assists inspectors in making a determination regarding the condition of an assisted unit; however, deficiencies are not limited to this list:

1. No TPR/Drainpipe on water heater
2. Clogged toilets/sinks/wash basins/bathtubs
3. Severely worn or torn floor coverings posing a tripping hazard
4. Evidence of vermin infestation (fleas, roaches, termites, mice, and rats) in and around assisted unit
5. Excessive rubbish or debris in or around the assisted unit
6. Heavy accumulation of brush, weeds or tree branches near or extending over the assisted unit or in the power lines
7. Uneven, broken or lifting exterior walkways or driveways that pose a tripping hazard
8. Missing, loose or broken handrails, guardrails or balusters
9. Lack of windows in living or sleeping rooms
10. Lack of exterior ventilation (window or exhaust fan) in bathroom

11. Flammable or combustible materials stored near water heater or furnace
12. Missing or inoperable security bar release mechanism on bedroom windows
13. Evidence of sewage in or around assisted unit
14. Exterior doors or windows that do not open, close or lock properly
15. Exterior doors or windows that do not close and form a reasonably weather tight seal
16. Inoperable refrigerator or stove/range/oven
17. Hot water heaters not seismically restrained

#### **10.4 LEAD-BASED PAINT**

##### **[24 CFR §982.401(j)]**

The LACDA's rental assistance programs are subject to the requirements of the Lead-Based Paint Poisoning Prevention Act and the Residential Lead-Based Paint Hazard Reduction Act of 1992. Applicable regulations are detailed in 24 CFR §35.

The LACDA will be responsible for the collection of LBP disclosure information; conducting Visual Assessment inspections; assuring that Clearance Examinations are conducted; collect data regarding Elevated Blood Lead Level (EBLL) cases, and informing owners of their responsibilities.

##### **10.4.1 Disclosure**

###### **[24 CFR §35(Subpart A)]**

Owners of units built before 1978 are required to disclose to lessees all available information about the presence of lead-based paint or lead-based paint hazards and provide any available record or reports pertaining to the presence of lead-based paint or lead-based paint hazards, before the lease is enacted.

Lessees must also receive a copy of the lead hazard information pamphlet, "Protect Your Family from Lead in Your Home."

For all new contracts, the LACDA will require owners to certify on the RTA that they have met all applicable lead-based paint disclosure requirements. If applicable, the LACDA will require owners to submit a copy of the lead-based paint disclosure statement, and any inspection reports.

The LACDA will include a sample lead-based paint disclosure form and a lead hazard information pamphlet in voucher issuance packets for participants. Materials will be made available directly to owners upon request.

For units built before 1978, the LACDA will not approve an owner lease without receiving all applicable lead-based paint disclosure information.

##### **10.4.2 Lead-Based Paint Visual Assessment**

###### **[24 CFR §35.1215]**

The LACDA is required to conduct lead-based paint visual assessments for all units built prior to 1978 that house or will house a child or children under 6 years of age, at the time of the new contract inspection and at re-inspections.

The LACDA inspectors conducting lead-based paint visual assessments will be trained according to HUD requirements.

The purpose of the visual assessment is to identify any deteriorated paint. Deteriorated paint is paint that is peeling, chipping, chalking or cracking, or any paint or coating located on an interior or exterior surface or fixture that is otherwise damaged or separated from the substrate. Inspectors will check the condition of painted surfaces, and if any deteriorated paint is found in the course of the inspection, the unit will fail the lead-based paint visual assessment. Owners must perform paint stabilization on all deteriorated paint surfaces regardless of the size of the deteriorated surface. If the amount of deteriorated paint is below the de minimis level, the owner must perform paint stabilization but is not required to perform lead-safe work practices and clearance. The de minimis thresholds are defined as 20 sq. ft. (2 sq. meters) on exterior surfaces; 2 sq. ft. (0.2 sq. meters) in any one interior room or space; or 10% of the total surface area on an interior or exterior type of component with a small surface area (such as windowsills, baseboards, and trims).

If deteriorated paint exceeds the de minimis thresholds as defined by HUD, the unit will fail the lead-based paint visual assessment and require stabilization and a clearance report

#### **10.4.3 Stabilization and Clearance**

##### **[24 CFR §35.1215]**

Owners of units that fail the lead-based paint visual assessment above de minimis levels will be required to stabilize deteriorated paint in order for the unit to pass, using lead-safe work practices.

The LACDA will send a letter to owners of failed units that provides guidance on stabilizing paint and other required activities. Owners will have 30 calendar days from the letter date to complete the following:

- **Repair the deteriorated paint.** Work must be performed by certified lead workers using lead-safe work practices. The LACDA will provide owners with resources and information on meeting these guidelines.
- **Obtain a Clearance Report.** A contractor certified by the Environmental Protection Agency (EPA) must inspect the unit and prepare a Clearance Report summarizing the work completed and the inspection results.
- **Complete the LACDA's Lead-Based Paint Owner Certification form.** The owner must certify that all applicable requirements have been met.
- **Submit Clearance Report and Certification to the LACDA.** The LACDA will accept paperwork by mail, fax, and hand delivery.

The owner is responsible for informing tenants of all lead hazard reduction work and evaluations, in a manner consistent with HUD regulations.

If the unit has been previously certified free of lead-based paint by a certified inspector, the owner may submit a copy of the inspector's report, along with the certification form, to the LACDA.

The LACDA will review the Clearance Report and certification form for completeness. The Clearance Report must contain all information required by HUD. If the Clearance Report passes, the unit will receive a pass on the visual assessment; no further inspection visit is required.

On new contracts inspections, the passing Clearance Report and valid certification form must be received by the LACDA before the LACDA can enter into a HAP Contract with the owner. If this does not take place within 30 calendar days, the LACDA will cancel the RTA.

For biennial inspections, if the owner fails to submit the passing Clearance Report and valid certification form within 30 calendar days, the Housing Assistance Payments (HAP) will be placed on hold (abated) for the unit and the participant will be issued a voucher. The owner will have an additional 60 calendar days to obtain and submit a valid Clearance Report before the HAP Contract is terminated. See Section 10.11.1 for details on abatement.

Assisted Housing's Director will review reasonable cause requests for extension. Extension requests must be submitted in writing within the first 30 calendar days of the failed lead-based paint visual assessment. An extension shall not extend beyond 90 days after the date of notification to the owner of the results of the visual assessment. If an extension is approved, the HAP will not be abated during this extension period. Reasonable cause circumstances include prohibitive weather conditions, financial hardship, and rehabilitation in progress.

#### **10.4.4 Children with Environmental Intervention Blood Lead Levels**

##### **[24 CFR §35.1225]**

On a quarterly basis, the Division will send the Los Angeles County Department of Health Services Childhood Lead Poisoning Prevention (CLPP) Program the addresses of assisted families with children under the age of 6. CLPP Program staff will check the addresses for matches with cases of identified Environmental Blood Lead Levels (EBLL). If a match is found, CLPP Program staff will conduct an Environmental Investigation of the occupied unit and forward a report to the Division. An Environmental Investigation is a comprehensive evaluation for LBP hazards that goes beyond the visual assessment component including paint testing, and dust and soil sampling. The Environmental Investigation Report identifies lead hazards and appropriate lead hazard reduction methods.

A copy of the Environmental Investigation Report must immediately be forwarded to the participating owner once received by the Division. The owner must post a Notice of Lead Hazard Evaluation within 15 calendar days and complete lead hazard reduction and clearance activities as advised in the Report within 30 calendar days.

The LACDA must also conduct a Risk Assessment of other assisted units at the same property that house children under the age of 6, within 30 calendar days of receiving the Environmental Investigation Report, if lead hazards were identified.

The LACDA is not allowed to assist any other participant in the unit until the owner complies with the Report.

If informed about an EBLL case from a source other than the CLPP Program, the Division must submit the information to the CLPP Program within 5 calendar days. The CLPP Program will conduct an Environmental Investigation of the occupied unit if required.

## **10.5 INSPECTIONS SCHEDULE**

Inspections are conducted on business days between the hours of 7:00 a.m. and 5:00 p.m. An individual over 18 years of age must be present to allow entry for the inspector.

## **10.6 NEW CONTRACT (INITIAL) INSPECTIONS**

### **[24 CFR §982.305(b)(2)(i)(B)]**

Under normal circumstances, a new contract (initial) inspection is conducted within 15 calendar days following the receipt of a Request for Tenancy Approval. The new contract inspection is conducted in order to:

1. Determine if the unit, including common areas, meets housing quality standards.
2. Document the current condition of the unit. This will serve as the basis to evaluate the future condition of the unit, i.e. excessive wear and tear.

### **10.6.1 When HQS Deficiencies Must Be Corrected**

If the unit fails the initial inspection, the unit will be scheduled for a follow-up inspection within 10 calendar days. The owner will be given 30 calendar days to correct the deficiencies. The owner can request an inspection sooner if repairs have been made prior to the scheduled follow-up inspection date.

If the time period given by the LACDA to correct the deficiencies has lapsed, or the maximum of three failed inspections has occurred, the family must select another unit.

The LACDA will not enter into a HAP Contract with the owner until the unit passes the inspection. However, the family may already be in the unit when the new contract inspection is conducted. If the family lives in the unit at the time of the new contract inspection, they are responsible for meeting their HQS obligations. See Section 10.8 for details of the family's HQS obligations.

## **10.7 BIENNIAL AND INTERIM INSPECTIONS**

### **[24 CFR §982.405]**

### **10.7.1 Biennial Inspections**

HUD requires each unit under HAP contract have a biennial Housing Quality Standards inspection no more than 24 months after the most recent initial or biennial inspection.

As permitted by HUD and at the LACDA's discretion, the LACDA may meet its biennial inspection requirement by accepting a comparable passed inspection performed under the HOME Investment Partnership (HOME) program or housing financed using Low Income Housing Tax Credits (LIHTCs), or inspections performed by HUD.

As stated in the family obligations, the family must allow the LACDA to inspect the unit at reasonable times and after reasonable notice. The LACDA will notify the family and/or owner of the date and time of the scheduled inspection appointment in writing at least 15 calendar days prior to the inspection.

Appointments may be rescheduled before the scheduled inspection as long as the new inspection date allows the LACDA to remain in compliance with HUD HQS requirements. Inspections may be rescheduled by phone, fax or email.

If the family misses the inspection appointment and fails to contact the LACDA to reschedule the inspection beforehand, the LACDA will consider the family to be in violation of the Certified Statement of Family Obligation agreement and will initiate termination procedures in accordance with the LACDA's policy for proposed termination. If the family missed the inspection appointment for good cause, including but not limited to, illness, injury, or hospitalization, the LACDA may consider, on a case-by-case basis, evidence to support the reason for the missed appointment before proposing termination. If it is the first time the family missed an inspection appointment without good cause, a one-time counseling session will be conducted with the family in lieu of proposing termination.

#### **10.7.2 Interim Inspections**

Interim inspections are conducted at the request of the owner, family, or agency (usually as a result of a violation of HQS or violation of the lease). Interim inspections may be scheduled and conducted at any time of the year.

### **10.8 FAILED INSPECTIONS: DETERMINATION OF RESPONSIBILITY**

**[24 CFR §982.404]**

#### **10.8.1 Family Responsibilities**

The family is responsible for correcting the following HQS deficiencies:

- Family-paid utilities not in service.
- Failure to provide or maintain appliances owned by the family.
- Damages to the unit or premises caused by a household member or guest beyond normal wear and tear those results in a breach of the HQS.
  - "Normal wear and tear" are defined as items that could be charged against the family's security deposit under state law or court practice.

#### **10.8.2 Owner Responsibilities**

The owner is responsible for all other HQS violations not listed as a family responsibility above, even if the violation is caused by the family's living habits

(e.g., vermin infestation). However, if the family's action constitutes a serious or repeated lease violation the owner may take legal action to evict the family.

## **10.9 FAILED INSPECTIONS: WHEN DEFICIENCIES MUST BE CORRECTED**

**[24 CFR §982.404(a)(b)]**

### **10.9.1 Emergency Fail Deficiencies**

Items that endanger the family's health or safety are considered emergency fails. These deficiencies must be corrected within 24 hours of inspection. The following deficiencies are considered life-threatening, emergency fails, and will cause a unit to be labeled uninhabitable:

- Gas leaks
- Major plumbing problems
- No running water
- No functioning toilet
- Unstable roof/structure

In cases where the unit is deemed uninhabitable, the family will be issued a voucher within 24 hours so that they can make arrangements to secure another residence if necessary.

If an emergency fail deficiency is not corrected in the time period required by the LACDA, and the owner is responsible, the housing assistance payment will be abated immediately, and the contract will be terminated.

If repairs are completed and the family wishes to move back into the unit, a new RTA will need to be submitted for that unit and the New Contract Process will need to be completed again.

If the emergency fail deficiency is not corrected in the time period required by the LACDA, and the family is responsible, the LACDA will terminate the family's assistance for violating family obligations (see Chapter 15: Termination of Assistance) but will not abate the payment to owner for that month.

### **10.9.2 Non-Emergency Fail Deficiencies**

Biennial or Interim inspections that result in non-emergency deficiencies that cause a unit to fail must be corrected within 30 calendar days .

Non-emergency deficiencies include, but are not limited to:

- Inoperable gas wall or floor heater
- Damaged (not missing) outlet covers
- Inoperable secondary smoke detectors
- Presence of vermin/roaches (not infestation)
- Minor faucet and/or plumbing leaks

The family and owner will be notified of the failed items and next scheduled inspection in writing. Owner related non-emergency deficiencies will not require a

follow-up inspection if cleared by an owner certification and appropriate third-party verification. If the owner opts to submit a certification it must be signed by both owner and participant. Appropriate third-party documentation must also be supplied to support the certification. Types of appropriate verifications include but are not limited to:

- Photo(s) of the repair,
- Utility receipt, and
- Vendor receipt or invoice.

If the certification is not approved by a supervisor, a follow-up inspection must be performed. Non-emergency deficiencies for units under the Project-Based Voucher program may not be cleared remotely. A follow-up inspection must be conducted.

If the necessary repairs have been completed prior to the next scheduled inspection and have not been cleared by a certification signed by both owner and participant, the owner or tenant may request an earlier inspection date. Requests for earlier repair dates will be reviewed and accommodated in a case-by-case basis.

For major repairs, the inspections unit supervisor or manager may approve an extension beyond 30 calendar days. However, the extension granted cannot exceed 60 calendar days.

If owner-caused deficiencies are not corrected in the time period required by the LACDA, housing assistance payments will be abated, and the contract may be terminated. If family-caused deficiencies are not corrected in the time period required by the LACDA, housing assistance may be terminated. See Sections 10.10 and 10.11 below for more information.

## **10.10 CONSEQUENCES OF VERIFIED FAMILY-CAUSED DEFICIENCIES**

### **[24 CFR §982.552(a)]**

The family has a responsibility to maintain the assisted unit in good condition and to notify the owner of needed repairs. Under HQS, the family is responsible for correcting any HQS violation listed in section 10.8.1 of this chapter. If non-emergency violations of HQS are determined to be the responsibility of the family, the LACDA will require the family to make any repair(s) or corrections within the 30-calendar day cycle.

Housing assistance will be terminated if an assisted unit continues to fail housing inspections for family-caused deficiencies or the family fails to keep scheduled appointment(s). See Chapter 16 (Informal Reviews/Hearings) for more information regarding a family's right to an informal hearing under a termination of housing assistance for a breach of the HQS caused by the family.

If the owner carries out a repair for which the family is responsible under the lease, the owner may bill the family for the cost of the repair.

Extensions will be granted on a case-by-case basis and must be approved by the Unit Supervisor. Extensions may be granted as a reasonable accommodation in accordance with sections 1.10 and 7.11.10.

If it has been concluded that all deficiencies are family-caused, the owner's rent will not be abated for such items.

## **10.11 CONSEQUENCES OF VERIFIED OWNER-RELATED DEFICIENCIES**

**[24 CFR §982.404(a), 24 CFR §982.452 and 24 CFR §982.453]**

The owner is responsible for maintaining the unit in accordance with HQS. When it has been determined that an assisted unit fails to meet HQS, the owner of that unit is responsible for completing the necessary repair(s) in the time period specified by the LACDA. If the owner fails to correct deficiencies within the specified time period, the LACDA is obligated to withhold (abate) housing assistance payments.

### **10.11.1 Abatement**

**[24 CFR §982.453(b) and 24 CFR §982.404(a)(3)]**

Abatement is defined as withholding Housing Assistance Payments (HAP) to the owner for the period of time the unit is out of compliance with HQS requirements.

HAP will be abated if:

#### **1. The assisted unit fails the first and second housing inspections due to owner-related deficiencies.**

If a unit fails the first inspection due to owner-related deficiencies, the notice sent to the owner stating the deficiencies, repairs that need to be made, and the date of the next inspection will also serve as notice that HAP will be abated if the unit fails a second inspection due to owner-related deficiencies.

If, after the 30-day correction period, the unit then fails the second inspection due to owner-related deficiencies, the LACDA will stop payment on the first day of the month following the expiration of the 30-day correction period.

The owner will be notified of the date of a final inspection. Under normal circumstances, the LACDA will inspect an abated unit within 30 calendar days after the abatement notification has been issued.

If the owner makes repairs during the abatement period, HAP payments will resume on the day the LACDA's inspector has verified the corrections and the unit passes inspection.

A standard calculation using the actual days in the month to establish a daily rate will be used to reconcile abatement payments. No retroactive payments will be made to the owner for the period the rent was abated, and the unit did not comply with HQS. The notice of abatement states that the family is not responsible for the LACDA's portion of rent that is abated. However, the family is responsible to pay its portion of the rent while abatement is in effect.

If an assisted unit fails the third and final housing inspection for owner-caused deficiencies, the LACDA will terminate the HAP Contract. The LACDA will notify the owner of the termination in writing 30 calendar days before it becomes effective. Abatement will remain in effect until the effective date of the termination.

The LACDA is prohibited from implementing rent abatement for family-caused deficiencies. However, abatement will apply if family-caused and owner-related deficiencies exist together.

2. **The LACDA has verified that the assisted unit has emergency fail deficiencies, and the owner did not complete the necessary repairs within the required timeframe.**
3. **A unit built before 1978 that houses or will house a child under 6 years of age fails the lead-based paint visual assessment, and the owner fails to submit a complete, passing clearance report and certification within 30 calendar days.** If a unit fails the lead-based paint visual assessment, the owner will have 30 calendar days from the date of the notice to perform clearance and submit passing paperwork. If the owner fails to meet these requirements (see Section 10.4 for more information on lead-based paint), HAP will be abated and the LACDA will stop payment on the first day of the month following. The participant will be issued a voucher. The owner will have an additional 60 calendar days to obtain and submit a valid Clearance Report before the HAP Contract is terminated.

Families that reside in units that have been abated will be issued a voucher and will have the option to move even if the assisted unit passes inspection at the third and final inspection.

#### **10.11.2 Termination of Contract**

##### **[24 CFR §982.453(b)]**

When the HAP Contract has been terminated, the family will be required to move in order to continue receiving rental assistance.

RTA submitted for units that have been terminated due to abatement will be reviewed on a case-by-case basis. In cases where the RTA is accepted, the family will be brought in for counseling on their situation.

#### **10.12 QUALITY CONTROL INSPECTIONS**

##### **[24 CFR §982.405(b)]**

To ensure efficient program operations, it is essential for management to apply sound quality control practices. The purpose of quality control inspections is to objectively ascertain that each inspector is conducting accurate and complete inspections, and to ensure that there is consistency among inspectors in application of HQS.

Quality control inspections will be performed by a Quality Assurance Representative according to SEMAP Indicator #5 which meets the minimum quality control sample size for the number of units under HAP contract during the last completed LACDA fiscal year for SEMAP.

## **Chapter 11:**

# **PAYMENT STANDARDS AND DETERMINING RENT REASONABLENESS**

### **11.1 INTRODUCTION**

#### **[24 CFR §982.503]**

The LACDA is responsible for ensuring that the rents charged by owners are reasonable based upon objective comparable in the rental market. When the LACDA has determined that the unit meets the minimum HQS, that the lease is approvable, and that the rent is reasonable, it will make timely payments to the owner and notify the owner of the procedures for rent adjustments in the rental assistance programs. This chapter explains the LACDA's procedures for setting and applying the payment standards and performing rent reasonableness analysis.

### **11.2 SETTING PAYMENT STANDARDS**

#### **[24 CFR §982.503]**

The Payment Standard sets the maximum subsidy payment a family can receive from the LACDA each month. Payment Standards are based on Fair Market Rents (FMRs) published annually by HUD. FMRs are set at a percentile within the rent distribution of standard quality rental housing units in each FMR area. For most jurisdictions FMRs are set at the 40th percentile of rents in the market area.

LACDA must establish a Payment Standard schedule that establishes Payment Standard amounts for each FMR area within the LACDA's jurisdiction and for each unit size within each of the FMR areas. For each unit size, the LACDA may establish a single Payment Standard amount for the whole FMR area or may set different Payment Standards for different parts of the FMR area. Unless HUD grants an exception, the LACDA is required to establish a Payment Standard within a "basic range" established by HUD – between 90 and 110 percent of the published FMR for each unit size.

#### **11.2.1 Updating Payment Standards**

The LACDA must revise the payment standard amount no later than 3 months following the effective date of the published FMR if a change is necessary to stay within the basic range. The LACDA must set the payment standard at a level that is high enough to ensure that families are able to afford quality housing while also balancing the need to provide assistance to as many families on the waiting list as possible.

The LACDA will review the payment standards at least annually to determine whether an adjustment should be made for some or all unit sizes. The following provides a list of the factors that will be used to evaluate the adequacy of the payment standard and/or be used to make a determination to adjust standards, as appropriate.

As a reasonable accommodation, a family may request a higher payment standard. The LACDA may, at its discretion and in accordance with sections 1.10.5, approve a higher payment standard to 120% of the prevailing Fair Market Rent (FMR).

#### **11.2.2 Funding Availability**

LACDA will review the budget to determine the impact projected subsidy adjustments will have on funding available for the program and the number of families served. LACDA will compare the number of families who could be served under revised Payment Standard amounts with the number assisted under current Payment Standard amounts.

#### **11.2.3 Assisted Families' Rent Burdens**

The LACDA will review reports showing the percent of income used for renting by voucher families to determine the extent to which the rent burden is more than 50 percent of income.

If more than 40 percent of program families in the overall program, or for a specific unit size, are contributing in excess of 50 percent of their adjusted monthly income towards rent, the LACDA will consider increasing the voucher payment standards. The payment standard will not be raised if:

- The payment is already at the maximum level HUD will allow (110%).
- The LACDA would have to reduce the number of new admissions by 20 percent or more for the upcoming year in order to fund the increase.

#### **11.2.4 Success Rate of Voucher Holders**

The LACDA will periodically review the success rate of voucher holders. If 25 percent or more of new admissions and/or families wishing to move are unable to use the vouchers due to current rental rates in Los Angeles County, the LACDA will consider increasing the payment standard for particular unit sizes and/or the entire program, as appropriate.

The payment standard will not be increased if:

- The payment is already at the maximum HUD will allow (110%).
- The LACDA would have to reduce the number of new admissions by 20 percent or more for the upcoming year in order to fund the increase.

#### **11.2.5 Rent Reasonableness Database**

The LACDA will review the rent information in the rent reasonableness data bank and compare it to the payment standards established for the Housing Choice Voucher Program. If the rent reasonableness review indicated that the payment standards are higher than the average rental unit in Los Angeles County, the payment standard for the specific unit size, or all payment standards, will be lowered to reflect the current market rents.

### **11.2.6 Quality of Units Selected**

The LACDA will review the quality of units selected by participant families before determining any change to the Payment Standard to ensure that Payment Standard increases are only made when needed to reach the mid-range of the market.

### **11.2.7 File Documentation**

A file will be retained in the LACDA's Administrative Support Unit for at least 3 years to document the analysis and findings to justify whether or not the Payment Standard was changed.

## **11.3 SMALL AREA FAIR MARKET RENT (SAFMRs)**

### **[24 CFR § 888.113(c)(3)]**

Small Area Fair Market Rents (SAFMRs) are Fair Market Rents (FMRs) calculated at the ZIP code level rather than for the entire metropolitan area. SAFMRs are designed to help families access low-poverty, high-opportunity areas by offering rental assistance that matches the local market rent, making housing in these neighborhoods more affordable for families. The LACDA has been designated by HUD as an SAFMR PHA and, in accordance with 24 CFR 888.113(c)(3), is required to implement SAFMR-based payment standards no later than January 1, 2025.

SAFMRs will apply to all tenant-based vouchers in the LACDA's jurisdiction, including special purpose vouchers such as the Veterans Affairs Supportive Housing (HUD-VASH) Program, the Family Unification Program (FUP), and special housing types such as Single Room Occupancies (SROs) and Shared Housing.

The LACDA may, without HUD approval, establish an exception payment standard of up to and including 120% of the SAFMR if required as a reasonable accommodation for a family that includes a person with a disability (or, in the case of HUD-VASH, up to 140% of the SAFMR). The LACDA may request HUD approval to establish a payment standard exceeding 120% of the SAFMR (or 140% in the case of HUD-VASH), if necessary, as a reasonable accommodation for such a family.

### **11.3.1 Applicability to Project-Based Vouchers**

The LACDA will not apply SAFMRs to the Project-Based Voucher (PBV) Program but will apply the Metropolitan Area Fair Market Rents (MAFMRs) to the PBV Program.

All PBV rents are subject to rent reasonableness, the LACDA's PBV Program policies in Chapter 19 of this plan, and any other rent-setting requirements in accordance with 24 CFR 983.301 and other applicable rules and regulations.

## **11.4 EXCEPTION PAYMENT STANDARDS**

### **[24 CFR §982.503(c)]**

LACDA must request HUD approval to establish Payment Standards that are higher than the basic range. At HUD's sole discretion, HUD may approve a Payment Standard amount that is higher than the basic range for a designated part of the FMR area. HUD may approve an exception Payment Standard amount (in accordance with program requirements) for all units or for all units of a given size, leased in the exception area. The total population of all HUD-approved exception areas in an FMR area may not include more than 50 percent of the population of the FMR area.

### **11.5 UNIT-BY-UNIT EXCEPTIONS**

[24 CFR §982.503(c)(2)(ii), §982.505(d), and Notice PIH 2010-26]

Unit-by-unit exceptions to the LACDA's Payment Standards generally are not permitted. However, an exception may be made as a Reasonable Accommodation for a family that includes a person with disabilities. This type of exception does not affect the PHA's Payment Standard schedule.

When needed as a Reasonable Accommodation, LACDA may make an exception to the Payment Standard without HUD approval if the exception amount does not exceed 110 percent of the applicable FMR for the unit size.

LACDA may request HUD approval for an exception to the Payment Standard for a particular family, if the required amount is above 120 percent of the FMR.

A family that requires a Reasonable Accommodation may request a higher Payment Standard at the time the Request for Tenancy Approval (RTA) is submitted. The family must document the need for the exception.

In order to approve an exception or request an exception from HUD, LACDA must determine that:

- There is a shortage of affordable units that would be appropriate for the family;
- The family's share would otherwise exceed 40 percent of adjusted monthly income; and
- The rent for the housing unit is reasonable.

### **11.6 SUCCESS RATE PAYMENT STANDARD AMOUNTS**

[24 CFR §982.503(e)]

If a substantial percentage of families have difficulty finding a suitable unit, the LACDA may request a "Success Rate Payment Standard" that applies to the entire jurisdiction. If approved by HUD, a success rate Payment Standard allows the LACDA to set its Payment Standards between 90 and 110 percent of a higher FMR (the 50th, rather than the 40th percentile FMR). To support the request, the PHA must demonstrate that during the most recent 6-month period for which information is available:

- Fewer than 75 percent of families who were issued vouchers became participants;
- The LACDA established Payment Standards for all unit sizes and for the entire jurisdiction at 110 percent of the published FMR; and

- The LACDA had a policy of allowing voucher holders who made sustained efforts to locate units at least 90 days to search for a unit.

Although HUD approves the success rate Payment Standard for all unit sizes in the FMR area, the PHA may choose to adjust the Payment Standard for only some unit sizes in all or a designated part, of the LACDA's jurisdiction within the FMR area.

### **11.7 DECREASES IN THE PAYMENT STANDARD BELOW THE BASIC RANGE**

[24 CFR §982.503(d)]

The LACDA must request HUD approval to establish a Payment Standard amount that is lower than the basic range. At HUD's sole discretion, HUD may approve establishment of a Payment Standard lower than the basic range. HUD will not approve a lower Payment Standard if the family share for more than 40 percent of program participants exceeds 30 percent of adjusted monthly income.

### **11.8 APPLYING PAYMENT STANDARDS**

[24 CFR §982.505]

The LACDA's schedule of Payment Standards is used to calculate Housing Assistance Payments for HCV families. This section covers the application of the LACDA's Payment Standards.

Payment Standard is defined as "the maximum monthly assistance payment for a family assisted in the voucher program (before deducting the Total Tenant Payment by the family)". [24 CFR §982.4(b)]

The Payment Standard for a family is the lower of (1) the Payment Standard for the family unit size, which is defined as the appropriate number of bedrooms for the family under the LACDA's Subsidy Standards [24 CFR §982.4(b)] or (2) the Payment Standard for the size of the dwelling unit rented by the family.

If the LACDA has established an exception Payment Standard for a designated part of an FMR area and a family's unit is located in the exception area, the LACDA must use the appropriate Payment Standard for the exception area.

The LACDA is required to pay a monthly Housing Assistance Payment (HAP) for a family that is the lower of (1) the Payment Standard for the family minus the family's TTP or (2) the gross rent for the family's unit minus the TTP.

If during the term of the HAP Contract for a family's unit, the owner lowers the rent, the LACDA will recalculate the HAP using the lower of the initial Payment Standard or the gross rent for the housing unit. [HCV GB, page 7-8]

### **11.9 CHANGES IN PAYMENT STANDARDS**

When the LACDA revises the Payment Standards during the term of the HAP Contract for a family's unit, it will apply the new Payment Standards in accordance with HUD regulations.

### **11.9.1 Decreases in Payment Standards - Hold Harmless Policy**

The LACDA will establish payment standards for each ZIP code in its jurisdiction to ensure they are between the 90–110% basic range of the SAFMR or any exception payment standard, if applicable.

If the amount on the payment standard schedule is decreased while the family continues to reside in the assisted unit, the payment standard in effect as of the recertification prior to the decrease will remain in place. The payment standard shall be frozen at this level until such time as one of the following occurs:

- The payment standard is equal to or above the frozen level;
- The family moves; or
- A change in household composition requires a change in voucher size at the next annual reexamination.

### **11.9.2 Increases in Payment Standards**

If the Payment Standard is increased during the term of the HAP Contract, the increased Payment Standard will be used to calculate the monthly Housing Assistance Payment for the family no later than the earliest of:

- Change in Gross Rent/Family Share: The effective date of an increase in the gross rent that would result in an increase in the family share;
- Annual or Interim Reexamination: The family's first regular or interim reexamination; or
- One Year After Effective Date: One year following the effective date of the increase in the payment standard amount.

### **11.9.3 Changes in Family Unit Size**

Irrespective of any increase or decrease in the Payment Standard, if the family unit size increases or decreases during the HAP Contract term, the new family unit size must be used to determine the Payment Standard for the family beginning at the family's first regular reexamination following the change in family unit size.

### **11.9.4 Reasonable Accommodation**

If a family requires a higher Payment Standard as a Reasonable Accommodation for a family member who is a person with disabilities, the LACDA is allowed to establish a higher Payment Standard for the family within the basic range.

## **11.10 RENT REASONABLENESS DETERMINATIONS**

### **[24 CFR §982.507]**

The purpose of the rent reasonableness test is to ensure that a fair rent is paid for each unit that is rented with Section 8 subsidized rental assistance.

HUD regulations define a reasonable rent as one that does not exceed the rent charged for comparable, unassisted units in the same market area. HUD requires that owner not charge more for assisted units than for comparable units on the premises. By accepting the LACDA payment each month, the owner certifies that the rent is not more than the rent charged for comparable unassisted units on the premises. If asked to do so, the owner must provide the LACDA information regarding rents charged for other units on the premises.

As required by HUD, the LACDA will obtain the services of an independent entity to determine rent reasonableness in accordance with program requirements §982.352(b).

This section provides the methods LACDA uses to determine a unit's rent is reasonable.

## **11.11 WHEN RENT REASONABLENESS DETERMINATION ARE REQUIRED**

### **11.11.1 LACDA and HUD Initiated Rent Reasonableness Determinations**

HUD requires the LACDA to make a redetermination of rent at the HAP contract anniversary if there is a 10 percent decrease in the published fair market rent (FMR) in effect 60 days before the HAP contract anniversary. The LACDA may also re-determine reasonable rents at any time.

### **11.11.2 Owner Initiated Rent Determinations**

The LACDA must make a rent reasonableness determination at initial occupancy. At initial occupancy, the LACDA must determine the proposed rent reasonable before executing a HAP contract. Subsequent requests must be in accordance with the lease between the owner and the family. Subsequent requests must also be in accordance with HUD requirements and the LACDA policy.

As stated in the HUD Tenancy Addendum, the owner must notify the LACDA at least 60-days before the proposed effective date of the intended rent increase. The owner must notify the LACDA by submitting the LACDA's Rent Increase form and providing a copy of the tenant's notice. The tenant must be notified in writing, at least 60-days before the proposed effective date of the intended rent increase. Rent adjustments will be effective the first of the month following 60-days of LACDA's receipt of the owner's request via a completed Rent Increase Form or on the date specified by the owner, whichever is later.

In accordance with the HUD Tenancy Addendum, the LACDA will disapprove requests made during the initial term of a lease. Requests can be made any time after the initial term of the lease.

As authorized by the HAP contract, the LACDA will not approve a rent increase if the HAP contract is in abatement for owner-related HQS deficiencies.

The LACDA will use the same criteria defined in this rent reasonableness determinations and methodology section to ensure a request for a rent increase meets HUD's rent comparability requirement. If the asking rent is determined to not be reasonable, the LACDA will advise both the owner and the family that the increase cannot be approved. If a partial rent increase can be approved, the

LACDA will notify the owner, and process the partial increase upon owner approval. Additionally, the rent will be reduced if the existing rent exceeds the reasonable rent as most recently determined in accordance with section 11.11.2 of this Plan.

### **11.11.3 Rent Determination for units with Low Income Housing Tax Credits (LIHTC) or HOME-funded subsidies**

#### **[24 CFR 982.507(c)]**

For units receiving low-income housing tax credits (LIHTCs) or units assisted under HUD's HOME Investment Partnerships (HOME) Program, a rent comparison with unassisted units is not required if the voucher rent does not exceed the rent for other LIHTC- or HOME-assisted units in the project that are not occupied by families with tenant-based assistance.

For LIHTCs, if the rent requested by the owner does exceed the LIHTC rents for non-voucher families, the LACDA must perform a rent reasonableness determination (AffordableHousing.com) in accordance with program regulations. In such cases, the rent shall not exceed the lesser of:

- 1) The reasonable rent as determined from the rent reasonableness determination; or
- 2) The payment standard established by the LACDA for the unit size involved.

### **11.11.4 Rent Reductions**

At any time, the owner may request a reduction of the contract rent by submitting a written notice to the LACDA. The notice must state the requested contract rent amount and the effective date of the reduction.

Retroactive reductions will only be considered if the owner is mandated to reduce the contract rent in order to become compliant with the obligations of any other rental assistance programs such as the HOME program or the Low-Income Housing Tax Credit (LIHTC) program. In such cases, the owner must provide a copy of the notice requiring a retroactive reduction of the contract rent.

## **11.12 METHODOLOGY USED FOR ESTABLISHING UNIT COMPARABILITY**

### **11.12.1 Factors to Consider**

The LACDA contracts with an outside third-party vendor, AffordableHousing.com to provide a Rent Comparable System. The third-party vendor collects data and provides an online system that considers a variety of criteria to determine rent comparable information, including:

- Unit Location
- Quality
- Size
- Type

- Age of the contract unit
- Amenities
- Housing services
- Maintenance; and
- Utilities provided by the landlord.

The third-party vendor gathers open market rental data on an ongoing basis from websites and newspapers and applies a hedonic price analysis to compare a subject unit with similar comparable units in a geographic area. Comparable units represent unrestricted market rents. Therefore, units that receive some form of federal, state, or local assistance that imposes rent restrictions are not considered comparable units.

#### **11.12.2 Units that must not be used as a Comparable**

As noted above, comparable units must represent unrestricted market rents. Therefore, units that receive some form of federal, state, or local assistance that imposes rent restrictions cannot be considered comparable units. These include units assisted by HUD through any of the following programs:

- Section 8 project-based assistance,
- Section 236 and Section 221(d)(3)
- Below Market Interest Rate (BMIR) projects,
- HOME or Community Development Block Grant (CDBG) program assisted units in which the rents are subsidized;
- Units subsidized through federal, state, or local tax credits;
- Units subsidized by the Department of Agriculture Rural Housing programs, and
- Units that are rent controlled by local ordinance.

See Notice PIH 2011-46 issued August 17, 2011, provides further guidance on the issue of what constitutes an assisted unit.

#### **11.12.3 Rents Charged for Other Units on the Premises**

By accepting the LACDA's payment each month, the owner certifies that the rent is not more than the rent charged for comparable unassisted units on the premises. If asked to do so, the owner must give the LACDA information regarding rents charged for other units on the premises.

The LACDA ensures that rent for assisted tenant-based units do not exceed rents reported by the owner for like or similar units on the premises.

- For the initial contract of a unit, if the unit is a multifamily property (defined by HUD as consisting of five or more units on the premises), the owner must provide information on the last three rentals of like and similar unassisted units on the Request for Tenancy Approval (RTA).
- If an owner requests a rent increase, the owner must provide the LACDA with information on the three most recently rented unassisted like and

similar units on the premises within the last year or indicate that there were no such rentals within the last year.

The rent for the unit may not exceed the lower of the reasonable rent as determined by the third-party vendor system if such information is available or the most recent owner disclosed comparable rent for unassisted units on the premises provided by the owner.

In the case of a re-determination of rent reasonableness during the term of the HAP Contract, the LACDA may require an owner to provide rent reasonableness information in writing at any time.

#### **11.12.4 Units not Covered by the Third-Party Vendor System**

The third-party vendor system does not provide information for mobile home space rentals. In some cases, the third-party vendor system may not provide adequate information on specific types of units in certain areas.

For units not covered by the system, the LACDA will email [hasupport@gosection8.com](mailto:hasupport@gosection8.com) to request comparable units. The request will include the following information: The full subject address and rent being requested. If applicable, the area in which the comparable must stay within (i.e. zip code or city).

### **11.13 METHODOLOGY FOR USED FOR DETERMINING RENT REASONABLENESS OF ROOM-FOR-RENT**

A room-for-rent is defined by HUD under shared housing, which is a special housing type. Specific information about shared housing may be found under Section 9.3.1 Special Housing Types. On June 11, 2024, HUD approved a regulatory waiver that permits the LACDA to conduct a room-for-rent methodology that provides a more realistic comparable to the ratio formula approach in that it permits the LACDA to use the SRO payment standard.

The LACDA's third-party vendor system does not provide information for room-for-rent listings. For this reason, the LACDA's methodology and policy for determining rent reasonableness are outlined below.

#### **11.13.1 Unit Type and/or Structures**

To ensure that the structure type of the comparable unit is similar to the subject room-for-rent structure, the structure type must be noted on the source for comparable rent. If this information is not available, the LACDA will obtain a property vesting of the proposed unit to confirm the comparability or access <https://web.datatree.com/> to obtain the structure type. The unit types and structures that the LACDA will deem acceptable to use as comparable room-for-rent are:

- a. Dwelling units where the use code is residential only
- b. Single-family dwelling units
- c. Accessory dwelling units
- d. Apartments

- e. Condominiums
- f. Townhomes
- g. Duplexes
- h. Low-Rise: 3 or 4 stories
- i. High-Rise: 5 or more stories

Housing accommodations in hotels, motels, inns, tourist homes, and boarding houses are excluded.

Comparable rent amounts must be for listings of similar structure types. For example:

- Comparable rent amounts for units in a single-family home would be compared to rent amounts in other single-family homes.
- Comparable rent amounts for units in high-rise apartments of 5 or more stories would be compared to rent amounts in other high-rise apartments of 5 or more stories.

#### **11.13.2 Location of Comparable Units**

The LACDA will select compatible unassisted units, which are located within the same neighborhood as the subject room for rent. For example, a room-for-rent comparable request for a bedroom in the Antelope Valley neighborhood of Palmdale would be from that general area as opposed to a comparable rent from a unit in Alhambra or Malibu. The Los Angeles County Assessors maps available online be used to identify neighborhood locations <https://portal.assessor.lacounty.gov/mapsearch>. Through reciprocal inter-agency agreements for particularly LACDA programs, units located outside of the Los Angeles County limits within the city of Los Angeles would use the corresponding neighborhood for those units.

#### **11.13.3 Lease Term**

The initial lease term must be for at least one year.

#### **11.13.4 Sources for Comparable Rents**

The LACDA considers the following room-for-rent websites to be acceptable sources for comparable rents. The LACDA will use available, comparable rental data for current room-for-rent offerings from websites, such as, but not limited to:

- a. <https://www.spareroom.com/room-for-rent/losangeles>
- b. <https://www.rent.com/>
- c. <https://roomster.com/>
- d. <https://hotpads.com/los-angeles-ca/rooms-for-rent>
- e. <https://losangeles.craigslist.org/search/roo#search=1~gallery~0~0>
- f. <https://bungalow.com/rooms-for-rent/los-angeles>
- g. <https://housinganywhere.com/s/Los-Angeles--United-States/private-rooms>

h. <https://www.roomies.com/rooms/los-angeles-california>

To calculate housing assistance payments and determine rent reasonableness, the LACDA shall use the payment standard for SRO units as the voucher size room-for-rent.

## **Chapter 12: RE-EXAMINATION**

### **12.1 INTRODUCTION [24 CFR §982.516(a)]**

To assure that tenancy is restricted to participants meeting the eligibility requirements for continued occupancy and are charged appropriate rents; the eligibility status of each participant is re-examined at least annually.

#### **12.1.1 Procedure and Schedule**

As part of the annual reexamination process, families are required to provide updated information to the LACDA regarding the family's income, expenses, and composition. To maintain program efficiency and integrity, the LACDA at its own discretion may conduct re-examination interviews by mail, in-person, or through its Yardi Rent Café portal. The LACDA will attempt to conduct all annual re-examinations interviews through its online Rent Café portal.

The LACDA will begin the annual reexamination process approximately 120 days in advance of its scheduled effective date. Generally, the LACDA will schedule annual reexamination effective dates to coincide with the family's anniversary date.

For families who have language barriers and/or need assistance in accessing the online Rent Café portal, the LACDA will provide accommodations as necessary to ensure that the family can submit the required information and documents through the online Rent Café portal.

For people limited by a disability, the LACDA will engage in any necessary discourse to identify other reasonable alternatives to address the needs of the person that is limited by the disability to ensure that the annual reexamination requirement is fulfilled.

Anniversary date is defined as 12 months from the effective date of the family's last annual reexamination or, during a family's first year in the program, on the first day of the month from the effective date of the family's initial examination (admission). For some participants, the anniversary date established as of November 1, 2010 will remain unchanged.

In accordance with new requirements as the Secretary shall establish, the LACDA will implement triennial recertifications for households who establish that 90 percent or more of the family income consists of fixed income, as defined by the Secretary, and that the sources of such income have not changed since the previous year. The LACDA will conduct a review of each such family's income not less than once every 3 years.

The effective date of an annual reexamination may be no more than twelve months from the effective date of the previous year's annual reexamination, or the anniversary date of the HAP contract if within the first year of the contract.

## **12.2 STREAMLINED ANNUAL RE-EXAMINATIONS**

[24 CFR §982.516(B)]

HUD permits PHA's to streamline the income determination process for family members with fixed sources of income. While third-party verification of all income sources must be obtained during the intake process and every three years thereafter, in the intervening years the PHA may determine income from fixed sources by applying a verified cost of living adjustment (COLA) or rate of interest. The PHA may, however, obtain third-party verification of all income, regardless of the sources. Further, upon request of the family, the PHA must perform third-party verification of all income sources.

Fixed sources of income include Social Security and SSI benefits, pensions, annuities, disability or death benefits, and other sources of income subject to a COLA or rate of interest. The determination of fixed income may be streamlined even if the family also received income from other non-fixed sources.

Two streamlining options are available, depending upon the percentage of the family's income that is received from fixed sources. If at least 90 percent of the family's income is from fixed sources, the PHA may streamline the verification of fixed income but is not required to verify non-fixed income amounts. If the family receives less than 90 percent of its income from fixed sources, the PHA may streamline the verification of fixed income and must verify non-fixed income annually.

Given this HUD provided flexibility, the LACDA will streamline that annual reexamination process by applying the verified COLA or interest rate to fixed-income sources. The LACDA will document in the file how the determination that a source of income was fixed was made.

If a family member with a fixed source of income is added to the household, the PHA will use third-party verification of all income amounts for that family member.

If verification of the COLA or rate of interest is not available, the LACDA will obtain third-party verification of income amounts.

Third-party verification of fixed sources of income will be obtained during the intake process and at least once every three years thereafter.

Third-party verification of non-fixed income will be obtained annually regardless of the percentage of family income received from fixed sources.

## **12.3 RE-EXAMINATION NOTIFICATION TO THE FAMILY**

Participating families are advised of the annual re-examination requirement and the importance of reporting income and family composition changes as they occur during the initial re-examination.

### **12.3.1 Persons with Disabilities**

[24 CFR §8.24(a)]

Persons with disabilities who are unable to participate in the annual reexamination process will be granted a reasonable accommodation that meets the need presented by the disability and removes the barriers associated with fulfilling HUD's and the LACDA's annual reexamination requirements.

### **12.3.2 Requirements to Attend an In-Person Interview**

If it is determined that a participant (family) will need to come to the LACDA's office, then all adult household members 18 years and older will be required to attend the re-examination interview.

### **12.3.3 Failure to Respond**

If a family fails to complete or return the required re-examination documents within the specified timeframe, the LACDA will schedule the family for a mandatory appointment. The appointment letter will provide the date and time of the appointment and a list of items that family will need to bring.

If the family fails to attend the appointment or fails to bring all the required information, the LACDA may proceed to propose termination of the family's assistance.

If the family is able to provide documentation of an emergency situation that prevented them from completing the required re-examination documents or attending the mandatory appointment, the Unit Supervisor at his/her own discretion may, on a case-by-case basis reschedule the appointment. The LACDA may also grant an exception to this policy as a reasonable accommodation.

### **12.3.4 Documents Required from the Family**

The Rent Café portal re-examination, as well as the paper re-examination packet, will include instructions and appropriate forms (if applicable) that need to be submitted to complete the re-examination as follows:

1. Documentation of income for all family members;
2. Documentation of assets;
3. Documentation of medical or childcare expenses;
4. Certified statement of family obligations;
5. Consent for Release of Information (signed by all household members over 18 years of age); and

Verification of these documents will be conducted in accordance with LACDA procedures and guidelines described in this plan.

### **12.3.5 Effective Dates**

If the tenant rent increases, a 30-day notice of increase in rent is sent to the family before the anniversary date.

If less than 30 calendar days are remaining before the anniversary date, the new tenant rent will be effective on the first of the month following the 30-day notice, but the reexamination will be effective no more than 12 months from the effective date of the last annual reexamination. If the LACDA was unable to process the re-

examination on a timely basis due to the family's failure to provide re-examination documents, then the rent increase will be effective retroactive to the appropriate anniversary date.

If the family causes a delay in the re-examination processing, there will be a retroactive increase in rent to the anniversary date. In this particular case, the owner will receive a retroactive HAP payment, and every effort will be made to recover lost rent from the tenant.

## **12.4 INTERIM RE-EXAMINATION** **[24 CFR §982.516(c)]**

Interim Reexaminations can be scheduled when the LACDA has reason to believe that changes in income or expenses may have occurred, or when the family reports a change. When a family reports a change, the LACDA may take different actions depending on whether the family reported the change voluntarily, or because the family was required to do so.

### **12.4.1 LACDA-Initiated Reexaminations**

LACDA-initiated interim reexaminations are those that are scheduled by the LACDA based on the following circumstances.

- If at the time of the Annual Reexamination, it is not feasible to anticipate a level of income for the next 12 months (e.g. seasonal or cyclic income), the LACDA will schedule a reexamination on a quarterly basis until it is feasible to project income.
- If at any time, the family is legitimately determined to be a zero-income family, the LACDA will conduct an interim reexamination every 3 months as long as the family continues to report that they have no income. The head-of household and each adult family member will be required to submit a completed Household Expense Report to document expenses for the prior 3-month period. The family may be required to undergo a credit report review and attend an in-person interview.
- If at the time of the annual reexamination, tenant-provided documents were used on a provisional basis due to the lack of third-party verification, and third-party verification becomes available, the LACDA will conduct an interim reexamination.
- For Families receiving the Earned Income Disallowance (EID), the LACDA will conduct an interim reexamination at the start and conclusion of the second 12-month exclusion period (50 percent phase-in period).
- The LACDA may conduct an interim reexamination at any time to correct an error in a previous reexamination, or to investigate tenant fraud.

Families whose past employment has been sporadic, or that are on welfare, become employed then subsequently unemployed, or are self-employed, will not be scheduled for a LACDA-initiated reexamination. If such an income pattern has been established and is expected to continue, then a reasonable 12-month estimate of the income may be based on past income and present rate.

### **12.4.2 Family-Initiated Interim Reexaminations**

[24 CFR 982.516(b)(2) and 24 CFR 982.516(c)]

HUD regulations require that the family be permitted to obtain an interim reexamination any time the family has experienced a change in circumstances since the last determination. In addition, the LACDA must adopt policies prescribing when and under what conditions the family must report changes in family income or expenses

#### ➤ **Required Reporting**

[24 CFR 982.516(b)(2)]

Families are required to report all changes in earned and unearned income, assets, expenses, full-time student status, and family circumstances within 10 calendar days of the date the change takes effect.

Families will be required to pay back overpayments of rental assistance resulting from failure to report a change in income or family composition.

If a family reports a decrease in income from the loss of welfare benefits due to fraud or noncompliance with a welfare agency requirement to participate in an economic self-sufficiency program, the family's share of the rent will not be reduced [24 CFR 5.615].

### **12.4.3 Processing the Family-Initiated Interim Reexamination**

#### ➤ **Standard for Reporting**

The LACDA requires that families report interim changes by completing an Interim Reexamination Request form, or by accessing the online Yardi Rent Café Portal, within 10 days of when the change occurs. The family will be required to submit the Interim Reexamination Request form or report the change online via the Rent Café Portal and submit supporting documentation for the change.

Generally, the family will not be required to attend an interview for an interim reexamination. However, if the LACDA determines that an in-person interview is warranted, the family may be required to attend. Based on the type of change reported, the LACDA will determine the documentation the family will be required to submit. The family must submit any required information or documents within 15 calendar days of the request. This time frame may be extended for good cause with LACDA approval. The LACDA will accept required documentation by mail, fax, email, through the tenant portal, or in person.

When income is calculated using anticipated annual average income, the LACDA may determine that the interim change is not necessary. The family will be sent a notice acknowledging the interim request and will be informed that no change is necessary. A downward change will not be made if it is determined that the change is temporary (less than 30-consecutive days).

The LACDA will not conduct interim re-examinations if a family reports an increase in income as part of or concurrent with the timing of their next annual reexamination effective date (within three (3) months). Instead, the reported change will be processed with the annual re-examination.

➤ **Effective Dates**

If the family share of the rent is to *increase*:

The increase generally will be effective on the first of the month following 30-days' notice to the family, if the change was reported within the required time frames.

If a family fails to report a change within the required time frames or fails to provide all required information within the required time frames, the increase will be applied retroactively, to the date it would have been effective had the information been provided on a timely basis. In this case, the LACDA will not provide 30-days' notice to the family. The family will be responsible for any overpaid subsidy and may be offered a repayment agreement in accordance with policies in Chapter 17 Owner and Family Debts to the LACDA.

If the family share of rent is to *decrease*:

The decrease will be effective on the first day of the month following the month the change was reported, and all documents are received and verified.

If the family is responsible, in whole or in part, for any delay in obtaining documentation, the decrease will apply on the first of the month after all verification of income has been obtained.

Documents requested by the LACDA in support of a decrease must be submitted within 15 calendar days of the request. The LACDA may grant an extension for circumstances beyond the control of the family. However, if the family is not responsive to a request for documentation, the LACDA will consider the family nonresponsive if more than 15 calendar days have elapsed since the deadline for the information and the family has not had any communication with the LACDA. In such cases, the family will be advised that the LACDA is not processing the decrease and must start the process over again if they wish to receive the decrease.

## **12.5 CHANGES IN FAMILY COMPOSITION** **[24 CFR §982.516(d) and 24 CFR §982.551(h)(2)]**

The composition of the assisted family residing in the unit must be approved by the LACDA. An interim re-examination will be conducted for any changes in family composition.

The LACDA may verify changes in family composition as detailed in Section 7.11.5.

### **12.5.1 Allowable Family Additions** **[24 CFR §982.551(h)(2)]**

Allowable family additions are the following:

1. Addition due to birth, adoption or court awarded custody.
  - Must be reported to the LACDA, in writing, within 10 calendar days of the occurrence. Families should notify the owner and comply with any lease requirements to obtain owner approval.
2. Other allowable persons:
  - Addition of a foster child or foster adult that is in the legal guardianship or custody of the state, county, or private adoption or foster care agency, yet is cared for by foster parents in their own home, under some kind of short-term or long-term foster care arrangement with the custodial agency. The custodial agency, such as the Department of Children and Family Services (DCFS) or the Department of Public and Social Services (DPSS), must have previously approved the addition.

A foster child or adult can remain in a household, as long as they remain under the legal guardianship of the state or county. Families must report changes in household composition to the LACDA, including when a foster member is adopted or turns 18 and exits state or county guardianship. In such cases when the foster adult is no longer under the legal guardianship of the state or county, the family must report to the PHA whether the household member will be removed from the home or if their household member status will be updated to family member, making all the program rules and regulations apply to this member.

- Addition of marriage/or marital type relation (i.e., couples that certify that they intend to live in the same principal residence indefinitely and/ or register in California as domestic partners);
- Addition of a minor who is a child of the head of household, co-head, spouse or marital-type partner, who have been living elsewhere; and
- Addition of a LACDA-approved live-in aide;
- Addition of an adult child due to recent discharge from the military.
- Addition of a disabled adult who requires disability-related care.

The family must request approval from the owner and the LACDA before the person is added. Anyone who moves into the unit without written owner and LACDA approval is considered an unauthorized person.

As part of the approval process, the LACDA conducts a criminal background check, and may also conduct a credit review, on all new potential family members, 18 years of age and older. Criminal records will only be used to screen new household members. They will not be used for lease enforcement or eviction of residents already receiving tenant-based rental assistance.

If an approved change requires a larger size unit due to overcrowding, the change in voucher size will be made effective immediately (see Chapter 5). The LACDA will determine the assistance, based on funding availability.

### **12.5.2 Foster Household Member to Family Member**

Upon identification, the LACDA will follow up with households that include a foster member who has turned 18 and continues to live in the assisted home to determine whether the foster member is still under legal guardianship or custody of the state or county. If the foster member remains under such guardianship or custody, and the family provides appropriate verification from the state or county, they will continue to be classified as a foster household member. However, if it is determined that the member is no longer under legal guardianship or custody, the family will have the option to reclassify that member from a foster household member to a family member. If the family chooses to reclassify the foster adult as a family member, all program rules and regulations will apply to this member.

### **12.5.3 Decreases in Family Size**

When a family member leaves the household, the absence must be reported to the LACDA, in writing, within 10 calendar days of the occurrence, as detailed in Section 6.8.9 (Reporting Absences to the LACDA). The change in family composition may impact the voucher size, as explained in Chapter 5 (Subsidy Standards).

If a decrease in family size results in a decrease of the voucher size, the LACDA will downsize the family's voucher to the appropriate size at the family's next annual review following the reduction in household size.

The LACDA may make an exception as a reasonable accommodation for a person with a disability.

## **12.6 CONTINUATION OF ASSISTANCE FOR "MIXED" FAMILIES** **[24 CFR §5.504(b)]**

Families that include at least one citizen or eligible immigrant, and any number of ineligible members, are considered "mixed" families.

"Mixed" families that were participants on or before June 19, 1995, shall continue full assistance if they meet the following criteria:

1. The head of household, co-head, or spouse is a U.S. citizen or has eligible immigrant status, **and**
2. All members of the family other than head, co-head, spouse, parents of head, parents of co-head, parents of spouse, children of head, co-head, or spouse are citizens or eligible immigrants. The family may change the head of household designation to another adult member of the family to qualify under this provision.

If they do not qualify for continued assistance, the member(s) that cause the family to be ineligible for continued assistance may move, or the family may choose prorated assistance. [See memo dated 3/13/2009]

## **Chapter 13:**

### **ALLOWABLE MOVES/PORTABILITY**

#### **13.1 INTRODUCTION**

This chapter defines the procedures, restrictions and limitations for moving, for new applicants and current participants.

As stated in HUD regulations, eligible families participating in the Housing Choice Voucher Program have the right to receive tenant-based voucher assistance anywhere in the United States, in the jurisdiction of a public housing agency (PHA) administering a Housing Choice Voucher program. This program feature is called “portability.” This chapter includes the LACDA’s procedures for new applicants and current participants that “port out” of the LACDA’s jurisdiction.

Additionally, this chapter specifies the LACDA’s policies for receiving “incoming ports” from other public housing agencies.

#### **13.2 ALLOWABLE MOVES AND RESTRICTIONS**

##### **13.2.1 Restrictions on Moves**

The LACDA may deny families permission to move if:

- There is insufficient funding for continued assistance;
- The family has violated a family obligation;
- The family is in the initial term of the lease (see 13.2.4 for exceptions);
- The family has already moved within the one-year period;
- The family owes money to this LACDA or another PHA. See Section 17.2 (Repayment Agreements for Families) for more information on allowable moves for families with repayment agreements; or
- There is insufficient funding to support a move with continued assistance.

In the event of insufficient funding, the LACDA may only deny a move to a higher cost area if the LACDA would not be unable to avoid termination of housing choice voucher assistance for current participants during the calendar year in order to remain within budgetary allocation (including any available HAP reserve). If the receiving PHA is willing to absorb the voucher, the LACDA may not deny the move to the higher cost area due to insufficient funding.

##### **13.2.2 Allowable Moves for New Applicants** **[24 CFR §982.353]**

A family who lives and/or works in the LACDA’s jurisdiction at the time they are admitted to the Housing Choice Voucher Program may choose, as their initial housing:

- To remain in their current unit (this is referred to as leasing-in-place);

- A unit anywhere within this LACDA's jurisdiction; or
- A unit outside of this LACDA's jurisdiction. For more information, see the Outgoing Portability section of this chapter.

If neither the head of household or spouse already had a "domicile" (legal residence) in the LACDA's jurisdiction at the time when the family first submitted an application for participation in the program, the family does not have any right to portability until they have leased up with rental assistance and have resided within the jurisdiction for at least 12 months [24 CFR §982.353(c)].

- Mainstream voucher applicants are not subject to the requirement above and are permitted to lease a unit outside of the LACDA's jurisdiction.
- Emergency Housing Voucher (EHV) applicants serviced under the EHV Super One-Time Limited Preference are not subject to the requirement above and are permitted to lease a unit outside of the LACDA's jurisdiction.
- Under limited conditions, the LACDA may waive this requirement. Examples of situations that may warrant an exception to this rule include life-threatening situations or as a reasonable accommodation. However, in all cases both the LACDA and the receiving jurisdiction must agree to allow the move. If the receiving public housing agency does not agree, the LACDA will not approve a transfer [24 CFR §982.353(c)(3)].

### **13.2.3 Allowable Moves for Current Participants**

#### **[24 CFR §982.354]**

A family that initially receives assistance for a unit leased in LACDA's jurisdiction may request to move to another unit and receive continued assistance. Families in good standing may move with continued assistance if:

1. The assisted lease for the old unit has ended because the LACDA has terminated the HAP contract for owner breach [24 CFR §982.314(b)(1)(i)];
2. The lease was terminated by mutual agreement of the owner and the family [24 CFR §982.314(b)(1)(ii)]. The LACDA must receive a copy of this notice. The LACDA will not approve the mutual lease termination during the first year of the lease;
3. The owner has given the family a notice to vacate for reasons other than a lease violation [24 CFR §982.314(b)(2)]. The LACDA must receive a copy of this notice; or
4. The family has given proper written notice of lease termination after the initial lease term and in accordance with State law. This generally requires a 30-day notice. The LACDA must receive a copy of this notice.

A family is considered to be in good standing if they have not violated the terms of the lease, any program regulations and do not owe any money to this LACDA or another public housing agency.

Families that are eligible to move with continued assistance may choose to move to a unit that is:

- **Within the LACDA's jurisdiction.** This type of a move is called a “reserve vacate.” This means that the family is moving from a unit, which could result in a temporary vacancy in the program until another unit is secured; however, the slot remains reserved for the family until the time they lease another unit.
- **Outside LACDA's jurisdiction.** See the Outgoing Portability section of this chapter for more information.

#### **13.2.4 Restrictions on Moves During the Initial Lease** **[24 CFR §982.354(c) and §982.309(a)(1)]**

Generally, families will not be permitted to move during the initial lease, or more than once in any 12-month period.

The LACDA will consider exceptions to this policy for the following reasons:

1. To protect the health or safety of the family (HQS emergency items).
2. Statutory conditions under the Violence Against Women Reauthorization Act of 2013 (e.g., the family or an affiliated individual is or has been the victim of domestic violence, dating violence, sexual assault, or stalking as provided in 24 CFR part 5, subpart L, and the move is needed to protect the health and safety of the family or affiliated individual. The LACDA may not terminate assistance if the family, with or without prior notification to the LACDA, already moved out of the unit in violation of the lease, if such move occurred to protect the health and safety of an affiliated individual who is or has been the victim of domestic violence, dating violence, sexual assault, or stalking and who reasonably believed he or she was imminently threatened by harm from further violence if he or she remained in the dwelling unit.); or
3. To address an emergency situation over which a family has no control (e.g., Natural Disaster or Unsafe Environment).

Verification must include a copy of the incident report from the local Fire Department, the Health Department, or other appropriate agency that the dwelling unit is now uninhabitable. It must also include the cause of the disaster if known.

In addition, the LACDA will allow exceptions to this policy for the reasonable accommodation request of a family member who is a person with disabilities. However, the owner of the property must agree to release the tenant from the lease.

#### **13.3 PROCEDURES FOR MOVES FOR CURRENT PARTICIPANTS** **[24 CFR §982.354(d)]**

Eligible families who wish to move must send a written lease termination notice to the owner and copy to the LACDA no less than 30 calendar days before the vacate date. Once the LACDA has received a copy of the lease termination notice, the family will be scheduled for a briefing session where they will be issued the voucher

along with the briefing packet (see Section 8.4 for information that is provided at the briefing session).

Eligible families also have the option to request a voucher before issuing a lease termination to their owner and the LACDA. However, a Request for Tenancy Approval or a Request to Transfer (portability) will not be processed without the proper written lease termination notice.

If the family's reexamination is current (within 12 months) the LACDA will not conduct a reexamination before issuing the voucher unless there are reported changes to income or the family composition that would require an interim reexamination.

### **13.4 OUTGOING PORTABILITY PROCEDURES** **[24 CFR §982.355(b)(c)]**

Both new applicants and current participant families must first identify the new area where they will be moving. If there is more than one Public Housing Agency (PHA) serving that area, the LACDA will provide the family with the contact information for the PHAs that serve that area for the family to select the PHA. The family must inform the LACDA which PHA it has selected. In cases where the family prefers not to select a PHA, the LACDA will select the PHA on behalf of the family.

Once the LACDA has identified the receiving PHA, the LACDA will:

1. Contact the receiving PHA, prior to approving the family's request to port, to determine whether the voucher will be absorbed or billed by the receiving PHA [24 CFR §982.355(c)(3)];
2. Obtain in writing, via email or other confirmed delivery method, the receiving PHA's decision to absorb or bill the voucher.
  - If the receiving PHA decides to absorb the voucher, the receiving PHA cannot reverse its decision at a later date without consent of the LACDA.
  - If the receiving PHA decides to bill the voucher, the LACDA may deny the move if it will result in insufficient funding for continued assistance [24 CFR §982.354(e)(1)].
3. Determine the family's eligibility to move with continued assistance (port). Families found eligible to port must be issued a voucher (if not yet issued) and must be advised of how to contact and request assistance from the receiving PHA [24 CFR §982.355(c)(6)]; and
4. Provide the following documents and information to the receiving PHA [24 CFR §982.355(c)(7)]:
  - A copy of the family's voucher, with issue and expiration dates, formally acknowledging the family's ability to move under portability.
  - The most recent HUD 50058 form and verifications.
  - The Family Portability form (HUD-52665).

Portability Administrative Fee: If administrative fees are prorated, the proration will apply to the amount of the administrative fee for which the receiving PHA may bill. The receiving PHA may bill for the lower of 80 percent of the initial PHA's prorated ongoing administrative fee or 100 percent of the receiving PHA's prorated ongoing administrative fee.

New applicant families will be subject to the income eligibility requirements of the jurisdiction in which they will be receiving assistance [24 CFR §982.353(c)(9)].

**13.4.1 Briefing for Families Wishing to Exercise Portability**  
**[24 CFR §982.301(b)(4)]**

Since families wishing to move to another jurisdiction must understand that the policies and procedures of the receiving PHA prevail, the LACDA will provide counseling for those families who express an interest in portability. This will include a discussion of how portability works, the advantages of areas that do not have a high concentration of low-income families, the difference in payment standards, subsidy standards, and income limits, if applicable. See Chapter 8, Section 8.4 for a detailed list of the information provided at the briefing session.

**13.4.2 Payment to the Receiving PHA**  
**[24 CFR §982.355(d) and §982.355(e)]**

If the receiving PHA chooses to administer and bill assistance on the LACDA's behalf, the LACDA will reimburse the receiving PHA for costs associated with administering the voucher, as specified in HUD regulations.

The receiving PHA must submit to the LACDA the initial billing no later than 60 days following the expiration date of the family voucher issued or within 10 days of an executed contract.

The LACDA will ensure that the receiving PHA receives all subsequent monthly payments no later than the fifth working day of each month.

**13.5 INCOMING PORTABILITY PROCEDURES**  
**[24 CFR §982.355]**

Eligible participants in the Housing Choice Voucher Program in other public housing agencies may be assisted in the LACDA's jurisdiction.

For a family to port into the LACDA's jurisdiction, the LACDA must receive a request to absorb or bill the voucher of the incoming portable family. The LACDA must provide the initial PHA, in writing, via email or other confirmed delivery method, a decision to absorb or bill the voucher. Rendered decisions to absorb a voucher cannot be reversed at a later date without consent of the initial PHA.

Once a decision has been rendered to the initial PHA, the LACDA must receive the following from the initial PHA:

- The Family Portability form (HUD-52665) with Part I completed.
- A copy of the family's most current voucher.
- The most recent HUD 50058 (Family Report) for the family, and all related verifications supporting the Family Report.

Should the family arrive with an expired voucher, the LACDA will contact the initial PHA to determine if it will extend the voucher. The initial PHA will decide to extend the term of the initial PHA voucher before the LACDA can proceed with the portability process.

**13.5.1 Policies on Absorption and Administration**  
**[24 CFR §982.355(d) and §982.355(e)]**

For incoming ports, the LACDA may, if funding permits, accept a family with a valid voucher from another jurisdiction and absorb the voucher. The LACDA may also exercise the option to administer the initial public housing agency's voucher and bill the initial PHA as authorized in the regulations.

Portability Administrative Fee: If administrative fees are prorated, the proration will apply to the amount of the administrative fee for which the receiving PHA may bill. The receiving PHA may bill for the lower of 80 percent of the initial PHA's prorated ongoing administrative fee or 100 percent of the receiving PHA's prorated ongoing administrative fee.

If the LACDA chooses to administer:

- An initial billing will be submitted to the initial PHA within 10 days of an executed contract to ensure timely receipt of payment, but no later than 90 days following the expiration date of the family voucher issued by the initial PHA.
- The LACDA's policy on tolling in Section 8.7.4 of this Plan will apply [24 CFR §982.303].
- The LACDA will not extend the term of the voucher unless there is enough time to process the new contract and meet the billing deadline or unless the initial PHA extends the family's voucher. The LACDA will notify the initial PHA if such an extension is granted [24 CFR §982.355(c)(14)].

All subsequent monthly billing payments are to be received by the LACDA no later than the fifth working day of each month.

If the LACDA chooses to absorb, the LACDA may apply its policies on voucher tolling and extensions as stated in Sections 8.7.2 and 8.7.3 of this Plan.

**13.5.2 Income and Total Tenant Payment Review**  
**[24 CFR §982.355(c)]**

The LACDA will conduct an initial review of all incoming port families. The LACDA will:

- Conduct criminal background and registered sex offender registration checks of family members (see Section 13.5.3 below).
- Verify identifying documents, family income and composition.
- As necessary, the LACDA will change the bedroom size of a family's voucher to comply with the subsidy standards. If this occurs, the family will be notified in writing of the change.

- If family income documents are missing or there has been a change in the family's circumstances, the LACDA may re-determine the family's TTP.
- For incoming port families who have not yet leased a unit under the Housing Choice Voucher Program (initial applicants), the LACDA must verify that the family meets the HUD's income limits.

If a re-determination is necessary, the LACDA will not delay issuing the family a voucher or otherwise delay approval of a unit unless the re-determination reveals that the family is not eligible for assistance in the LACDA's jurisdiction. In such cases, the family will be referred to the initial PHA for further assistance [24 CFR §982.355(c)(11)].

All families porting into the LACDA's jurisdiction will be issued a voucher. The term of the voucher issued may not expire before 30 calendar days from the expiration date noted on the voucher issued by the initial public housing agency [24 CFR §982.355(c)(13)]. The LACDA will determine whether to extend the voucher term, if necessary, based on Section 13.5.1 of this Plan.

If a family that has ported into the LACDA's jurisdiction is unable to locate a unit within the allotted time authorized on the voucher, the LACDA will notify the issuing PHA that the voucher did not result in a HAP contract [24 CFR §982.355(c)(16)].

Approval of any unit is subject to rent reasonableness and a passed inspection [24 CFR §982.401(a)(3)].

### **13.5.3 Criminal Background Checks for Incoming Portability** **[24 CFR §982.355(c)(9) – (10)] and [PIH Notice 2004-12]**

The LACDA will conduct criminal background and sex offender registration checks for all incoming portability families. To establish eligibility under section 2.8.1 of this Plan, the LACDA will review criminal history within the established review period from the date a Request to Transfer is received from the originating PHA.

While criminal background and sex offender registration checks are conducted, the LACDA will not delay issuing the family a voucher but will take subsequent necessary action, including up to termination of a family's assistance (see Section 2.8 for details on screening).

The LACDA will take the following steps to minimize the number of terminations for families that are porting into its jurisdiction:

At voucher issuance,

- Families will receive a briefing that will contain information on the LACDA's portability process and general policies and procedures. See Chapter 8, Section 8.4 for a detailed list of information provided at the briefing session.
- Families will be informed of the LACDA's criminal background policies and that they will undergo a background check. The family will be offered an opportunity to return to their originating PHA.
- If it is determined before a contract is effective that a family member is unsuitable due to a criminal background check the family will be given the options of returning to the originating PHA or excluding the culpable family member.

- If it is determined after a contract is effective that a family member is unsuitable and the LACDA is billing the originating PHA, the family will have the option of returning to the originating PHA or exclude the culpable household member.
- If it is determined after the contract is effective that a family member is unsuitable and the LACDA has absorbed the contract, the family will only have the option of excluding the culpable household member and will not be allowed to return to the originating PHA.

The contract will be terminated if it has been absorbed and if the family chooses not to exclude the culpable household member or there are no other adult eligible household members.

#### **13.5.4 Terminations**

In cases where the LACDA is administering a contract on behalf of another PHA, the LACDA will notify the initial PHA in writing of any termination of assistance within 30 calendar days of the termination.

#### **13.5.5 Informal Hearings/Reviews** **[24 CFR §982.555]**

If an informal hearing is required and requested by the family, the LACDA will conduct the hearing only if the participant has been assisted within the LACDA's jurisdiction. Such hearings will be conducted using the regular hearing procedures included in this plan. Families who have not yet received assistance in the LACDA's jurisdiction are eligible for informal reviews, as detailed elsewhere in this administrative plan.

The initial PHA will be responsible for collecting amounts owed to that public housing agency by the family for claims paid and for monitoring repayment. If the initial PHA notifies the LACDA that the family is in arrears or the family has refused to sign a Repayment Agreement, the LACDA will terminate assistance to the family.

## **Chapter 14:**

# **CONTRACT TERMINATIONS**

### **14.1 INTRODUCTION**

The chapter identifies the key documents/contracts that set forth the responsibilities of each party involved in the rental assistance relationship and outlines the policies and procedures under which these contracts can be terminated.

### **14.2 DESCRIPTION OF DOCUMENTS**

There are three parties involved in the rental relationship: the assisted family, the owner and the LACDA.

The rights and responsibilities of the assisted family are defined in the voucher or certificate and the Certified Statement of Family Obligations. A copy of the voucher or certificate is provided to the family at admission and each time a new voucher is issued. The family signs the Certified Statement of Family Obligations annually.

The relationship between the family and the owner is outlined in the lease agreement. Generally, the term of the lease is for one year. Although the LACDA is not a part of the lease, HUD regulations allow public housing agencies to act against the family for serious or repeated violations of the lease.

The terms of the relationship between the owner and the LACDA are outlined in the Housing Assistance Payments (HAP) contract. The term of the HAP contract is the same as the term of the lease.

### **14.3 TERMINATION OF THE LEASE BY THE FAMILY: MOVES** **[24 CFR §982.309(c)]**

For continued tenant assistance, the family cannot terminate the lease until after a one-year period or the initial term of the lease, except for material breach of the lease by the owner, cases of foreclosure, or life-threatening situations (as defined in Chapter 13). The lease determines the notice period for termination to the owner. Most leases require, at minimum, a 30-day notification. However, the LACDA recommends that families provide a minimum of a 60-day notice in order to allow enough time for a smooth transition of assistance from the old unit to the new unit. To initiate the lease termination, the family must send a written notice to the owner and the LACDA no less than 30 calendar days before the vacate date.

### **14.4 TERMINATION OF THE LEASE BY THE OWNER: DOMESTIC ABUSE**

An owner or manager may bifurcate (separate) a lease in order to evict, remove, or terminate assistance to any individual who is a tenant or lawful occupant and who engages in criminal acts of physical violence against family members or others, without evicting, removing, or terminating assistance, or otherwise penalizing the victim of such violence which is also a tenant or lawful occupant. Criminal acts are defined as “criminal activity directly related to domestic violence,

dating violence, sexual assault, or stalking against an affiliated individual or other individual”.

**14.4.1 Terminating the Lease During the Initial Term of the Lease**  
**[24 CFR §982.310(a)]**

During the term of the lease, the owner may not terminate the tenancy except for good cause, which includes serious or repeated violations of the lease and/or violations of federal, state or local law that imposes obligations on the family in connection with the use of the unit.

Under such conditions, the owner must provide both the family and the LACDA with a copy of any notice to move or eviction action. An eviction action is defined as a notice to vacate, or a complaint, or other initial pleading used under State or local law to commence an eviction action. Any eviction notice served to a family must specify the grounds for the termination of the tenancy.

An owner may commence termination of a tenancy for good cause by serving a legal notice of termination on the family for the following reasons:

1. Serious or repeated violation of the terms and conditions of the lease [24 CFR §982.310(a)(1)];
2. Violation of federal, state or local law that imposes obligations on the tenant in connection with the occupancy or use of the premises [24 CFR §982.310(a)(2)]; and
3. Other good cause, [24 CFR §982.310(a)(3)] including:
  - Criminal activity by the tenant, any member of the household, a guest or another person under the tenant's control that threatens the health, safety or right to peaceful enjoyment of the premises by the other residents, or persons residing in the immediate vicinity of the premises [24 CFR §982.310(d)];
  - Any drug-related criminal activity on or near the premises; or
  - Tenant disturbance of neighbors, destruction of property, or behavior resulting in damage to the premises.

**14.4.2 Terminating the Lease After the Initial Term of the Lease**

After the initial term of the lease, the owner may terminate the lease for other good cause. Examples of other good cause include:

- Business or economic reason for regaining possession of the unit;
- Owner's desire to repossess the unit for personal or family use or for a purpose other than residential property;

When terminating the lease for business or economic reasons, the owner is required to provide a 90-day notice to both the family and the LACDA.

**14.4.3 Requests for Criminal Records by Project-Based Section 8 Owners**  
**[24 CFR §5.903(d)(3)]**

Project-based Section 8 owners (excludes housing choice voucher owners), that have contracts with the LACDA, may request that the LACDA obtain criminal records, on their behalf, for the purpose of eviction or lease enforcement. The LACDA will, however, charge a fee in order to cover costs associated with the review of criminal records.

Project-based owners must submit the following items in order for the LACDA to process criminal records. Owner requests must include:

1. A copy of a signed consent form from each adult household members, age 18 years and older. Included in the consent form must be a legible name, the date of birth, a California Identification Number, and a Social Security number. This information will be used for the sole purpose of distinguishing persons with similar names or birth dates.
2. An owner's criteria or standards for evicting drug criminals in accordance with HUD regulations (§ 5.857 of 24 CFR Parts 5 et al.); or criteria for evicting other criminals (§ 5.858 of 24 CFR Parts 5 et al.); or criteria for lease enforcement.

Once the LACDA obtains the criminal records, a determination will be made as to whether a criminal act, as shown by a criminal record, can be used as a basis for eviction or lease enforcement. The LACDA will base its determination in accordance with HUD regulations and the owner criteria.

It is important to note that the LACDA will not disclose the participant's criminal conviction record, nor the content of that record to the owner unless the owner is proceeding with a judicial eviction process. In the case of a judicial eviction, the owner must provide the LACDA with a certification that the criminal records are necessary to proceed with the eviction.

#### **14.5 MUTUAL TERMINATION OF THE LEASE**

In cases where the owner and the family agree to terminate the lease, both parties have an obligation to notify the LACDA in writing at least 30 calendar days in advance of the vacate date in order that LACDA may avoid overpayment to the owner. A mutual termination of the lease will not be accepted if it is within a one-year period of the participant's last move or within the initial term of the lease.

#### **14.6 TERMINATION OF THE HAP CONTRACT BY THE LACDA** **[24 CFR §982.453 – §982.454]**

The LACDA will terminate the HAP contract as follows:

1. When the LACDA terminates program assistance for the family.
2. When the owner has breached the HAP contract.

Any of the following actions will be considered a breach of the HAP contract by the owner:

- The owner has violated any obligation under the HAP contract for the dwelling unit, including the owner's obligation to maintain the unit according to housing quality standards, including any standards the LACDA has adopted in this policy [24 CFR §982.453(a)(1)].

- 
- The owner has violated any obligation under any other HAP contract under Section 8 of the 1937 Act (42 U.S.C. 1437f) [24 CFR §982.453(a)(2)].
  - The owner has committed fraud, bribery or any other corrupt or criminal act in connection with any federal housing program [24 CFR §982.453(a)(3)].
  - The owner has failed to comply with regulations, the mortgage or note, or the regulatory agreement for projects with mortgages insured by HUD or loans made by HUD [24 CFR §982.453(a)(4)].
  - The owner has engaged in drug-related criminal activity [24 CFR §982.453(a)(5)].
  - The owner has committed any violent criminal activity [24 CFR §982.453(a)(6)].
3. If the family is required to move from a unit which is overcrowded based on the LACDA's current subsidy standards [24 CFR §982.403(a)].
4. If funding is no longer available under the ACC [24 CFR §982.454].
- Before terminating HAP contracts based on insufficient funding, the LACDA is required to ensure that the determination of insufficient funding is documented. The LACDA will consider funding insufficient if it is determined that the projected year-end subsidy falls short of the authorized budget amount.
  - The LACDA will determine the number of families that must be terminated and will present the Board of Commissioners with a recommended method for terminating HAP contracts, taking into consideration the administrative cost associated with housing a family, the length of a family's program participation, and a family's overall good standing within the program. Following the Board of Commissioner and HUD notification, the LACDA will terminate HAP contracts.
  - Contracts of elderly and disabled families will not be subject to termination.
  - Terminated families will be placed on the waiting list and will receive a preference for assistance from the waiting list.

The LACDA may terminate the HAP contract if the owner has violated any obligation under any other HAP contract under Section 8 of the 1937 Act (42 U.S.C. 1437f) [24 CFR §982.453(a)(2)]. The LACDA will consider the following list of factors in determining whether to terminate the HAP contract for a violation of another HAP contract:

- The nature of the breach
- The location of the other units under contract compared to the subject unit
- The impacts on participants in other the units

Additionally, an owner who breaches a HAP contract may be disapproved to participate in LACDA programs, as detailed in Section 9.11 (Owner Disapproval). The LACDA's rights and remedies against the owner under the HAP contract include recovery of overpayments, abatement or other reduction of housing assistance payments, termination of housing assistance payments, and termination of the HAP contracts.

Request for reasonable accommodations relating to termination of HAP contracts will be reviewed on a case-by-case basis.

**14.7 HAP PAYMENTS AND CONTRACT TERMINATIONS**  
**[24 CFR §982.311]**

When a HAP contract terminates, the LACDA will make payments in accordance with the HAP contract and depending on the reason for the contract termination.

In cases involving a tenant notice to move or a mutual termination, not involving an eviction action, the LACDA will pay the owner for the entire last month that the family was in the unit regardless of the actual day of the month that the family moved out. The LACDA may also pay HAP on behalf of the family for the new unit in the same month.

In cases involving evictions, the LACDA will continue to pay the HAP until the day the family moves out or is evicted [24 CFR §982.311(b)].

In cases involving termination of assistance due to insufficient funding, families will receive a minimum of 30 day notice of termination of assistance.

In cases involving termination of assistance for reasons other than insufficient funding, the LACDA will notify the owner and the family of the proposed termination date. If the family does not request a hearing or the hearing is decided in the LACDA's favor, the HAP payments will terminate in accordance with the notification. If a family continues to occupy the unit after assistance is terminated, the family is responsible for the total amount of rent due to the owner.

If HAP payments are released to the owner for periods of time beyond the dates set forth above, the owner will be required to return all monies to the LACDA within 30 calendar days or within the time specified in any approved repayment agreement. The LACDA also reserves the right to deduct any monies from other HAP payments being made to the owner by the LACDA. If the owner fails to repay the HAP, the account will be forwarded for further action.



## **Chapter 15:**

### **TERMINATION OF ASSISTANCE**

#### **15.1 INTRODUCTION** **[24 CFR §982.552(a)]**

HUD requires the LACDA to terminate assistance for certain offenses. HUD permits the LACDA to terminate assistance for a family because of the family's action or failure to act. The LACDA will provide families with a written description of the family obligations under the program, the grounds under which the LACDA can terminate assistance, and the LACDA's informal hearing procedures. This chapter describes when the LACDA is required to terminate assistance, and the LACDA's policies for the termination of assistance.

#### **15.2 FORMS OF TERMINATION** **[24 CFR §982.552(a)(3)]**

Termination of assistance for a participant may include any or all of the following:

1. Refusal to enter into a HAP contract or approve a lease
2. Termination of HAP under an outstanding HAP contract
3. Refusal to process or provide assistance under portability procedures

The LACDA will not terminate assistance of a participant based solely upon incidences of domestic violence, dating violence, sexual assault, or stalking. If termination is based upon behavior resulting from disability, the LACDA will delay the termination in order to determine if there is a reasonable accommodation, pursuant to law, that would cure the grounds for the termination.

#### **15.3 FAMILY NO LONGER REQUIRES ASSISTANCE (ZERO ASSISTANCE)** **[24 CFR §982.455]**

The LACDA is required to automatically terminate the HAP contract 180 calendar days after the last housing assistance payment is made to the owner. A family receiving no assistance may remain in the unit for up to 180 calendar days after the last HAP payment. If the family is still in the unit after 180 calendar days, assistance is terminated. If within the 180-day period, an owner rent increase or a decrease in the TTP causes the family to be eligible for a housing assistance payment, the LACDA will resume assistance payments for the family.

In order for a family to move to another unit during the 180 calendar days, the rent for the new unit would have to be high enough to necessitate a housing assistance payment.

#### **15.4 MANDATORY TERMINATION OF ASSISTANCE**

HUD requires the LACDA to terminate assistance under the following circumstances:

1. Failure to Provide Consent [24 CFR §982.552(b)(3)].

If any member of the family fails to sign and submit to HUD or LACDA required consent forms for obtaining information

2. Failure to Document Citizenship [24 CFR §982.552(b)(4) and 24 CFR §5.514(c)]

The LACDA must terminate assistance if

- A family fails to submit required documentation within the required timeframe concerning any family member's citizenship or immigration status;
- A family submits evidence of citizenship and eligible immigration status in a timely manner, but the United States Citizenship and Immigration Services (USCIS) primary and secondary verification does not verify eligible immigration status of the family;
- No member of the family is an U.S. citizen or eligible immigrant.

3. Failure to Disclose and Document Social Security Numbers [24 CFR §5.218(c)].

The LACDA is required to terminate assistance for participant families in which no members are U.S. citizens or eligible immigrants. If a family member does not establish citizenship or eligible immigration status as required, the LACDA will prorate the assistance, or if there are no eligible family members remaining, the LACDA will propose program termination and provide the opportunity for an informal hearing, as explained in Chapter 16.

Families are required to submit evidence and sign declarations of their citizenship or eligible immigration status. If the LACDA obtains substantive documentation (such as a permanent resident card or information from another agency) that contradicts a family member's declaration of citizenship, an investigation will be conducted and the individual given an opportunity to present relevant information.

- If the family (or any member) claimed eligible immigrant status and the USCIS primary and secondary verifications failed to document the status, the family may make an appeal to the USCIS and request a hearing with the LACDA either after the USCIS appeal or in lieu of the USCIS appeal.
- If the family member is unable to verify their citizenship, the LACDA may give the individual an opportunity to provide a new declaration as an eligible immigrant or to elect not to contend their status. The LACDA will then verify eligible status, and terminate, or prorate as applicable.
- Assistance may not be terminated while verification of the participant family's eligible immigration status is pending.

After the LACDA has made a determination of ineligibility, the family will be notified of the determination and the reasons and informed of the option for prorated assistance (if applicable) or the proposed termination.

The LACDA will terminate assistance for misrepresentations or submission of false information.

4. Methamphetamine Manufacture or Production [24 CFR §982.553(b)(1)(ii)]

The LACDA must terminate assistance if any household member has ever been convicted of the manufacture or production of methamphetamine on the premises of federally assisted housing.

5. Death of the Sole Family Member [24 CFR §982.311(d) and Notice PIH 2010-9]

The LACDA must immediately terminate program assistance for deceased single member households.

6. Failure of Students to Meet Ongoing Eligibility Requirements [24 CFR §982.552(b)(5) and FR 4/10/2006].

If any family member fails to meet the eligibility requirements concerning individuals enrolled at an institution of higher education as specified in Section 2.5

## **15.5 MANDATORY POLICIES AND OTHER AUTHORIZED TERMINATIONS**

### **[24 CFR §982.553(b) and §982.551(l)]**

HUD requires the LACDA to establish policies that permit the LACDA to terminate assistance if the LACDA determines that:

- Any household member is currently engaged in any illegal use of a drug or has a pattern of illegal drug use that interferes with the health, safety, or right to peaceful enjoyment of the premises by other residents.
- Any household member's abuse or pattern of abuse of alcohol may threaten the health, safety, or right to peaceful enjoyment of the premises by other residents.
- Any household member has violated the family's obligation not to engage in any drug-related criminal activity.
- Any household member has violated the family's obligation not to engage in violent criminal activity.

### **15.5.1 Use of Illegal Drugs and Alcohol Abuse**

In accordance with HUD requirements, the LACDA will terminate a family's assistance if any household member is currently engaged in any illegal use of a drug or has a pattern of illegal drug use that interferes with the health, safety, or right to peaceful enjoyment of the premises by other residents.

The LACDA will terminate assistance if any household member's abuse or pattern of abuse of alcohol threatens the health, safety, or right to peaceful enjoyment of the premises by other residents.

### **15.5.2 Drug-Related Criminal Activity**

Drug-related criminal activity includes the manufacture, dispensation, distribution, sale, use or possession of illegal drugs. An “illegal drug” is defined as any controlled substance, in any amount, as defined by the United States Code, Title 21, section 802, including but not limited to narcotics, amphetamines, hallucinogens, cocaine, marijuana, medical marijuana, designer drugs, or other intoxicants. This definition also specifically includes over the counter medications used in the manufacture of illegal drugs or for the purposes of becoming intoxicated, and pharmaceutical medications which are used either without being prescribed by a licensed physician or in excess of the amount prescribed by a physician for the purposes of becoming intoxicated.

Drug-related criminal activity does not include the prior use or possession of a controlled substance if the family member had an addiction to the substance and has recovered or is recovering from the addiction and does not currently use or possess the substance and has demonstrated successful completion of a rehabilitation program [24 CFR §982.553(b)].

In accordance with HUD requirements, the LACDA’s policy regarding drug-related criminal activity is as follows:

- The LACDA may propose termination against the family for drug-related criminal activity that occurs on or off the premises of the assisted unit, or drug-related criminal activity committed by a guest or invitee of any family member on the premises of the assisted unit. An arrest or conviction is not required to deny or terminate assistance.
- The LACDA may terminate a participant’s assistance if they have been arrested, convicted or whose tenancy is being terminated due to drug-related criminal activity or whose activities, including the activities of their guests or invitees, have created a disturbance in the building or neighborhood.
- Will terminate assistance if the family violates the lease for drug-related criminal activity.

In appropriate cases, the LACDA may permit the family to continue receiving assistance if family members determined to have engaged in the prescribed activities will not reside and/or visit in the unit.

### **15.5.3 Violent Criminal Activity**

Violent criminal activity includes any criminal activity that has as one of its elements the use, attempted use, or threatened use of physical force against a person or property, and the activity is being engaged in by any family member, their guests or invitees. Violent criminal activity also includes activity which occurs within the family, such as during domestic disputes.

In accordance with HUD requirements, the LACDA’s policy regarding violent criminal activity is as follows:

- The LACDA may propose termination against the family for violent criminal activity that occurs on or off the premises of the assisted unit. An arrest or conviction is not required to deny or terminate assistance.

- The LACDA may terminate a participant's assistance if they have been arrested, convicted or whose tenancy is being terminated due to violent criminal activity or whose activities, including those of their guests and invitees, have created a disturbance in the building or neighborhood.
- The LACDA will terminate assistance if the family violates the lease for violent criminal activity.

Incidents or threats of abuse, or criminal activity related to abuse engaged in by a member or guest of the participant's household, will not be grounds for termination of the victim or threatened victim of the abuse.

In appropriate cases, the LACDA may permit the family to continue receiving assistance if family members determined to have engaged in the prescribed activities will not reside in the unit.

#### **15.5.4 Other Criminal Activity** **[24CFR§982.553(a)(ii)(A)(3)]**

Other criminal activity includes any criminal activity which may threaten the health, safety, or right to peaceful enjoyment of the premises by other residents or persons residing in the immediate vicinity of the premises.

### **15.6 OTHER AUTHORIZED REASONS FOR TERMINATION OF ASSISTANCE** **[24 CFR §982.552(c), Pub.L. 109-162]**

HUD permits the LACDA to terminate assistance under other circumstances. The LACDA may at any time terminate program assistance to a participant, for any of the following reasons:

1. The family fails to comply with any family obligation under the program as listed in Section 15.8 of this plan [24 CFR §982.551].
2. Any member of the family has been evicted from federally assisted housing in the last five years and the family failed to disclose the information at admission to the program [24 CFR §982.552(c)(1)(ii)].
3. The family fails to provide critical eligibility information that may have deemed the family ineligible for assistance during the admissions process.
4. Any family member has committed fraud, bribery, or any other corrupt or criminal act in connection with any federal housing program [24 CFR §982.552(c)(1)(iv)].
5. The family currently owes rent or other amounts to the LACDA or to another housing agency in connection with Section 8 or public housing assistance under the 1937 Act [24 CFR §982.552(c)(1)(v)].
6. The family has not reimbursed the LACDA or any housing agency for amounts paid under a HAP contract to an owner for rent, damages to the unit, or other amounts owed by the family under the lease [24 CFR §982.552(c)(1)(vi)].
7. The family has breached the terms of a repayment agreement entered with the LACDA. [24 CFR §982.552(c)(1)(vii)].

8. The family has engaged in or threatened abusive or violent behavior toward LACDA personnel [24 CFR §982.552(c)(1)(ix)].
  - "Abusive or violent behavior" includes verbal as well as physical abuse or violence. Use of expletives that are generally considered insulting, racial epithets, or other language, written or oral, that is customarily used to insult or intimidate, may be cause for termination.
  - "Threatening" refers to oral or written threats or physical gestures that communicate intent to abuse or commit violence.
  - Actual physical abuse or violence will always be cause for termination.

The LACDA will not terminate a family's assistance because of the family's failure to meet its obligations under the Family Self-Sufficiency program [24 CFR §982.552(c)(1)(viii)].

#### **15.6.1 Registered Sex Offenders**

If it is brought to the attention of the LACDA that a current program participant is subject to a lifetime sex offender registration requirement in any state, the LACDA will review the matter on a case-by-case basis. If the participant was erroneously admitted (the household member was subject to a lifetime registration requirement at admission and was admitted after June 25, 2001), the LACDA must immediately pursue termination of assistance for the household member.

If the LACDA erroneously admitted a lifetime sex offender, it must offer the family the opportunity to remove the ineligible family member from the household. If the family is unwilling to remove that individual from the household, the LACDA **must** terminate assistance for the household.

### **15.7 TERMINATING THE ASSISTANCE OF DOMESTIC VIOLENCE, DATING VIOLENCE, SEXUAL ASSAULT OR STALKING VICTIMS AND PERPETRATORS**

#### **[24 CFR §5.2005(d)(2)]**

VAWA gives the LACDA the right to "terminate assistance to any individual who is a tenant or lawful occupant and who engages in criminal acts of physical violence against family members or others, without evicting, removing, terminating assistance to, or otherwise penalizing the victim of such violence who is also a tenant or lawful occupant."

VAWA does not limit the LACDA's right to terminate the assistance of any participant if the LACDA "can demonstrate an actual and imminent threat to other tenants or those employed at or providing service to the property if that tenant is not evicted or terminated from assistance."

In determining whether a participant who is a victim of domestic violence, dating violence, sexual assault or stalking is an actual and imminent threat to other tenants or those employed at or providing service to a property, the PHA will consider the following, and any other relevant, factors:

- Whether the threat is toward an employee or tenant other than the victim of domestic violence, dating violence, sexual assault, stalking, as well as verbal, psychological, economic, or technological abuse

- Whether the threat is a physical danger beyond a speculative threat
- Whether the threat is likely to happen within a short period of time
- Whether the threat to other tenants or employees can be eliminated in some other way, such as by helping the victim relocate to a confidential location

If the tenant wishes to contest the LACDA's determination that he or she is an actual and imminent threat to other tenants or employees, the tenant may do so as part of the informal hearing process.

#### **15.7.1 Documentation of Abuse** **[24 CFR § 5.2007]**

When a participating family is facing termination of assistance for reasons related to domestic violence, dating violence, sexual assault, stalking, as well as verbal, psychological, economic, or technological abuse claims protections under VAWA, the LACDA will request in writing that the individual submit documentation affirming that claim.

The LACDA will accept either of the following forms of documentation:

- A completed and signed HUD-approved certification form (Form HUD-5382, Certification of Domestic Violence, Dating Violence, Sexual Assault, or Stalking), which must include the name of the perpetrator only if the name of the perpetrator is safe to provide and is known to the victim.
- A record of a Federal, State, tribal, territorial or local law enforcement agency (such as a police report), court, or administrative agency documenting the domestic violence, dating violence, sexual assault, stalking, as well as verbal, psychological, economic, or technological abuse.
- Documentation signed by a person who has assisted the victim in addressing domestic violence, dating violence, sexual assault, stalking, as well as verbal, psychological, economic, or technological abuse or the effects of such abuse. This person may be an employee, agent, or volunteer of a victim service provider, an attorney, a medical or mental health professional. The person signing the documentation must attest under penalty of perjury to the person's belief that the incidents in question are bona fide incidents of abuse. The victim must also sign the documentation.

The request for documentation of domestic violence, dating violence, sexual assault, stalking, as well as verbal, psychological, economic, or technological abuse will be in writing and will specify a deadline of 14 business days following receipt of the request. It will describe the three forms of acceptable documentation, will provide explicit instructions on where and to whom the documentation must be submitted, and will state the consequences for failure to submit the documentation or request an extension in writing by the deadline.

The LACDA reserves the right to waive the documentation requirement if it determines that a statement of other corroborating evidence from the individual will suffice.

The LACDA may, at its discretion, extend the deadline. Any extension granted will be in writing.

### **15.7.2 Conflicting Documentation**

#### **[24 CFR §5.2007(b)(2)]**

In the case where the LACDA receives conflicting certification documents from two or more members of the household each claiming to be a victim and naming one or more of the other petitioning household members as the perpetrator, the LACDA will determine which is the true victim by requiring third-party documentation within 30 calendar days in order to resolve the conflict.

If the participants fail or refuse to provide third-party documentation where there is conflicting evidence, the HA does not have to provide the tenant(s) with the protections contained in HUD form-5380, Notice of Occupancy Rights under the Violence Against Women Act.

### **15.7.3 Terminating the Assistance of a Domestic Violence Perpetrator**

#### **[24 CFR § 5.2005(b)(2)]**

VAWA gives the LACDA explicit authority to terminate assistance to any individual who is a tenant or lawful occupant and who engages in criminal acts of physical violence against family members or others without terminating assistance to, or otherwise penalizing the victim of such violence who is also a tenant or lawful occupant.

The LACDA will terminate assistance to a family member if the LACDA determines that the family member has committed criminal acts of physical violence against other family members or others. This action may not affect the assistance of the remaining, nonculpable family members.

In making the decision to terminate assistance, the LACDA will consider all credible evidence, including, but not limited to, a signed certification (form HUD-5382) or other documentation of abuse submitted to the LACDA by the victim in accordance with this section. The LACDA will also consider the factors in Section 15.9 Consideration of Circumstances. Upon such consideration, the LACDA may, on a case-by-case basis, choose not to terminate the assistance of the culpable family member.

If the LACDA moves forward with terminating the assistance of the culpable family member, the LACDA will do so in accordance with applicable law, HUD regulations, and policies established in Chapter 16. Informal Reviews/Hearings.

### **15.7.4 Notification Requirement**

#### **[24 CFR §5.2005(a)(1)(i)(ii) and §5.2005(a)(2)(iii)]**

When moving forward with terminating assistance, the LACDA will include information about VAWA in notices of termination of assistance. The VAWA information provided will consist of the following documents:

- Form HUD-5382, Certification of Domestic Violence, Dating Violence, Sexual Assault, or Stalking and Alternate Documentation.
- Form HUD-5380, Notice of Occupancy Rights Under the Violence Against Women Act

### **15.7.5 VAWA Confidentiality**

#### **[24 CFR §5.2007(a)(1)(v)]**

All VAWA information provided to the LACDA, including the fact that an individual is a victim of domestic violence, dating violence, sexual assault, stalking, as well as verbal, psychological, economic, or technological abuse shall be retained in confidence, and will not be entered into any shared database or provided to any related entity, except to the extent that disclosure is:

- Requested or consented to by the individual in writing to release the information on a time limited basis;
- Required for use in an eviction proceeding or hearing regarding termination of assistance from a covered program; or
- Otherwise required by applicable law.

### **15.8 FAMILY OBLIGATIONS**

#### **[24 CFR §982.551]**

Participating families of the Section 8 tenant-based programs have a list of obligations that outline the family's responsibilities and prohibited actions. When the family's unit has been approved by the LACDA and the HAP contract has been executed, the family is expected to meet the obligations in order to receive continued rental assistance. Failure to abide by any of the family obligations is grounds for termination.

1. The family must supply any information that the LACDA or HUD determines is necessary in the administration of the program [24 CFR §982.551(b)]. Information includes any requested certification, release or other documentation. Requirements include:
  - Submission of required evidence of citizenship or eligible immigration status (as provided by 24 CFR part 5);
  - Disclosure and verification of social security numbers (as provided by 24 CFR part 5);
  - Providing any information requested by the LACDA or HUD for use in a regularly scheduled or interim determination of family income and composition, including income, assets, and accurate family composition.
2. The family must report all changes in earned and unearned income, assets, expenses, full-time student status, and family circumstances within 10 calendar days of the date the change takes effect. The owner of the unit and the LACDA must approve changes in composition of the assisted family [24 CFR §982.551(b) and §982.551(h)(2)]. The family must:
  - Report the birth, adoption or court-awarded custody of a child;
  - Request LACDA approval to add any other family member;
  - Notify the LACDA when a family member no longer lives in the unit.

If the LACDA gives approval, a live-in aide, foster child, or foster adult may live in the unit. Failure to report changes, making false reports and/or

allowing unauthorized people in the unit is cause for termination from the program.

3. All information supplied by the family must be true and complete [24 CFR §982.551(b)].
4. Maintain the rental unit [24 CFR §982.551(c)]. The family is responsible for any violation of Housing Quality Standards resulting from:
  - Failure to pay for tenant-paid utilities;
  - Failure to furnish required stove and or refrigerator if to be provided by family; or
  - Damage to the unit or grounds by the family or its guests beyond normal wear and tear.
5. The family must allow the LACDA and/or owner to inspect the unit at reasonable times and after reasonable notice and allow the property owner/manager access to the unit to make repairs [24 CFR §982.551(d)].
6. The family may not commit any serious or repeated violation of the lease [24 CFR §982.551(e)].
7. The family must notify the owner and, at the same time, notify the LACDA before the family moves out of the unit or terminates the lease on notice to the owner. The family must promptly give the LACDA a copy of any owner eviction notice [24 CFR §982.551(f) – (g)].
8. The family must use the assisted unit for residence by the family. The unit must be the family's only residence. The family must not sublease or let the unit [24 CFR §982.551(h)(1), (6)].
9. The family must not assign the lease or transfer the unit. In cases where there is a change in the head of household, the lease may be transferred to the new Head but only with the consent of the owner of the property and the LACDA [24 CFR §982.551(h)(7)].
10. Members of the household may engage in legal profit-making activities in the unit, but only if such activities are incidental to primary use of the unit as a residence by members of the family [24 CFR §982.551(h)(5)].
11. The family must supply any information or certification requested by the LACDA to verify that the family is living in the unit, or relating to family absence from the unit, including any LACDA-requested information or certification on the purposes of family absences. The family must cooperate with the LACDA for this purpose. The family must promptly notify the LACDA of absence from the unit [24 CFR §982.551(i)].
12. The family must not own or have any interest in the unit [24 CFR §982.551(j)].
13. The members of the family must not commit fraud, bribery or any other corrupt or criminal act in connection with the programs [24 CFR §982.551(k)].
14. The members of the family, their guests or invitees, may not engage in drug-related criminal activity or violent criminal activity, or other criminal

activity that threatens the health, safety or right to peaceful enjoyment of other residents and persons residing in the immediate vicinity of the premises.

15. The members of the family, their guests or invitees, must not abuse alcohol in a way that threatens the health, safety or right to peaceful enjoyment of other residents and persons residing in the immediate vicinity of the premises.
16. An assisted family, or members of the family, may not receive Section 8 tenant-based assistance while receiving another housing subsidy, for the same unit or for a different unit, under any duplicative (as determined by HUD or in accordance with HUD requirements) federal, State or local housing assistance program [24 CFR §982.551(n)].
17. The family must pay only the amount authorized by the LACDA on the approved lease. Any amount paid by the family other than the authorized amount is considered an illegal side payment and is cause for termination of the housing assistance subsidy. The LACDA may authorize additional payments for other amenities [24 CFR §982.451(b)(4)(ii)].
18. The family must not receive housing choice voucher program housing assistance while residing in a unit owned by a spouse, parent, child, grandparent, grandchild, sister or brother of any member of the family, unless the LACDA has determined (and has notified the owner and the family of such determination) that approving rental of the unit, notwithstanding such relationship, would provide reasonable accommodation for a family member who is a person with disabilities (See Section 9.4 for more information).
19. The family must not have a member that has committed a crime that subjects them to a lifetime sex offender registration requirement imposed by any State sex offender registration program reside in the unit. This is to ensure that no household member or guest is creating or maintaining a threat to the health and safety of other residents or the public.

#### **15.8.1 Missed Appointments and Deadlines**

##### **[24 CFR §982.551]**

It is a family obligation to supply information, documentation, and certifications as needed for the LACDA to complete required processes. The LACDA schedules appointments and sets deadlines in order to obtain the required information. Failure to supply requested information can result in termination of assistance. Examples of failing to supply requested information can include failing to sign necessary documents, failing to return documents or returning incomplete or altered documents, failing to complete all information requested on documents, etc.

The obligations also require that the family keep all appointments and allow the LACDA to inspect the assisted unit. All scheduled inspections are considered “appointments.”

The family will receive information about the requirement to keep appointments, and the number of times that appointments are rescheduled as specified below.

Appointments are scheduled and time requirements imposed for the following events and circumstances:

1. Eligibility for Admissions;
2. Verification Procedures;
3. Voucher Issuance and Briefings;
4. HQS Inspections;
5. Re-examinations; and
6. Appeals (Informal Hearing/Reviews).

Examples of good cause for missing appointments or failing to provide information by deadlines are medical and/or family emergencies. In such cases, the family may be requested to provide verification of such circumstances.

An applicant or participant who fails to keep appointments, or to supply information required by a deadline without notifying the LACDA may be sent a notice of termination of assistance for failure to comply with program regulations.

The family may be granted up to two opportunities before they receive a notice of denial or termination for breach of a family obligation. After issuance of the denial or termination notice, if the family offers to correct the breach within the time allowed to request a review or hearing, the notice may be rescinded after the family corrects the breach, if the family does not have a history of non-compliance. For families with a history of non-compliance, the LACDA may elect to hold the review or hearing.

The LACDA may grant exceptions to this policy as a reasonable accommodation, in accordance with section 1.9.10 and 7.11.10.

### **15.8.2 Enforcing Family Obligations**

#### **Explanations and Terms**

- **HQS Breach**: The inspector will determine if an HQS breach as identified in 24 CFR §982.404(b) is the responsibility of the family. Families may be given extensions to correct HQS breaches as explained in Chapter 10.
- **Lease Violations**: The following criteria will be used to decide if a serious or repeated violation of the lease will cause a termination of assistance [24 CFR §982.310]:
  - If the owner terminates tenancy through court action for serious or repeated violation of the lease.
  - If the owner notifies the family of intention to terminate tenancy for serious or repeated lease violations, and the family moves from the unit prior to the completion of court action, and the LACDA determines that the cause is a serious or repeated violation of the lease based on available evidence.
  - If there are police reports, neighborhood complaints or other third-party information, and the LACDA has verified the information. Lack of

receipts or other proof of rent payments by the family may also be considered verification of lease violations.

- **Family Member Moves Out**: Families are required to notify the LACDA within 10 calendar days if any family member leaves the assisted household [24 CFR §982.551(h)(3)]. When the family notifies the LACDA, they must furnish the following information:
  - The date the family member moved out.
  - The new address, if known, of the family member.
  - A statement as to whether the family member is temporarily or permanently absent.
  - Related income, asset or deduction changes resulting from the member moving.
- **Limitation on Profit-making Activity in Unit [24 CFR §982.551(h)(5)]**: If the business activity area results in the inability of the family to use any of the critical living areas, such as a bedroom utilized for a business which is not available for sleeping, it will be considered a violation.

If the LACDA determines that the use of the unit as a business is not incidental to its use as a dwelling unit, it will be considered a violation of family obligations.
- **Interest in Unit [24 CFR §982.551(j)]**: The owner may not reside in the assisted unit, under any circumstances, including as a live-in aide, regardless of whether the owner is a member of the assisted family, unless assistance is being provided for a mobile home and the family owns the mobile home and rents the pad under the Certificate or Housing Choice Voucher Program.
- **Fraud [24 CFR §982.551(k)]**: In each case, the LACDA will consider which family members were involved, the circumstances, and any hardship that might be caused to innocent members.

## **15.9 CONSIDERATION OF CIRCUMSTANCES**

### **[24 CFR §982.552(c)(2)]**

HUD authorizes the LACDA to consider all relevant circumstances when deciding whether to terminate assistance based on a family's past history except in the situations for which termination of assistance is mandatory. In accordance with PIH Notice 2015-19, the LACDA will not use an arrest record or police report as the sole basis for a decision.

When considering the circumstances of the case, the LACDA will consider the following factors prior to making its decision:

- The seriousness of the case, especially with respect to how it would affect the other residents.
- The extent of participation or culpability of individual family members, including whether the culpable family member is a minor or a person with disabilities, or a victim of domestic violence, dating violence, sexual assault, stalking, as well as verbal, psychological, economic, or technological abuse.

- The length of time since the violation occurred and more recent record of compliance, and the effects of denial or termination of assistance on other family members who were not involved in the action or failure to act, and
- Requests for reasonable accommodation

On a case-by-case basis the LACDA may counsel the family in lieu of termination.

The LACDA may impose, as a condition of continued assistance for other family members, a requirement that family members that participated in or were culpable for the action or failure will not reside in the unit. The LACDA may permit the other members of a family to continue in the program.

**15.10 REQUIRED EVIDENCE**  
**[24 CFR §982.553(c)]**

The LACDA gathers publicly available arrest data related to its participants and will take appropriate action related to program violations.

In determining whether to terminate assistance based on criminal activity, the LACDA may terminate assistance if the preponderance of evidence indicates that a family member has engaged in such activity, regardless of whether the family member has been arrested or convicted.

The LACDA may consider arrests, convictions, no contest pleas, fines, city ordinance violations or other credible preponderance of evidence in determining if a violation has occurred.

The LACDA does not use records for juvenile offenses to terminate assistance to the family, except as may be authorized by State or federal law. The LACDA may consider as evidence criminal records of a minor tried and convicted as an adult in criminal court for such offenses as murder, sex offenses, robbery and arson.

Preponderance of evidence is defined as evidence which is of greater weight or more convincing than the evidence which is offered in opposition to it; that is, evidence which as a whole shows that the fact sought to be proved is more probable than not. The intent is not to prove criminal liability, but to establish that the act(s) occurred. Preponderance of evidence may not be determined by the number of witnesses, but by the greater weight of all evidence.

**15.11 CONFIDENTIALITY OF CRIMINAL RECORDS**  
**[24 CFR §5.903(g)]**

Criminal records received by the LACDA shall be maintained confidential, not misused, nor improperly disseminated and kept locked during non-business hours. Also, all criminal records will be destroyed no later than 30 calendar days after a final determination is made.

**15.12 DISCLOSURE OF CRIMINAL RECORDS TO FAMILY**  
**[24 CFR §5.903(f) and §982.553(d)]**

The applicant or household member requesting to be added to the lease must be provided with a copy of the criminal record and an opportunity to dispute the record.

Applicants will be provided with the opportunity to dispute the record at an informal review. Participants may contest such records at an informal hearing.

### **15.13 NOTICE OF TERMINATION OF ASSISTANCE**

In any instance where the LACDA decides to terminate assistance to the family, the LACDA must give the family a written notice that includes:

1. The reason(s) for the proposed termination;
2. The effective date of the proposed termination;
3. A copy of the most recent voucher or certificate issued to the HOH;
4. A copy of the most recent Certified Statement of Family Obligations signed by the HOH;
5. Information regarding the family's right to request an Informal Hearing to be held before termination of assistance;
6. The date by which a request for an informal hearing must be received by the LACDA; and
7. If applicable, notice of any criminal records, including arrests and convictions, being used as part of the decision to terminate assistance.

A Notice of Confirmation, which is a final notice of determination and date of termination, will then be sent to the participant if no hearing is requested within the allowable time or if the Informal Hearing confirms the termination.

The LACDA will simultaneously provide written notice of the contract termination to the owner so that it will coincide with the termination of assistance. The notice to the owner will not include any details regarding the reason for termination of assistance.

### **15.14 OPTION NOT TO TERMINATE FOR MISREPRESENTATION OF INCOME**

If the family has misrepresented any facts that caused the LACDA to overpay assistance, the LACDA may choose not to terminate and may offer to continue assistance provided that the family agrees to pay the LACDA the amount owed and either pays the LACDA in full or executes a Repayment Agreement and makes payments in accordance with the agreement.

### **15.15 MISREPRESENTATION IN COLLUSION WITH OWNER**

If the family willingly and knowingly commits fraud or is involved in any other illegal scheme with the owner, the LACDA will deny or terminate assistance.

### **15.16 REPORTING TERMINATED FAMILIES TO ENTERPRISE INCOME VERIFICATION (EIV) SYSTEM**

If a family is terminated due to an adverse action or leaves the program owing money to the LACDA, the family will be reported to EIV. Additionally, if any debt is owed, the amount of the debt will be recorded in EIV.



## **Chapter 16:**

### **INFORMAL REVIEWS/HEARINGS**

#### **16.1 INTRODUCTION**

This chapter covers the LACDA's policy and procedures for informal reviews and informal hearings. This chapter defines the LACDA's responsibilities to applicants and participants.

#### **16.2 REASONABLE ACCOMMODATION**

All requests for accommodation will be verified with a reliable, knowledgeable professional so that the LACDA can properly accommodate the need presented by the disability.

Requests for accommodation from persons with disabilities will be granted upon verification that they are reasonable, and they meet the need presented by the disability.

Reasonable accommodation will be made for persons with disabilities that require an advocate or accessible offices. A designee will be allowed to provide information as needed, but only with the permission of the person with the disability.

#### **16.3 INFORMAL REVIEW PROCEDURES FOR APPLICANTS** **[24 CFR §982.554(a)]**

Under certain circumstances, the LACDA offers informal reviews for applicants. Applicants are defined as families who are on the Section 8 waiting list and are awaiting the issuance of a voucher or families who have been issued a voucher but have not yet been assisted under a Housing Assistance Payment (HAP) Contract.

When the LACDA denies assistance to an applicant, the family is notified in writing. The notice contains:

- The reason(s) for the decision;
- The procedure for requesting an informal review if the applicant does not agree with the decision; and
- The time limit for requesting a review.

The LACDA must provide applicants with the opportunity for an Informal Review of Decisions denying issuance of a voucher or participation in the program.

Applicants who are denied assistance based on ineligible immigration status are entitled to an informal hearing (rather than an informal review).

##### **16.3.1 When an Informal Review is Not Required** **[24 CFR §982.554(c)]**

Informal reviews are not required for established policies, procedures, and LACDA determinations such as:

1. Discretionary administrative determinations by the LACDA;
2. General policy issues or class grievances;
3. A determination of the family unit size under the LACDA subsidy standards;
4. Refusal to extend or suspend a certificate or voucher;
5. Disapproval of lease;
6. Determination that the unit is not in compliance with HQS; or
7. Determination that the unit is not in accordance with HQS due to family size or composition.

**16.3.2 Procedure for Review**  
**[24 CFR §982.554(b)]**

Applicants will be required to submit written objections to the LACDA by the close of business day, no later than 15 calendar days from the date of the LACDA's notification of "Notice of Cancellation of Application." The informal review will be conducted within 30 calendar days from the date the request is received.

The informal review will not be conducted by the person who made or approved the decision under review, nor a subordinate of such person. The review may be conducted by:

- A staff person who is not the person who made the decision or his/her subordinate, or
- An individual from outside the LACDA.

A Notice of the Review decision will be provided to the applicant within 30 calendar days after the review. It shall include the decision of the review officer, and an explanation of the reasons for the decision.

All requests for a review, supporting documentation, and a copy of the final decision will be retained in the applicant's file.

Requests for accommodations from persons with disabilities will be granted upon verification that the request is reasonable, and they meet the need presented by the disability on a case-by-case basis.

**16.4 INFORMAL HEARING FOR PARTICIPANTS**  
**[24 CFR §982.555]**

**16.4.1 When an Informal Hearing May Be Requested**  
**[24 CFR §982.555(a)(1)]**

A participant family must be given an opportunity for an informal hearing to consider whether certain LACDA decisions are in accordance with the law, HUD regulations and LACDA policies.

1. A determination of the family's annual or adjusted income, and the use of the income to compute the housing assistance payment.
2. A determination of the appropriate utility allowance (if any) for tenant-paid utilities from the LACDA utility allowance schedule.
3. A determination of the family unit size under the LACDA's subsidy standards.
4. A determination that a certificate program family is residing in a unit with a larger number of bedrooms than appropriate for the family unit size under the LACDA's subsidy standards, or a LACDA determination to deny the family request for a waiver from the standards.
5. A determination to terminate assistance for a participant family because of the family's action or failure to act.
6. A determination to terminate assistance because the participant family has been absent from the assisted unit for longer than the maximum period permitted under LACDA policy and HUD rules.
7. A determination to terminate assistance for a participant family for breach of the HQS caused by the family.

In the cases described in paragraphs (4), (5), (6) and (7) of this section, the PHA must give the opportunity for an informal hearing before the PHA terminates the housing assistance payment for the family under an outstanding HAP contract.

**16.4.2 Notification**  
**[24 CFR §982.555(c)]**

- When the matter in question is:
1. The determination of the family's annual or adjusted income or computation of the housing assistance payment;
  2. Appropriate utility allowance (if any) for tenant-paid utilities; or
  3. Family unit size,

The LACDA must notify the family that they may ask for an explanation of the basis of the LACDA's determination. The family must also be notified that if the family does not agree with the explanation, the family may request in writing an informal hearing on the decision.

- When the matter in question is:
1. Certificate family residing in too large a unit, or the LACDA's refusal to issue a waiver to subsidy standards;
  2. Termination due to the family's action or failure to act; or
  3. Absence from the assisted unit for longer than the maximum period permitted,

The LACDA must give the family prompt written notice that the family may request in writing an informal hearing on the decision.

- When the LACDA has made a decision to:

1. Terminate HAP on behalf of a participant under an active contract;
2. Refuse to re-issue a voucher; or
3. Refuse to execute a new contract with a program participant,

The family must be given written notice of the opportunity for an informal hearing before the termination of Housing Assistance Payments.

➤ The notice must:

1. Contain a brief statement of reasons for the decision;
2. Inform the participant regarding his/her right to an informal hearing;
3. Advise the participant that a request for an informal hearing must be in writing;
4. Advise the participant that the LACDA must receive the request within 15 calendar days of the date of the letter; and
5. Explain the basic elements of the informal hearing, i.e., right of the participant to present evidence, question witnesses, to have representation, the LACDA-designated impartial hearing officer written decision.

#### **16.4.3 Prior to Hearing** **[24 CFR §982.555(e)(2)]**

Before the informal hearing, the family may request an appointment to examine any documents in the family's portion of the file that are directly relevant to the hearing. The family must be allowed to copy any such document at the family's expense. If the PHA does not make the document in the family's file available for examination on request of the family, the PHA may not use the document at the hearing.

Upon request, the LACDA will waive the one-time fee for the family and provide the family a free copy of each relevant document. Duplicate copies of each document will be produced at the family's expense.

The LACDA may also provide information to participants on relevant documents in the possession of other public agencies in order for the participant to contact the agency and obtain a copy of the document. The LACDA may then reference the contents of the document at the hearing through witness testimony.

The LACDA requires that the family submit any documents that are directly relevant to the hearing either before or at the time of the hearing. The LACDA must be allowed to copy any such documents at the LACDA's expense. If the family does not make the document available for examination on request of the LACDA, the family may not rely on the document at the hearing.

During the course of the hearing, if the family offers to submit evidence, the Hearing Officer is not required to but may exercise the discretion to allow the family to submit a document within a specified period.

#### **16.4.4 Hearing Process** **[24 CFR §982.555(d)]**

When a participant family has timely requested a hearing, the LACDA will proceed within 15 calendar days of receipt of the request to notify the participant of the date, time and location of the hearing.

- There may be one postponement of the hearing date by the participant. A request to reschedule must be requested before the scheduled date and may not extend beyond the proposed termination date.
- Any additional postponements may only be for good cause such as, but not limited to hospitalization, illness or injury. Second postponement requests must be supported by verification of the cause.

#### **16.4.5 Hearing Officer** **[24 CFR §982.555(e)(4)]**

The Hearing Officer may be either a LACDA employee or an outside third party contracted by the LACDA. The Hearing Officer must not have made or approved the decision under review nor be a subordinate of the person who made the decision. The Hearing Officer controls the informal hearing and may:

- Control the scope and method of direct and cross examination of witnesses;
- Control the admission and determine relevancy of offered evidence;
- Question witnesses and set time limitations for any portion of the informal hearing process.
- May consider evidence without regard to admissibility under the rules of evidence applicable to judicial proceedings.

The Hearing Officer will audio record the hearing and follow the format set forth below.

#### **16.4.6 Opening**

The Hearing Officer will convene the informal hearing with both parties and their representatives present. (If the participant is represented, the participant will have provided the LACDA written authorization for the representative to do so.)

The Hearing Officer will explain the informal hearing procedures, state the purpose of the hearing, and inform the participant that the hearing will be recorded. The Hearing Officer may request clarification or ask questions of either side or witnesses at any time during the Informal Hearing. Each person present will introduce himself or herself.

#### **16.4.7 Presentations**

Each side will have an opportunity to present its case and be allowed to present witnesses and submit relevant evidence as determined by the Informal Hearing Officer. (Witnesses may be cross-examined at this time.) The LACDA begins the hearing by presenting the Notice of Hearing. The LACDA will then present a copy of the original notification to the participant regarding the matter, followed by the evidence, including testimony of witnesses, which supports the allegations in the notification.

#### **16.4.8 Rebuttals**

Each side will have an opportunity to present rebuttal to the evidence presented.

#### **16.4.9 Final Summary**

Each side is then allowed to summarize its arguments.

#### **16.4.10 Conclusion of Hearing**

The Hearing Officer may continue a hearing if additional information from either party is requested. Otherwise, the Hearing Officer will advise each side that the testimony and evidence will be reviewed, a final decision made, and a determination letter issued stating the decision and the reasons for the decision within 10 calendar days. The decision of the Hearing Officer is final.

The Hearing Officer will use the following principles for the Informal Hearings and decisions:

1. Evidence may be considered without regard to admissibility under the rules of evidence applicable to judicial proceedings.
2. Determinations on the matter being reviewed shall be based on the evidence presented at the hearing.
3. If the issues and differences can properly be resolved at the hearing, the Hearing Officer should attempt to resolve them through mutual consent as long as the resolution is not contrary to applicable law, HUD regulations and/or LACDA's policies.
4. The purpose of the hearing is to determine if the original decision made in the case is in accordance with the law, HUD regulations and LACDA policies.
5. The Hearing Officer may not make a finding contrary to HUD regulations or requirements, contrary to federal, state or local law or exceeding the authority of the Hearing Officer.

### **16.5 WHEN AN INFORMAL HEARING IS NOT REQUIRED [24 CFR §982.555(b)]**

The LACDA is not required to provide a participant family an opportunity for an informal hearing for the following:

1. To review discretionary administrative determinations by the LACDA
2. General policy issues or class grievances;
3. A LACDA determination that an assisted unit is not in compliance with HQS. (However, the LACDA must provide the opportunity for an informal hearing for a decision to terminate assistance for a breach of the HQS caused by the family as described in §982.551(c) and Section 10.8 of this plan);

4. To review decision by the LACDA to exercise or not exercise any remedy against the owner under an outstanding contract, including the termination of HAP to the owner;
5. To review the LACDA's decision not to approve a family's request for an extension or suspension of the term of the voucher;
6. Determination that the unit is not accordance with HQS due to family size;
7. Establishment of the LACDA's schedule of utility allowances for families in the program; or
8. A LACDA determination not to approve a unit or lease.



## **Chapter 17:**

### **OWNER OR FAMILY DEBTS TO THE LACDA**

#### **17.1 INTRODUCTION** **[24 CFR §982.163 and §792]**

This chapter describes the LACDA's policies and guidelines for the recovery of debts and the use of repayment agreements. Before a debt is assessed against a family or owner, the file must contain documentation to support the LACDA's claim that the debt is owed. The file must further contain written documentation of the method of calculation, in a clear format for review by the owner or the family, as appropriate.

When families or owners owe money to the LACDA, every effort will be made to collect the debt. A variety of collection tools to recover debts may be used including, but not limited to:

- Requests for lump sum payments
- Repayment agreements
- Abatements
- Deductions
- Collection agencies
- Credit bureaus
- Civil suits

#### **17.2 REPAYMENT AGREEMENTS FOR FAMILIES** **[24 CFR §792.103]**

A Repayment Agreement as used in this plan is a document entered into between the LACDA and the person who owes a debt to the LACDA. The Repayment Agreement contains:

- Reference to the paragraphs in the family obligations whereby the person is in non-compliance and may be subject to termination of assistance; and
- A statement that the monthly retroactive rent repayment amount is in addition to the family's regular rent contribution and is payable to the LACDA; and
- The terms of the agreement may be renegotiated if there is a decrease or increase in the family's income; and
- Late and missed payments constitute default of the repayment agreement and may result in termination of assistance; and
- An acknowledgment by the person of the debt in a specific amount; and
- The terms of repayment; and
- Any special provisions of the agreement.

### **17.2.1 Late Payments**

A payment will be considered to be in arrears if the payment has not been received by the close of the business day on which the payment was due.

- If the due date is on a weekend or holiday, the due date will be at the close of the next business day.

If the family's repayment agreement is in arrears, the LACDA may do one or more of the following:

- Require the family to pay the entire arrearage plus current month's payment in order avoid loss of assistance;
- Require the family to pay the balance in full in order to avoid losing assistance;
- Pursue civil collection of the balance due; or
- Terminate the housing assistance.

### **17.2.2 Requests To Move**

If the family requests to move to another unit and has a repayment agreement in place, the family will be required to pay the balance in full prior to the issuance of a voucher, regardless of whether or not the family is current with its payments.

Under special circumstances indicated below, the LACDA may make an exception and allow a family to move without paying the entire balance of the debt if the family is current or can become current with its payments:

- HAP contract is terminated due to owner non-compliance
- A natural disaster
- The unit is uninhabitable or has major HQS deficiencies that are not the result of a family action or inaction.
- A life-threatening situation such as the family is a witness to or a victim of a crime and must move for safety reasons. The family will be required to provide proof in such cases.

### **17.2.3 Guidelines for Repayment Agreements**

The LACDA, at its sole discretion, will determine on a case-by-case basis whether or not to offer a family a repayment agreement for monies owed to the LACDA. The offer of a repayment agreement does not constitute an agreement to continue the family's assistance. However, the LACDA will propose termination of the family's assistance upon refusal by the family to enter into a repayment agreement.

Repayment Agreements will be executed between the LACDA and the head of household or other adult family member.

Monthly payments may be decreased in cases of hardship with the prior notice of the family, verification of hardship, and the approval of a LACDA Manager.

If the LACDA offers a repayment agreement, the family has the option to repay retroactive rent balances as follows:

1. In a lump sum amount; or
2. A monthly payment; or
3. A combination of a lump sum and monthly payment.

The LACDA will usually ask that the family pay an initial lump sum (in an amount determined by the LACDA) with the remaining balance to be paid in equal payments over a period of time not to exceed 12 months for amounts under \$2,400 or 24 months for any amount in excess of \$2,400.

In determining the initial lump sum, the LACDA will consider the total amount owed, the ability of the person to make the remaining payments and the percentage of the total sum owed. In most cases, the LACDA will ask the family to pay a significant initial lump sum as part of entering into a Repayment Agreement to help ensure full payment to the LACDA and to reduce the monthly payment. These terms will be negotiated with the tenant.

**Additional Debt Incurred:** If the family has a Repayment Agreement in place and incurs an additional debt to the LACDA:

- The LACDA may choose, at its discretion, to agree to more than one Repayment Agreement at a time with the same family.
- If a Repayment Agreement is in arrears more than 30 calendar days, any new debts must be paid in full.

### **17.3 FAMILY DEBTS OWED FOR UTILITY REIMBURSEMENT PAYMENTS**

Families must repay Utility Reimbursement Payments (URP) made by the LACDA for periods in which the family was not entitled to the URP.

If the amount of the URP owed to the LACDA is \$50 or less, the tenant will be required to pay the debt in full.

### **17.4 FAMILY DEBTS DUE TO FRAUD/NON-REPORTING OF INFORMATION** **[24 CFR §792.103]**

**HUD's Definition of Program Fraud and Abuse:** A single act or pattern of actions that constitutes false statement, omission, or concealment of a substantive fact, made with intent to deceive or mislead, and that results in payment of Housing Choice Voucher Program funds in violation of Housing Choice Voucher Program requirements.

#### **17.4.1 Family Error/Late Reporting**

Families who owe money to the LACDA due to the family's failure to report income or change in allowances or deductions will be required to repay in accordance with the guidelines set forth in 17.2 (Repayment Agreements for Families) of this chapter.

#### **17.4.2 Program Fraud**

At the LACDA's discretion, families who owe money to the LACDA due to program fraud will be required to repay the debt and may be required to accept a repayment

agreement in accordance with the guidelines set forth in Section 17.2 (Repayment Agreements for Families) of this chapter.

In addition, the case may be referred to the Inspector General and/or the LACDA may refer the case for criminal prosecution.

### **17.5 FAMILY DEBTS PAID IN FULL**

If the LACDA determines not to enter into a Repayment Agreement, or if the Repayment Agreement is breached and the LACDA demands payment of the balance in full, the family must pay the full amount due and owing in one lump sum. If the family fails to pay, the LACDA will terminate the family's assistance and may pursue collection through a collection agency or a civil action and may notify credit agencies of the debt. Whether or not the amount is paid, the LACDA does not waive its right to take other action including termination of assistance or referral for criminal prosecution in appropriate cases.

### **17.6 OWNER DEBTS TO THE LACDA**

If the LACDA determines that the owner has retained Housing Assistance or Claim Payments the owner is not entitled to, the LACDA may deduct the amounts owed from future Housing Assistance or Claim Payments owed the owner for any units under contract.

If future Housing Assistance or Claim Payments are insufficient to reclaim the amounts owed, LACDA may do one or more of the following:

- Require the owner to pay the amount in full within 30 calendar days;
- Pursue collections through the local court system;
- Pursue collections through a collection agency; or
- Restrict the owner from future participation;
- Agree to a repayment agreement with the owner for the amount owed. Repayment period may not exceed 2 months; however, an owner may appeal to the Executive Director in writing for additional time.

#### **17.6.1 Owner Debts Due to Fraud**

If the landlord has been overpaid because of fraud, misrepresentation or violation of the contract, the LACDA may terminate the contract and arrange for restitution to the LACDA and/or family as appropriate.

The LACDA will make every effort to recover any overpayments made as a result of landlord fraud or abuse. Possible remedies available to the LACDA include: recovering monies owed from payments otherwise due to the owner, setting up a repayment agreement, referring the debt to a collection agency, or pursuing the matter in a civil court. A determination on the course of action to be taken will be based on the nature of the violation and the amount of the money owed. Generally, if the owner is cooperative, is willing to pay back all monies owed, and all monies will be repaid within 2 months, the LACDA will offer the owner a chance to enter into a Repayment Agreement. However, in cases where the owner knowingly and

willfully violated program rules, the LACDA may seek full repayment in one lump sum.

### **17.7 WRITING OFF DEBTS**

Debts may be written off if:

- The debtor's whereabouts are unknown, and the debt is more than 3 years old.
- A determination is made that the debtor is judgment proof.
- The debtor is deceased and has an insufficient estate.
- The debtor is confined to an institution indefinitely or for more than 3 years.
- The amount is less than \$100 and the debtor cannot be located.
- If a family defaults on a repayment agreement for an amount less than \$50.



## **Chapter 18:**

### **SPECIAL PURPOSE PROGRAMS**

#### **18.1 INTRODUCTION**

The LACDA periodically has the opportunity to apply for targeted funding for special populations. The LACDA often enters into collaborative agreements with other agencies or County departments to qualify for and/or administer these funds. **Special Program policies and procedures are the same as that of the Housing Choice Voucher program except as otherwise noted. If there is a conflict between program regulations and this Administrative Plan, the program regulations have precedence.**

This chapter provides details on the special purpose programs currently administered by the LACDA. :

- Veterans Affairs Supportive Housing (VASH) Program;
- Housing Opportunities for Persons with AIDS Program (HOPWA); and
- Family Unification Program (Family UP).

NOTE: Housing Choice Voucher Welfare-to-Work Program (WtW) Program. This program originally provided assistance to families who were eligible for CalWORKs benefits, were in good standing with the employment/job training program offered by the Los Angeles County Department of Public and Social Services (DPSS) and were in need of housing in order to obtain or retain employment. The LACDA no longer accepts applicants for the Welfare to Work program, however original participants still receive assistance with a Welfare to Work voucher. The LACDA maintains these contracts in accordance with the policies found throughout this Plan for traditional Housing Choice Vouchers.

#### **18.2 DEPARTMENT OF HOUSING AND URBAN DEVELOPMENT - VETERANS AFFAIRS SUPPORTIVE HOUSING (HUD-VASH) PROGRAM**

The HUD-VASH Program provides rental assistance to homeless veterans and their families in combination with case management and clinical services through the Department of Veterans Affairs (VA) at Veterans Affairs Medical Center (VAMC) supportive service sites.

##### **18.2.1 Referral Process/Waiting List**

The LACDA does not maintain a waiting list for the HUD-VASH Program. Instead, the VAMC utilizes a Coordinated Access System to refer homeless veterans and their families to the LACDA for HUD-VASH program rental assistance.

##### **18.2.2 Designated Service Provider**

**[FR-6476-N-01]**

The VA may approve the LACDA and a designated contractor as a Designated Service Provider for veteran selection and intake if the LACDA's HUD-VASH program has unleased vouchers. The VA, however, will continue to determine if a veteran qualifies as a veteran for HUD-VASH-related purposes.

Should the LACDA and a designated contractor be approved as a Designated Supportive Services Provider, the LACDA must not use HCV administrative fees for case management and will have sufficient HUD-VASH vouchers available for veterans referred by the VA. Additionally, the LACDA and its designated contractor will assume the following responsibilities:

- Entering into a Memorandum of Agreement (MOA) with the VA.
- Determine, through processes agreed upon with the partnering VA medical facility, that the veteran meets the VA program participant requirements established by the VA national office.
- Issue of a voucher without the need for a referral.
- Provide temporary case management/supportive services, not exceeding 180 days to the family.
- After no more than 180 days, referral of the veteran to the VA for case management continuation.

### **18.2.3 Eligibility**

To qualify for HUD-VASH rental assistance, applicants must meet HUD's income eligibility requirements. To determine final eligibility, the LACDA may verify all information submitted by applicants.

HUD-VASH applicants are not subject to a criminal background check, except to determine if any member of the family aged 18 and older is subject to a lifetime sex offender registration requirement.

For more specific information on eligibility requirements, refer to Chapter 2 Admission Eligibility Factors and Applicant Requirements.

### **18.2.4 Income Limitation**

#### **[FR-6476-N-01]**

HUD-VASH low-income eligible applicants with up to 80 percent of the median income for the Los Angeles-Long Beach Primary Metropolitan Statistical Area must be assisted, provided they meet all other program eligibility requirements.

### **18.2.5 Income Targeting**

HUD-VASH applicants are not subject to income targeting requirements. The LACDA may include the admission of an extremely low-income HUD-VASH applicant in its income targeting report for the fiscal year in which the family was admitted.

### **18.2.6 Service-Connected Exclusion from Initial Income Eligibility**

#### **[FR-6476-N-01]**

A HUD-VASH applicant's annual income for initial income eligibility will exclude all VA service-connected benefits received, in addition to regular program income exclusions stipulated in section 6.4.2 – Income Exclusions. This is to determine if the veteran's income falls at or below the required low-income threshold of 80% of the average medium income for the Los Angeles-Long Beach Primary Metropolitan Statistical Area.

The service-connected benefits will continue to be considered when calculating a family's total tenant payment, housing assistance payment, and family share.

Since a monthly HAP is required to enter into a HAP contract, this flexibility will be limited to cases where the family's TTP is less than the applicable payment standard or exception payment standard.

### **18.2.7 Net Asset Limitation**

#### **[FR-6476-N-01]**

In accordance with HUD's eligibility restrictions, the LACDA will deny admission if a family has net assets that exceed \$100,000, adjusted by HUD annually following the Consumer Price Index for Urban Wage Earners and Clerical and/or if the family has a present ownership interest in, a legal right to reside in, and the effective legal authority to sell, real property that is suitable for occupancy by the family as a residence.

The LACDA will not enforce the asset limitation rule for a HUD-VASH participant family during a family's income redetermination. The net asset limitation rule in this section will be in effect when the LACDA is mandated to comply with the HOTMA requirements outlined in the Preface of this Administrative Plan.

### **18.2.8 Denial of Participation**

#### **[24 CFR §982.552 and §982.553]**

HUD-VASH applicants may not be denied assistance except for failure to meet income eligibility or for being subject to a state lifetime sex offender registration requirement. If a HUD-VASH applicant is denied assistance, the LACDA will send a copy of the denial notice to HUD Headquarters, Office of Public and Indian Housing, as specified in PIH Notice 2008-37.

### **18.2.9 Verification Procedures**

Since HUD requires that factors of eligibility must be verified, applicants and program participants are required to provide proof of their statements whenever required by the LACDA.

The Homeless Condition Form is not required for VASH participants as the VAMC will verify if the participant is homeless.

### **18.2.10 Social Security Number Verification**

#### **[FR-6476-N-01]**

When verifying Social Security Numbers for homeless veterans and their family members, staff must follow the Social Security Number verification hierarchy outlined in section 7.11.8 – Verification of Social Security Number. In cases where

the family is unable to fulfill these requirements, the LACDA will document in the tenant file the reason for the family's inability to meet the requirements and accept a self-certification, along with at least one third-party document, such as a bank statement, utility or cell phone bill, benefit letter, a Veteran Affairs-issued photo ID or document containing the individual's name.

In the case of a homeless veteran, the LACDA must accept a Certificate of Release or Discharge from Active Duty (DD 214) or the VA-verified Application for Health Benefits (10-10EZ) as verification of a Social Security Number if these forms are available without needing additional documentation. These documents must also be accepted for proof of age purposes. Please note that veterans are also issued photo identification cards by the VA and these cards must be accepted by the PHA in lieu of another type of government-issued photo identification.

#### **18.2.11 Briefing Sessions and Voucher Issuance**

Briefing sessions are conducted for all eligible HUD-VASH applicants. Families are issued a Housing Choice Voucher with an initial search time of a minimum of 120 days. HUD-VASH program participants moving from one unit to the next must also be provided a search time of a minimum of 120 days [FR-6476-N-01].

See Chapter 8 for policies regarding voucher extensions.

#### **18.2.12 Contracts/Tenant Payments**

Similar to the Housing Choice Voucher Program, HUD-VASH program families are contracted based on the payment standards, and participants may pay up to 40% of their adjusted monthly income for the initial lease of a unit.

Unlike the Housing Choice Voucher program, HUD-VASH families may enter into an initial lease of less than 12 months [FR-5596-N-01].

For more specific information on determining total tenant payment, please refer to Chapter 6. For more specific information on the new contract process, request for tenancy approval and contract execution, please refer to Chapter 9.

#### **18.2.13 Exception Payment Standard**

##### **[FR-6476-N-01]**

An exception payment standard of up to 140 percent of the HUD-published FMR or Small Area FMR may be approved for a HUD-VASH family without HUD approval as a reasonable accommodation for a family that includes a person with a disability.

#### **18.2.14 Eligible Housing Types**

Along with other eligible housing types listed in Chapter 9 The New Contract Process, HUD-VASH families may also use the voucher in a unit owned by the VA on the grounds of the VAMC.

### **18.2.15 Re-Examinations**

The LACDA is required to process annual re-examinations. In cases where a family experiences a change in household composition and/or income between annual re-examinations, the LACDA will process an interim re-examination. The family is required to report all changes in earned and unearned income, assets, expenses, full-time student status, and family circumstances within 10 calendar days of the date the change takes effect.

For more specific information regarding causes for processing annual/interim re-examinations and the requirements for completing annual/interim re-examinations, please refer to Chapter 12 (Re-Examination).

### **18.2.16 Lower Minimum Rent**

#### **[FR-6476-N-01]**

Upon request from a HUD-VASH family, the LACDA may consider hardship circumstances before charging a minimum rent. The LACDA may choose to charge a lower minimum rent (including a minimum rent of \$0).

### **18.2.17 Housing Quality Standards (HQS) Inspections**

#### **[24 CFR §982.401 and §982.405]**

Housing leased with a HUD-VASH voucher must meet the HQS performance requirements both at commencement of assisted occupancy, and throughout the assisted tenancy.

To expedite the leasing process for the HUD-VASH Program, the LACDA may pre-inspect available units that veterans may be interested in leasing to maintain a pool of eligible units. If a HUD-VASH family selects a unit that has undergone an HQS pre-inspection within 90 days of the receipt of a Request for Tenancy Approval, the unit may be approved if it satisfies all other requirements for assisted tenancy.

After initial occupancy, HUD-VASH housing will be subject to at least an annual inspection to ensure that the housing continues to meet HQS.

For more specific information, refer to Chapter 10. Housing Quality Standards and Inspections.

### **18.2.18 Terminations**

#### **[24 CFR §982.552 and §982.553]**

HUD-VASH families are required to participate in case management services provided by the VAMC. In cases where the HUD-VASH family failed to comply with this requirement without good cause, at the direction of the VA, the LACDA must propose termination of the family's assistance.

A VA determination that the family no longer requires case management is not grounds for termination.

VASH participants are subject to the Housing Choice Voucher program rules under the family obligations. For more specific information on family obligations, please see Section 15.8 Family Obligations.

### **18.2.19 Program Transition**

If the VAMC determines the family no longer requires case management services, the LACDA will issue the family a regular Housing Choice Voucher in order to retain the VASH voucher for homeless veterans in need of case management services.

### **18.2.20 Portability**

#### **[FR-6476-N-01]**

HUD-VASH families may port before initial lease-up, even when they did not reside in the LACDA's jurisdiction at the time of application.

A family that moves under the portability procedures must not be subject to rescreening (i.e. income limitations and lifetime state sex offender registration requirement) by the LACDA (receiving PHA).

Under portability, with the exemption of victims of domestic violence, dating violence, sexual assault, and stalking, the LACDA must consult with the VA before approving the port.

If a HUD-VASH family ports to a Public Housing Agency where they can be served by the VAMC that services the LACDA's jurisdiction, the receiving Public Housing Agency must bill the LACDA. If a HUD-VASH family ports to another Public Housing Agency with an available VASH voucher and where the family will be served by the VAMC in that area, the receiving Public Housing Agency must absorb the family.

A HUD-VASH family may not port to another Public Housing Agency where there is no VAMC that can serve them. They also may not port where the family will receive case management through the receiving Public Housing Agency's VAMC and the receiving Public Housing Agency does not have an available VASH voucher.

For more specific information on allowable moves and eligibility for portability, please refer to Chapter 13 (Allowable Moves/ Portability).

## **18.3 HOUSING OPPORTUNITIES FOR PERSONS WITH AIDS (HOPWA)**

This program specifically targets individuals and families afflicted by HIV/AIDS. Assistance under this program is provided for one year. After the one-year term, all HOPWA participants in good standing are allowed to transition to the regular Housing Choice Voucher Program. This program is also administered by the LACDA in other cities in addition to the cities currently within the LACDA's jurisdiction.

### **18.3.1 Referral Process/Waiting List**

The LACDA does not maintain a waiting list for the HOPWA Program. Eligible families are identified to apply for this program by pre-selected service providers or other agencies and are referred to the LACDA.

### **18.3.2 Eligibility**

Applicants must meet HUD's eligibility requirements for HOPWA to qualify for rental assistance. In order to determine final eligibility, the LACDA may verify all information submitted by applicants.

For more specific information on eligibility requirements, please see Chapter 2 (Admission Eligibility Factors and Applicant Requirements).

### **18.3.3 Verification Procedures**

Since HUD requires that factors of eligibility must be verified, applicants and program participants are required to provide proof of their statements whenever required by the LACDA.

The Verification of Disability and/or Diagnosis Form must be provided for all individuals claiming a disability, especially a disability that is cited as a qualifying factor for the HOPWA program. Written determinations must be made by a medical professional trained to make such determination.

### **18.3.4 Denial of Participation**

If a family previously participated in any special program and violated a family obligation and was terminated, the family may be denied future participation.

Families may be denied participation in the program if they owe the LACDA, or any other housing agency, money in connection with the Housing Choice Voucher Program or Public Housing assistance.

Families referred by contracted Community-Based Organizations (CBO's), will be sent a denial letter and referred to the CBO if there are any further questions.

### **18.3.5 Criminal Background**

Applicants of the HOPWA Program are not required to submit to a criminal background check to determine eligibility.

### **18.3.6 Briefing Sessions**

Briefing sessions are conducted for all special programs. HOPWA applicants are issued certificates.

For more specific information on voucher issuance and briefings, please see Chapter 8 (Voucher Issuance and Briefing).

### **18.3.7 Contracts/Tenant Payments**

The HOPWA program is contracted based on the Fair Market Rents published by HUD and tenant rental portions are limited to 30% of the participant's adjusted monthly income.

For more specific information on determining total tenant payment, please refer to Chapter 6. For more specific information on the new contract process, request for tenancy approval and contract execution, please refer to Chapter 9.

### **18.3.8 Re-Examinations**

The LACDA is required to process annual re-examinations. In cases where a family experiences a change in household composition and/or income between annual re-examinations, the LACDA will process an interim re-examination. The family is required to report all changes in earned and unearned income, assets, expenses, full-time student status, and family circumstances within 10 calendar days of the date the change takes effect.

For more specific information regarding causes for processing annual/interim re-examinations and the requirements for completing annual/interim re-examinations, please refer to Chapter 12 (Re-Examination).

### **18.3.9 Housing Quality Standards (HQS) Inspections**

#### **[24 CFR §982.401 and §982.405]**

Housing leased with a HOPWA Program funds must meet the HQS performance requirements both at commencement of assisted occupancy, and throughout the assisted tenancy.

After initial occupancy, HOPWA housing will be subject to at least an annual inspection to ensure that the housing continues to meet HQS.

For more specific information, refer to Chapter 10. Housing Quality Standards and Inspections.

### **18.3.10 Terminations**

- **Proposed Terminations:** Community Based Organizations and/or other government units or departments currently contracted by the LACDA to provide supportive services may request termination of housing assistance for a program participant who is in violation of program requirements and/or conditions of occupancy.
- **Terminations:** Housing assistance may be terminated if a family violates specific program requirements and/or the family obligation.

For more specific information on family obligations, please see Chapter 15 (Family Obligations).

### **18.3.11 Portability**

HOPWA participants have no portability rights as long as they continue being assisted under this program. However, after 1 year of HOPWA assistance, eligible participants are converted to the regular Housing Choice Voucher program and become eligible to port out to another Public Housing Agency jurisdiction.

For more specific information on allowable moves and eligibility for portability, please refer to Chapter 13 (Allowable Moves/ Portability).

### **18.3.12 Confidentiality**

To protect a participant's confidentiality as it relates to a medical diagnosis, all communication with persons other than the HOH shall not include any reference

to the Program including its acronym. Communications include, but are not limited to, program forms, emails, and telephone calls.

#### **18.4 HOUSING CHOICE VOUCHER FAMILY UNIFICATION (FUP) PROGRAM**

The FUP program provides rental assistance to families who are in imminent danger of losing or who cannot regain custody of their minor children due to lack of adequate housing and to foster care youth at risk of homelessness. This program is a collaborative effort between the LACDA and the Los Angeles Department of Children and Family Services (DCFS). Eligible program participants are identified by DCFS and referred to the LACDA for rental assistance.

As of March 2022, the LACDA will administer Foster Youth to Independence (FYI) initiative vouchers in partnership with DCFS. On behalf of City and County Continuum of Care (the CoC), the Los Angeles Homeless Services Authority (LAHSA), and the Department of Health Services ((DHS) committed to the maximum extent feasible, to cooperate with the LACDA and DCFS and to provide any assistance needed to administer and achieve the goals of the FYI initiative vouchers.

Under FYI, the LACDA will provide housing assistance on behalf of youth at least 18 years and not more than 24 years of age (have not reached their 25th birthday) who left foster care, or will leave foster care within 90 days, in accordance with a transition plan described in Section 475(5)(H) of the Social Security Act, and are homeless or are at risk of becoming homeless at age 16 or older.

In addition to providing up to 36 months of rental assistance, youth must be provided supportive services to assist the young person on their path to self-sufficiency.

##### **18.4.1 FUP Program Funding**

The number of families and/or youths who may receive assistance under FUP is determined by the number of FUP Housing Choice Vouchers (HCVs) that have been awarded to the LACDA through a competitive application process determined by HUD.

##### **18.4.2 Eligibility**

The Family Unification Program (FUP) is a program under which Housing Choice Vouchers (HCVs) are provided to two different populations. DCFS or LAHSA determines eligibility for participation in FUP by identifying families and youths who meet the eligibility criteria of:

1. Families for whom the lack of adequate housing is a primary factor in:
  - The imminent placement of the family's child or children in out-of-home care, or
  - The delay in the discharge of the child or children to the family from out-of-home care.

2. FUP eligible youth must:

- Be at least 18 years and not more than 24 years of age.
- Have left foster care at age 16 or older or will leave foster care within 90 days, in accordance with a transition plan described in section 475(5)(H) of the Social Security Act; and
- Be homeless or at risk of homeless.

DCFS or LAHSA certifies eligibility of selected families or youths and refers them to the LACDA for rental assistance processing.

Under the FYI, DCFS and the LAHSA as the Coordinated Entry System (CES), will identify FYI Competitive-eligible youth. FYI Competitive-eligible youth currently in foster care will be prioritized and referred to LACDA for an FYI Competitive vouchers directly from DCFS, in partnership with LAHSA-funded DCFS liaisons. Eligible youth without an open DCFS caseload will be referred to the LACDA via CES.

The LACDA conducts an initial assessment of referred FUP applicants to determine eligibility under the provisions of the HCV program. FUP applicants who meet HCV program requirements are processed to receive rental assistance under HCV regulations.

As required by statute, a FUP voucher issued to a FUP-eligible youth may only be used to provide housing assistance for the youth for a maximum of 36 months. There is no statutory limitation on the time a family may receive housing assistance under the program.

For more specific information on eligibility requirements, please see Chapter 2 (Admission Eligibility Factors and Applicant Requirements).

#### **18.4.3 Waiting List Administration**

Due to the fact that families or youth may be placed on the waiting list only by DCFS referral, the LACDA will not give a public notice of the waiting list opening for the FUP applicants. Instead, the LACDA's HCV waitlist will remain open to accept FUP referred families and youth who are not currently on the HCV waitlist.

Whether or not the FUP family or youth are already on the HCV waitlist, the LACDA's waiting list will prioritize these applicants based on the FUP/FYI target for the voucher being issued.

Upon receipt of referrals, the LACDA will compare the names with those of families or youth already on the LACDA's HCV waiting list. Any family or youth on the LACDA's HCV waiting list that DCFS identifies and refers as eligible will maintain their position on the waiting list, will be identified as FUP-eligible, and will be served prior to the DCFS referrals not currently on the HCV waiting list.

Any family or youth certified as eligible and not on the HCV waiting list will be placed on the HCV waiting list for a FUP voucher based on the date and time of the application.

For the purpose of the FUP program, the LACDA will not require that a program applicant qualify for a jurisdictional preference since most applicants are homeless and are unable to provide information about their last known permanent address.

The LACDA reserves the right to cease referrals once all FUP/FYI vouchers are in use and to commence referrals upon voucher turn-over.

#### **18.4.4 Verification Procedures**

Since HUD requires that factors of eligibility must be verified, applicants and program participants are required to provide proof of their statements whenever required by the LACDA.

#### **18.4.5 Criminal Background**

A background check will be performed for all adults (age 18 and over) at the time of initial eligibility, and upon addition of a member(s) to a household. Under no circumstances will the LACDA admit a life-time registered sex offender into the Family Unification Program.

For more specific information on the applicant screening standards used by the LACDA when reviewing criminal records, please see Section 2.8 (Denials of Assistance).

#### **18.4.6 Denial of Participation**

The family must remain FUP-eligible from the referral phases through lease-up.

In order to meet the definition of a FUP eligible family, lack of adequate housing must be a primary factor in the imminent placement of the family's child, or children, in out-of-home care, or in delaying the reunification. If the lack of adequate housing is no longer a primary factor for the family not reunifying, the family is no longer eligible for a FUP voucher and the FUP voucher cannot be issued to the family.

If the FUP voucher has already been issued before the PHA discovers that the reunification will not happen, but the family has not yet leased up under the voucher, the PHA must not execute the HAP contract, as the family is no longer FUP-eligible.

If a FUP applicant previously participated in any special program and violated a family obligation and was terminated, the applicant may be denied future participation.

FUP applicants may be denied participation in the program if they owe the LACDA, or any other housing agency, money in connection with the Housing Choice Voucher Program or Public Housing assistance.

FUP applicants will be sent a denial letter and referred back to DCFS if there are any further questions.

#### **18.4.7 Briefing Sessions**

Briefing sessions are conducted for all eligible applicants.

For more specific information on voucher issuance and briefings, please see Chapter 8 (Voucher Issuance and Briefing).

#### **18.4.8 Voucher Issuance**

Upon verification of minor children who will be returned to the FUP household provided by the DCFS, the bedroom size voucher to be issued to the FUP household will be based upon the number of family members, including the minor children who are to be returned.

#### **18.4.9 Contracts/Tenant Payments**

The FUP program is contracted based on the payment standards, and participants may pay up to 40% of their adjusted monthly income.

For more specific information on determining total tenant payment, please refer to Chapter 6. For more specific information on the new contract process, request for tenancy approval and contract execution, please refer to Chapter 9.

#### **18.4.10 Supportive Services for Foster Youth to Independence (FYI)**

Prior to and after rental housing is secured, the following services will be provided for at least 36 months by DHS :

- Financial Assistance
- Rental Application Fees: application fee that is charged by the owner to all applicants; if applicable.
- Security Deposits (in accordance with state or local law)
- Move in Assistance- First month's rent; if applicable,
- Furnishings: including child safety devices;
- Landlord holding fees; if applicable,
- Moving Costs: moving costs, such as truck rental or hiring a moving company, including certain temporary storage fees;
- Utility Deposits: standard utility deposit required by the utility company for all customers (i.e., gas, electric, water/sewage);
- Utility Payments: including up to six (6) months of arrearages, per service; if applicable,
- Reasonable and appropriate motel/hotel vouchers when rental housing has been identified for the youth but is not immediately available for move-in, provided there are no appropriate emergency shelter beds available and six-months of Aftercare services that will help the youth retain permanent housing.
- Post-move counseling including but not limited to subsequent-move counseling if the client decides to move a second time and landlord/tenant mediation.

DCFS will provide additional case management services to youth with open DCFS cases and who have multiple and complex challenges through various contracted providers that offer various services such as in-home counseling, teaching and demonstrating life skills, short term counseling, long term mental health counseling, domestic violence and substance abuse services, parenting classes, transportation, concrete supports (food, clothing, financial assistance with rent and

deposit, furniture and appliances) and advocacy to navigate various public systems.

The LACDA will assist FYI Competitive-eligible youths who are homeless or at risk of homelessness through its Homeless Incentive Program (HIP), contingent on funding availability.

After Lease-up, the LACDA will encourage FYI Competitive youth to enroll in its existing Family Sufficiency Program (FSS) and encourage currently enrolled FYI Competitive youth to complete the FSS program, with the objective to reduce the dependency on welfare assistance, HCV assistance, public assistance, or any federal, state, or local rent or homeownership subsidies.

As mentioned above, these services will be provided for at least 36 months, prior to and after permanent housing is secured, and will be focused on coordinating and delivering services that ensure long term housing stability.

#### **18.4.11 Re-Examinations**

The LACDA is required to process annual re-examinations. In cases where a family experiences a change in household composition and/or income between annual re-examinations, the LACDA will process an interim re-examination. The family is required to report all changes in earned and unearned income, assets, expenses, full-time student status, and family circumstances within 10 calendar days of the date the change takes effect.

For more specific information regarding causes for processing annual/interim re-examinations and the requirements for completing annual/interim re-examinations, please refer to Chapter 12 (Re-Examination).

#### **18.4.12 Termination of Assistance and Tenancy**

The LACDA's policy and procedures regarding the termination of assistance and tenancy contained in Section 15.8 Family Obligations of this Administrative Plan apply to FUP and in addition, may include the following grounds for termination:

- DCFS may request termination of housing assistance for a program participant who is in violation of program requirements and/or conditions of occupancy.
- The case plan has been changed, and re-unification of the family may not occur within a reasonable time period, as per verification received from the DCFS.
- Housing assistance may be terminated if a family violates specific program requirements and/or the family obligation.
- FUP rental assistance issued to an emancipated youth is limited to a maximum of 36 months.

#### **18.4.13 Extension of FYI Competitive Voucher Assistance for FUP Youth**

The Fostering Stable Housing Opportunities (FSHO) Act provides an extension for up to 24-months beyond the 36-month time-limit for youth who meet certain requirements. For FUPY/FYI tenant-based vouchers, the provisions of FSHO apply to eligible youth who first leased or leases a unit where the effective date of the HAP contract execution is after December 27, 2020. For FUP/FYI Youth project-based vouchers (PBVs), the provisions of FSHO apply to eligible youth who

first entered or enters into a lease agreement for their PBV unit after December 27, 2020.

In addition, to be eligible for a FUP/FYI Youth extension, FUP/FYI Youth must meet one of the following requirements:

1. Must be enrolled in the LACDA's Family Self-Sufficiency (FSS) Program with a signed and active contract of participation;
2. If unable to enroll in the LACDA's FSS program, the FUP/FYI Youth must be engaged in education, workforce development, or employment activities for at least 9-months of the 12-month period preceding the extension; or
3. Be eligible for one of the following statutory exceptions:
  - FUP/FYI Youth who are responsible for the care of a dependent child under the age of 6 or for the care of an incapacitated person;
  - FUP/FYI Youth who are regularly and actively participating in a drug addiction or alcohol treatment and rehabilitation program; or
  - FUP/FYI Youth who are incapable of complying with the requirement to participate in an FSS program or engage in education, workforce development, or employment activities due to a documented medical condition.

If the FUP/FYI -eligible youth is not participating in the LACDA's FSS Program, verification of engagement in education, workforce development, or employment activities must come from the source (i.e. school, employer or workforce development agency), or through certification from the FUP/FYI eligible youth's supportive services provider.

FUP/FYI youth must provide the LACDA with acceptable, written third-party documents, which may include, but is not limited to, verification provided by a medical professional or qualified professional with training and knowledge of the FUP/FYI youth's situation or condition.

#### **18.4.14 Program Transition for Emancipated Youth**

As required by statute, a FUP voucher issued to a FUP-eligible youth may only be used to provide housing assistance for the youth for a maximum of 36 months. If funding and Housing Choice Vouchers are available, the LACDA may prioritize a voucher as outlined under Chapter 4 Admissions Process, specifically Section 4.4 Local Preferences. Applicants must meet all Housing Choice Voucher program eligibility requirements. Admission will be on a first come first serve basis.

#### **18.4.15 Program Administration**

The LACDA policy and procedures contained in the remaining chapters in this Administrative Plan that have not been included in this chapter, will apply to FUP.

## **Chapter 19:**

### **PROJECT-BASED VOUCHER PROGRAM**

#### **19.1 INTRODUCTION**

[24 CFR §983.1, §983.2, and §983.5]

The Project-Based Voucher (PBV) program is authorized by section 8(o)(13) of the U.S. Housing Act of 1937. It is administered by a Public Housing Authority (PHA) that already administers the tenant-based voucher program under the consolidated annual contributions contract (ACC) in 24 CFR 982.151. In the PBV program, the assistance is “attached to the structure,” which may be a multifamily building or single-family building.

The PBV program is funded with a portion of appropriated funding (budget authority) available under the LACDA's voucher ACC. This funding is used to pay housing assistance for both tenant-based and project-based voucher units. Likewise, the administrative fee funding made available to the LACDA is used for the administration of both tenant-based and project-based voucher assistance.

The LACDA has the discretion on whether to operate a PBV program. HUD approval is not required, except that the LACDA must notify HUD of its intent to project-base its vouchers and when the LACDA executes, amends, or extends a HAP contract.

In administering the PBV program, the LACDA's goals are to:

- Attract more affordable developments to the LACDA's jurisdiction;
- Preserve affordable units that might otherwise become market-rate units;
- Increase affordability of housing for families making below 30% of the area median income;
- Further HUD and LACDA goals of de-concentration; and
- Increase housing opportunities for target populations (ex. Elderly, Disabled, Chronically Homeless, Special needs families, Transition Aged Youth)

All provisions in 24 CFR part 982 (Section 8 Tenant-Based Assistance: Housing Choice Voucher Program) apply to the Project-Based Voucher program, except where they are specifically altered in this chapter.

The LACDA may enter into contracts for Project-Based Vouchers based on the policies outlined in this chapter.

#### **19.2 PBV DEFINITIONS**

[24 CFR §983.3]

Admission: The point when the family becomes a participant in the tenant-based or project-based voucher program if the family is not already a tenant-based voucher participant, the date of admission for the project-based voucher program is the first day of the initial lease term (the commencement of the assisted tenancy) in the PBV unit. After admission, and so long as the family is continuously assisted with tenant-based or project-based voucher assistance, a shift from tenant-based

or project-based assistance to the other form of voucher assistance is not new admission.

Agreement to enter into HAP contract (Agreement): A written contract between the LACDA and the owner in the form prescribed by HUD. The agreement defines requirements for development activity undertaken for units to be assisted under this section. When development is completed by the owner in accordance with the Agreement, the LACDA enters into a HAP contract with the owner. The Agreement is not used for existing housing under this section.

Applicant: A family that has applied for admission to the PBV program but is not yet a program participant.

Area where vouchers are difficult to use: An area where a voucher is difficult to use is:

- (i) A census tract with a poverty rate of 20 percent or less, as determined by HUD;
- (ii) A ZIP code area where the rental vacancy rate is less than 4 percent, as determined by HUD; or
- (iii) A ZIP code area where 90 percent of the Small Area FMR is more than 110 percent of the metropolitan area or county FMR.

Comparable tenant-based rental assistance: A tenant-based subsidy to enable a family to obtain decent, safe, and sanitary housing in the LACDA jurisdiction, which meets the following minimum requirements:

- (i) The family's monthly payment is not more than 40 percent of the family's adjusted monthly gross income;
- (ii) The rental assistance contains no limitation as to the length of time the family may receive the assistance;
- (iii) The family is not required to be employed, to seek employment, or to participate in supportive services in order to receive the rental assistance; and
- (iv) The family is able to use the rental assistance in one or more other PHAs' jurisdictions.

Contract units: The housing units covered by a HAP contract.

Development activity: New construction or rehabilitation work done after the proposal or project selection date in order for a newly constructed or rehabilitated housing project to be covered by a PBV HAP contract, including work done pursuant to a rider to the HAP contract in accordance with § 983.157.

Excepted units: Units in a project not counted toward the project cap because they exclusively serve or are made available to certain families.

Excluded units: Units in a project not counted toward the program cap or project cap because they meet certain criteria.

Existing housing: A project that meets the following criteria:

- (i) All the proposed contract units in the project either fully comply or substantially comply with HQS on the proposal or project selection date. (The units must fully comply with HQS before entering into the HAP

contract. The units substantially comply with HQS if:

- a. The units only require repairs to current components or replacement of equipment and/or materials by items of substantially the same kind to correct deficiencies; and
  - b. The LACDA determines all deficiencies can reasonably be corrected within a 30-day period, taking into consideration the totality of the deficiencies in the project.
- (ii) The PHA determines the project is not reasonably expected to require substantial improvement and the owner certifies it has no plans to undertake substantial improvement from the proposal submission date (for projects subject to competitive selection) or the project selection date (for projects excepted from competitive selection) through the first two years of the HAP contract.

Housing assistance payment: The monthly assistance payment for a PBV unit by the LACDA, which includes:

- (i) A payment to the owner for rent to owner under the family's lease minus the tenant rent; and
- (ii) An additional payment to or on behalf of the family, if the utility allowance exceeds the total tenant payment, in the amount of such excess.

Housing credit agency: For purposes of performing subsidy layering reviews for proposed PBV projects, a housing credit agency includes a State housing finance agency, a State participating jurisdiction under HUD's HOME program (see 24 CFR part 92), or other State housing agencies that meet the definition of "housing credit agency" as defined by Section 42 of the Internal Revenue Code of 1986.

Housing quality standards (HQS): The minimum quality standards developed by HUD in accordance with 24 CFR 5.703 for the PBV program, including any variations approved by HUD for the PHA under [24 CFR 5.705\(a\)\(3\)](#).

In-place family: A family residing in a proposed contract unit on the proposal or project selection date.

Newly constructed housing: A project containing housing units that do not exist on the proposal or project selection date and are developed after the date of selection for use under the PBV program.

Partially assisted project: A project in which there are fewer contract units than residential units.

Participant: A family that has been admitted and is currently assisted in the PBV (or HCV) program. If the family is not already a tenant-based voucher participant, the family becomes a participant on the effective date of the initial lease term (the commencement of the assisted tenancy) in the PBV unit.

Premises: The project in which the contract unit is located, including common areas and grounds.

Project: A project can be a single building, multiple contiguous buildings, or multiple buildings on contiguous parcels of land. "Contiguous" in this definition includes "adjacent to," as well as touching along a boundary or a point.

Rehabilitated housing: A project which is developed for use under the PBV program, in which all proposed contract units exist on the proposal or project selection date, but which does not qualify as existing housing.

Substantial improvement: One of the following activities undertaken at a time beginning from the proposal submission date (for projects subject to competitive selection) or from the project selection date (for projects excepted from competitive selection), or undertaken during the term of the PBV HAP contract:

- (i) Remodeling that alters the nature or type of housing units in a project;
- (ii) Reconstruction; or
- (iii) A substantial improvement in the quality or kind of equipment and materials. The replacement of equipment and/or materials rendered unsatisfactory because of normal wear and tear by items of substantially the same kind does not constitute substantial improvement.

Wrong-size unit: A unit occupied by a family that does not conform to the LACDA's subsidy standard for family size, by being either too large or too small compared to the standard.

For a full list of PBV definitions see 24 CFR §983.3 and §983.4.

### **19.3 MAXIMUM AMOUNT OF PBV ASSISTANCE (PERCENTAGE LIMITATION)** **[24 CFR §983.6, §983.54, §983.58, and §983.262]**

The LACDA will commit project-based assistance to no more than 20 percent of its authorized voucher units, as adjusted by units exempt from the project cap, at the time of commitment. If the LACDA is project-basing 50 percent or more of its authorized voucher units, an impact analysis must be conducted.

The LACDA is not required to reduce the number of units to which it has committed PBV assistance under an Agreement or HAP contract if the number of authorized voucher units is subsequently reduced and the number of PBV units consequently exceeds the program limitation. However, the LACDA is responsible for determining the amount of budget authority that is available for project-based vouchers and for ensuring that the amount of assistance that is attached to units is within the amounts available under the ACC, regardless of whether the LACDA has vouchers available for project-basing.

#### **19.3.1 Units Subject to Percentage Limitation**

All PBV units that the LACDA has selected (from the time of the proposal or project selection date) or which are under an Agreement or HAP contract for PBV assistance count toward the 20 percent maximum or increased cap, as applicable, except as provided in section 19.3.3.

#### **19.3.2 Increase Program Cap**

The LACDA may project-base an additional 10 percent of its authorized voucher units at the time of commitment, as adjusted, provided the additional units meet the following conditions:

- (1) The units are part of a HAP contract executed on or after April 18, 2017, or are added on or after that date to any current HAP contract, including a contract

entered into prior to April 18, 2017, and the units fall into at least one of the following categories:

- (i) The units are specifically made available to house individuals and families that meet the definition of homeless under Section 103 of the McKinney-Vento Homeless Assistance Act ([42 U.S.C. 11302](#)), included in [24 CFR 578.3](#).
- (ii) The units are specifically made available to house families that are comprised of or include a veteran. For purposes of the increased cap, a veteran means a person who served in the active military, naval, air, or space service, and who was discharged or released therefrom.
- (iii) The units provide supportive housing to persons with disabilities or to elderly persons, as defined in [24 CFR 5.403](#). Supportive housing means that the project makes supportive services available for all of the assisted families in the project and provides a range of services tailored to the needs of the residents occupying such housing. Such supportive services need not be provided by the owner or on site but must be reasonably available to the families receiving PBV assistance in the project.
- (iv) The units are located in an area where vouchers are difficult to use as defined in 19.2.
- (v) The units replace, on a different site, the units listed in [§ 983.59\(b\)\(1\)](#) and [\(2\)](#) for which the LACDA had authority under [§ 983.59](#) to commit PBV assistance on the original site without the units counting toward the program cap or project cap. The units are eligible under this category only if the LACDA has not committed and will not commit PBV assistance to the original site pursuant to the normally applicable exclusions of those units under [§ 983.59](#). If the LACDA subsequently plans to commit PBV assistance to units on the original site, those proposed units count toward and must comply with the 20 percent maximum or increased cap of this section, as applicable, and the project cap requirements of [§ 983.54](#).

(2) The units are part of a HAP contract executed on or after December 27, 2020, or are added on or after that date to any current HAP contract, including a contract entered into prior to December 27, 2020, and meet the following requirements:

- (i) The units are exclusively made available to Family Unification Program (FUP) youth.

### **19.3.3 Exempt from the Program Cap**

[24 CFR §983.59]

PBV units under the RAD program and HUD-VASH PBV set-aside vouchers do not count towards the 20 percent limitation when the PBV assistance is attached to them.

Excluded units must, in the five years prior to the request for proposals (RFP) or the proposal or project selection date in the case of selection without RFP, fall into

one of the following categories to be exempted from the program cap provided that the HAP contract was entered into on or after April 18, 2017 and the units are removed from all categories prior to the effective date of the HAP contract:

- (1) The units have received one of the following forms of HUD assistance:
  - (i) Public Housing Capital or Operating Funds (Section 9 of the 1937 Act);
  - (ii) Project-Based Rental Assistance (Section 8 of the 1937 Act). Project-based rental assistance under Section 8 includes the Section 8 moderate rehabilitation program, including the single-room occupancy (SRO) program;
  - (iii) Housing For the Elderly (Section 202 of the Housing Act of 1959);
  - (iv) Housing for Persons with Disabilities (Section 811 of the Cranston-Gonzalez National Affordable Housing Act);
  - (v) Rental Assistance Program (RAP) (Section 236(f)(2) of the National Housing Act); or
  - (vi) Flexible Subsidy Program (Section 201 of the Housing and Community Development Amendments Act of 1978).
- (2) The units have been subject to a federally required rent restriction under one of the following programs:
  - (i) The Low-Income Housing Tax Credit program;
  - (ii) Section 515 Rural Rental Housing Loans ([42 U.S.C. 1485](#)); or
  - (iii) The following HUD programs:
    - a. Section 236;
    - b. Section 221(d)(3) Below Market Interest Rate;
    - c. Housing For the Elderly (Section 202 of the Housing Act of 1959);
    - d. Housing for Persons with Disabilities (Section 811 of the Cranston-Gonzalez National Affordable Housing Act);
    - e. Flexible Subsidy Program (Section 201 of the Housing and Community Development Amendments Act of 1978); or
  - (iv) Any other program identified by HUD through Federal Register notice subject to public comment.

Newly constructed units primarily developed to replace the above units continue to be excepted from the project cap.

Units excepted from the program cap are also excluded from the project cap.

#### **19.3.4 Project Cap**

The LACDA may not select a proposal to provide PBV assistance or enter into an Agreement or HAP contract if the number of assisted units in a project is more than the greater of 25 percent of the number of dwelling units (assisted and unassisted) in the project or 25 units.

### **19.3.5 Higher Project Cap**

The LACDA may provide PBV assistance to the greater of 25 units or 40 percent of the number of dwelling units (assisted and unassisted) in the project if the project is located in an area where vouchers are difficult to use.

### **19.3.6 Exceptions to the Project Cap**

PBV units are not counted toward the project cap in the following cases:

- (i) Units exclusively serving elderly families;
- (ii) Units exclusively made available to Family Unification Program (FUP) youth; or
- (iii) Units exclusively made available to households eligible for supportive services available to the residents of the project assisted with PBV assistance. The project must make supportive services available to all PBV-assisted families in the project, but the family may not be required to participate in the services as a condition of living in the excepted unit. Such supportive services need not be provided by the owner or on-site but must be reasonably available to the families receiving PBV assistance in the project and designed to help the families in the project achieve self-sufficiency or live in the community as independently as possible. The supportive services must be made available to the family within 120 calendar days from the family's request.

The PBV HAP contract must specify, and the owner must set aside, the number of excepted units made available for occupancy by families who qualify for the exception. A unit must be occupied by a family who qualifies for the exception to be considered excepted.

### **19.3.7 HAP Contracts Already in Effect**

Projects under HAP contracts in effect prior to April 18, 2017, when the exception of excepted units came into effect and a prior exception for disabled families was removed, or prior to December 27, 2020, when the exception units exclusively for eligible youth came into effect, are governed by those HAP contracts' terms concerning the number and type of excepted units in a project. The owner must continue to designate the same number of contract units and assist the same number and type of excepted units as provided under the HAP contract during the remaining term of the HAP contract and any extension, unless the owner of the project and LACDA mutually agree to change those requirements.

The LACDA and owner may agree to change such HAP contract requirements as it pertains to the exception categories of elderly families and families eligible for supportive services. The LACDA and owner must not change the terms of an existing HAP contract to add a new category of excepted unit.

The PBV contract may not be changed to conform with the HOTMA requirement if the change would jeopardize an assisted family's eligibility for continued assistance at the project (e.g. the excepted units at the project include units designated for families with a household member with disabilities, and changing to the HOTMA standard would result in those units no longer being eligible as

excepted units unless the owner makes supportive services available to all assisted families in the project).

A HAP contract may be amended, at LACDA's discretion, to add additional PBV units in the same project. The LACDA may use this amendment process to add units where applying the new project cap definition results in more PBV units. HOTMA overrides existing regulation so that new units may be added at any time during the term of the HAP contract without being subject to competitive selection procedures. All other requirements of 24 CFR §983.207(b) must be met, including not exceeding the 20 percent program cap.

#### **19.3.8 Increased Program Cap or Excepted Units in a Project Continued Eligibility**

For units under the increased program cap that provide supportive housing to persons with disabilities or to elderly persons, when the member of a family that initially qualified for that supportive housing no longer resides in the unit through circumstances beyond the control of the family (e.g. death of the elderly family member or family member with a disability or long term or permanent hospitalization or nursing care), the remaining family members may continue to reside in the unit. In this case, the unit may continue to count under the increased program cap category for as long as the family resides in that unit. However, the requirements of wrong-sized units apply.

For units under the excepted project cap for supportive services, if the entire family becomes ineligible during the tenancy for all supportive services available to the family, the unit loses its excepted status. This is not applicable to families that have successfully completed participation in supportive services. Although the unit loses its excepted status, the family may not be terminated or evicted from the unit.

For units under the excepted project cap for FUP youth, the youth must vacate the unit once the FUP assistance has expired. The unit loses its excepted status or no longer qualifies under the increased program cap, as applicable, if the youth does not move from the unit upon the expiration of the FUP assistance.

Units that no longer qualify for an excepted status or increased program cap will be substituted for another unit if it is possible, in accordance with section 19.14.5, so that the overall number of excepted units or units under the increased program cap in the project is not reduced. The LACDA may, in conjunction with such substitution, add the original unit to the HAP contract if it is possible to do so in accordance with section 19.14.5, including that such addition does not cause the LACDA to exceed the program cap or become non-compliant with the project cap.

### **19.4 QUALIFYING SUPPORTIVE SERVICES FOR INCREASED PROGRAM CAP AND EXCEPTED UNITS IN A PROJECT**

Families will be offered the opportunity to enroll in either LACDA's FSS program or other Supportive Services Program offered through the project, as a condition of occupancy, however the LACDA will not require families living in excepted units to receive supportive services. Supportive Services offered include, but are not limited to:

- LACDA's Family Self-Sufficiency (FSS) program;
- Case Management
- Mental Health Care
- Substance Use Services
- Employment and Training
- Education program where there is a reasonable expectation of leading to self-sufficiency
- Life Skills
- Physical Health Care
- Benefits Assistance
- Representative Payee
- Legal Assistance
- Child Care (if applicable)
- Adult Day Care

If a family at the time of initial tenancy the family is receiving, and while the resident of an excepted unit has received, FSS supportive services or any other supportive services, and successfully completes the FSS contract of participation or the supportive services requirement, the unit continues to count as an excepted unit for as long as the family resides in the unit.

#### **19.4.1 Supportive Services – Pre-HOTMA Projects**

For projects using the former supportive services statutory exemption (which required that the family be receiving the supportive services) and/or the exemption for families with a household member with disabilities, the LACDA and the owner will continue to operate under the pre-HOTMA requirements and will continue to renew HAP contracts under the old requirements, unless the LACDA and the owner agree by mutual consent to change the conditions to conform with the HOTMA requirement.

#### **19.4.2 Qualifications for Supportive Services – Pre-HOTMA Projects**

It is not necessary that the supportive services be provided at or by the project.

At least one member of the family must be receiving the supportive service for the unit to remain excepted from the 25% cap.

Participation in medical- or disability-related services is not required as a condition of living in an excepted unit, other than a substance use treatment program for the member of the family with the substance misuse disorder, although such services may be offered.

#### **19.4.3 Supportive Services Monitoring – Pre-HOTMA Projects**

Participant compliance with a supportive service contract will be monitored at least annually. The LACDA will request a status update for the participant's supportive service contract at the anniversary of said contract. The LACDA may request a status update on the supportive service contract more frequently, at its discretion.

Providers of supportive services must provide the LACDA any changes to the program within thirty days of when those changes occur. Providers must also

immediately report to the LACDA when a family fails to meet the supportive service contract requirements.

#### **19.4.4 Failure to Meet Supportive Service Requirements – Pre-HOTMA Projects**

When a family living in an excepted unit fails to meet the requirements of a supportive service contract and is living in the excepted unit because of the supportive services received, the LACDA will propose termination of the contract. The family will not be issued a voucher to move.

The owner and participant will be given a sixty-day notice of the proposed termination of the HAP contract. The owner may at that time terminate the lease and issue an order to vacate by the HAP contract termination date.

If a family fails to meet the requirements of the supportive service contract for good cause, as determined by the LACDA, and is qualified to become reinstated in the supportive service program within a reasonable time period, the LACDA may counsel the family on its obligations and allow reinstatement of the supportive service contract.

### **19.5 CHANGES TO DEFINITIONS OF PHA-OWNED HOUSING AND USE OF INDEPENDENT ENTITIES**

**[24 CFR §983.51(e), §983.59, FR-5976-N-03, and PIH Notice 2017-21]**

Definition of PHA-owned units: A unit in a project that is:

- (1) Owned by the PHA (including a controlling interest in the entity that owns the unit)
- (2) Owned by an entity controlled by the PHA
- (3) Owned by an LLC or LP in which the PHA holds a controlling interest in the managing member or general partner

Controlling interest means:

- i. Holding more than 50% of the stock of any corporation; or
- ii. Having the power to appoint more than 50% of the members of the board of directors of a non-stock corporation (such as a non-profit corporation); or
- iii. Where more than 50% of the members of the board of directors of any corporation also serve as directors, officers, or employees of the PHA; or
- iv. Holding more than 50% of all managing member interests in an LLC; or
- v. Holding more than 50% of all general partner interests in a partnership; or
- vi. Having equivalent levels of control (more than 50%) in other ownership structures

A unit is not considered to be PHA-owned when:

- i. The PHA holds a fee interest as ground lessor of the property (land) but not in the building itself

- ii. The PHA holds only a security interest under a mortgage or deed of trust on the unit; or
- iii. The PHA has only a non-controlling interest in an entity that owns the unit

If a unit is PHA-owned as defined above, the PHA must establish a separate legal entity to serve as the owner. Such entity may be a non-profit affiliate of the PHA, LLC, LP, corporation or other legally acceptable entity recognized under State law. Such entity would serve as the owner for purposes of execution of the HAP contract. The PHA and independent entity shall submit a joint certification to the HUD Field Office prior to performing any of the functions listed below, certifying that the PHA and independent entity have no legal, financial, or other connection that would create a bias. A unit of government at a level higher than the LACDA may perform these functions without HUD approval.

The independent entity must perform the following functions:

- (1) Review the PHA's PBV selection process (May also be conducted by HUD Field Office)
- (2) Establish contract rents and determine rent reasonableness
- (3) Provide a copy of the rent reasonableness determination to the PHA and HUD Field Office
- (4) Establish the term of the HAP Contract and any extensions if applicable
- (5) Inspect the units
- (6) Provide a copy of the inspection report to the PHA and HUD Field Office

## **19.6 HOUSING INELIGIBLE FOR ASSISTANCE**

[24 CFR §983.8 and §983.52]

The following types of housing are ineligible under the Project-Based Voucher Program:

- Shared housing;
- Manufactured home space rental;
- Units on the grounds of a penal, reformatory, medical, mental, or similar public or private institution (with the allowable exception of VASH units on medical grounds);
- Nursing homes or facilities providing continuous psychiatric, medical, nursing services, board and care, or intermediate care, except an assisted-living facility that provides home health care services such as nursing and therapy for residents of the housing;
- Units owned or controlled by an educational institution or its affiliate and are designated for occupancy by students of the institution;
- Manufactured homes are ineligible only if the manufactured home is not permanently affixed to a permanent foundation or the owner does not own fee title to the real property (land) on which the manufactured home is located;

- Transitional Housing;
- Subsidized housing;
- Units occupied by owners; and
- Units occupied by ineligible families.

PBV assistance may not be attached to units on which construction or rehabilitation commenced after the date of proposal submission (for housing subject to competitive selection) or the date of the board resolution approving the project-basing of assistance at the project (for housing excepted from competitive selection) and prior to the effective date of an Agreement. At HUD's sole discretion, HUD may approve the LACDA's request for an exception to this prohibition. In determining whether to approve the LACDA request, HUD will consider appropriate factors, including the nature and extent of the construction or rehabilitation that has commenced.

A member of a cooperative who owns shares in the project assisted under the PBV program is not to be considered an owner for purposes of participation in the PBV program.

## **19.7 PROHIBITION OF EXCESS PUBLIC ASSISTANCE**

[24 CFR §983.11]

The LACDA may provide PBV assistance for newly constructed and rehabilitated housing only in accordance with HUD subsidy layering regulations and other requirements. The subsidy layering requirements are not applicable to existing housing.

For newly constructed or rehabilitated housing under a HAP contract, the owner must disclose to the LACDA, in accordance with HUD requirements, information regarding any additional related assistance from the Federal Government, a State, or a unit of general local government, or any agency or instrumentality thereof. Such related assistance includes but is not limited to any loan, grant, guarantee, insurance, payment, rebate, subsidy, credit, tax benefit, or any other form of direct or indirect assistance.

If the additional related assistance meets certain thresholds and other requirements established by HUD through publication in the Federal Register, a subsidy layering review may be required to determine if it would result in excess public assistance to the project.

Housing assistance payments must not be more than is necessary, as determined in accordance with HUD requirements, to provide affordable housing after taking account of such related assistance. The LACDA must adjust, in accordance with HUD requirements, the amount of the housing assistance payments to the owner to compensate in whole or in part for such related assistance.

### **19.7.1 Subsidy Layering Review (SLR)**

The LACDA may only provide assistance in accordance with HUD subsidy layering regulations and other requirements.

A subsidy layering review will not be required to enter into an agreement or to execute a contract between the LACDA and the owner when a project has not received any form of government housing assistance, other than the PBV assistance.

A subsidy layering review is required for any new construction or rehabilitation project receiving a form of government housing assistance in addition to project-based vouchers. The LACDA will not enter into an AHAP with the owner until the project has successfully passed a subsidy layering review by HUD or another HUD-approved agency.

The owner must certify in the HAP contract that the project has not received and will not receive any other form of public assistance during the life of the HAP contract other than that disclosed in the subsidy layering review.

## **19.8 PROJECT RECORD RETENTION**

[24 CFR §983.12]

For each PBV project, the LACDA must maintain the following records throughout the HAP contract term and for three years thereafter:

- (1) Records to document the basis for PHA selection of the proposal, if selection is competitive, or project, if selection is noncompetitive, including records of the PHA's site selection determination and records to document the completion of the review of the selection process in the case of PHA-owned units and copies of the written notice of proposal selection and response of the appropriate party;
- (2) The analysis of impact, if applicable;
- (3) The subsidy layering determination, if applicable;
- (4) The environmental review record, if applicable;
- (5) The Agreement to enter into HAP contract, if applicable;
- (6) Evidence of completion, if applicable;
- (7) The HAP contract and any rider and/or amendments, including amendments to extend the term of the contract;
- (8) Records to document the basis for PHA determination and redetermination of rent to owner;
- (9) Records to document HUD approval of the independent entity or entities, in the case of PHA-owned units;
- (10) Records of the accessibility features of the project and each contract unit; and
- (11) Other records as HUD may require.

## **19.9 PROPOSAL AND PROJECT SELECTION PROCEDURES**

### **19.9.1 [24 CFR §983.51]Competitive Selection**

The LACDA may issue a competitive Request for Proposal (RFP) for PBV proposals. The RFP may not limit proposals to a single site or impose restrictions

that explicitly or practically preclude owner submission of proposals for PBV housing on different sites.

The LACDA will publish an RFP in at least one newspaper of general circulation, as well as post the RFP on the LACDA's website. The submission deadline will be included in the RFP and a detailed application and selection criteria will be provided to all interested parties.

The LACDA may select, without issuing an RFP, a proposal for housing assisted under a Federal, State, or local government housing assistance, community development, or supportive services program that required competitive selection of proposals, where the proposal has been selected in accordance with such program's competitive selection requirements within three years of the PBV proposal selection date. The LACDA may not select a housing assistance proposal using this method if the competition involved any consideration that the project would receive PBV assistance. Additionally, the LACDA may select noncompetitively one or more PBV projects with units made exclusively available to HUD-VASH families on the site of a VA facility.

Once a project is selected to receive PBV assistance, the LACDA will give public notice within 60 days of its selection on its website at [www.lacda.org](http://www.lacda.org).

#### **19.9.2 Exception to Competitive Selection**

The LACDA may select for PBV assistance an existing, newly constructed, or rehabilitated project in which the LACDA has an ownership interest or over which the LACDA has control without following a competitive process. If replacement housing is selected, the LACDA does not have to replace the housing on the same site as the original public housing, but the number of contract units in the replacement project may not exceed the number of units in the original public housing project by more than a de minimis amount for this exception to apply. The public housing properties or sites may be in the public housing inventory at the time of project selection, or they may have been removed from the public housing inventory through any available legal removal tool within five years of the project selection date.

Additionally, the LACDA may select for PBV assistance a project consisting of LACDA-owned units without following a competitive process as long as the project units continue to meet the definition of LACDA-owned for the initial two years of the HAP contract unless there is a transfer of ownership approved by HUD. The LACDA must meet any conditions with respect to selection for PBV assistance of a project consisting of LACDA-owned units without following a competitive process as may be established by HUD through publication in the Federal Register notice after providing opportunity for public comment.

The LACDA can make project-based funding available in its owned properties in response to a written request. A separate request is required per property and must include the following: name and address of the property; the total number of units; requested number of units project-based vouchers, number of vouchers requested per unit size (including square footage for SRO's), proposed rent per unit size, population to be served, and name, title and contact information for the project liaison. An original signature from the Department Director or authorized

delegate is required on the written request. E-mailed and/or faxed requests will not be accepted.

### **19.10 SITE SELECTION STANDARDS**

[24 CFR §983.55]

The site and neighborhood must be reasonably free from disturbing noises and reverberations and other dangers to the health, safety, and general welfare of the occupants. The site and neighborhood may not be subject to serious adverse environmental conditions, natural or manmade, that could affect the health or safety of the project occupants, such as dangerous walks or steps; contamination; instability; flooding, poor drainage, septic tank back-ups or sewage hazards; mudslides; abnormal air pollution, smoke or dust; excessive noise, vibration or vehicular traffic; excessive accumulations of trash; vermin or rodent infestation; or fire hazards.

Additionally, eligible projects must meet the following LACDA requirement:

If any portion of a proposed new construction development site is within 500 feet of a freeway, the project must be designed in such a way as to exclude from this 500-foot freeway “buffer” area any portion of the residential building, as well as play areas, community rooms, gardens, patios, and other areas where residents may reasonably be expected to congregate. The LACDA shall review and approve, at its sole discretion, any site plans for developments of this type.

#### **19.10.1 Environmental Review**

[24 CFR §983.56]

The Project Based Voucher program is subject to National Environmental Policy Act environmental review pursuant to the requirements at 24 CFR Part §983.58 and 24 CFR Part 58.

If it is determined that an environmental review is required for new construction or rehabilitation projects, the LACDA will not commit any funds under PBV assistance nor enter into an AHAP with the owner until HUD approves a release of funds.

For projects or proposals that were selected on or after June 6, 2024, no environmental review is required to be undertaken before entering into a HAP contract for existing housing, except to the extent a Federal environmental review is required by law or regulation relating to funding other than PBV housing assistance payments.

### **19.11 PROJECT SELECTION STANDARDS**

The following criteria will be considered when evaluating proposals for Project-Based Voucher assistance:

1. Housing that serves homeless families;
2. Housing that serves disabled families or individuals;
3. Housing that serves elderly families or individuals;
4. Housing that serves families with children, consistent with the needs indicated by the LACDA’s waiting list; and/or

5. Other documented needs
6. Serving very low-income families in mixed-income projects;
7. Other appropriate criteria consistent with regulation.
8. Housing that provides an appropriate level of supportive services to residents;
9. Housing that serves low- to extremely low-income families for the life of the project;
10. Other criteria consistent with regulation.

#### **19.12 AGREEMENT TO ENTER INTO THE HAP CONTRACT (AHAP)**

If a rehabilitated or newly constructed project, as defined by regulation, is selected by the LACDA to receive Project-Based Vouchers, the LACDA will enter into an Agreement to enter into a Housing Assistance Payment (AHAP) contract with the owner in the form required by HUD.

In the AHAP, the owner agrees to develop the contract units to comply with HQS, and the LACDA agrees that, upon timely completion of the development in accordance with the terms of the AHAP, the LACDA will enter into a HAP contract with the owner for the contract units.

The LACDA may not pay or enter into an agreement if commencement of construction or rehabilitation occurs after proposal submission. Rehabilitation begins with the physical commencement of rehabilitation activity on the housing. Commencement of construction occurs when excavation of site preparation (including clearing of the land) begins.

Delays in completion of rehab/construction may result in termination of the agreement.

The LACDA may extend the completion deadline for unforeseen factors outside of the owner's control.

The owner must obtain the LACDA's approval for any changes in work. If the owner does not do so, the LACDA may set a lower initial rent.

#### **19.13 HOUSING QUALITY STANDARDS (HQS)**

[24 CFR §983.151]

HQS inspections will be conducted in accordance with Chapter Ten of this Plan. The LACDA may not perform inspections on units where there is a direct or indirect interest by any of its employees or officers.

The LACDA will inspect PBV units at the following times:

- Pre-selection – the LACDA will inspect the proposed site before the proposal of Existing Housing selection date. For existing units, units must substantially comply with HQS before the proposal selection date. Units must fully comply before the HAP contract may be executed;
- Pre-HAP Contract;

- Turnover – the LACDA must inspect a unit before a new family moves in. The unit must fully comply with HQS before a family may receive assistance in that unit;
- Annual – The LACDA will conduct inspections on a random sample of at least 20% of contract units in a building annually. Turnover inspections are not counted toward annual inspections.
- If more than 20% of the annual sample fails the HQS inspections, 100% of the contract units in the building must be inspected.
- Other times – the LACDA will inspect PBV units at other times as necessary to ensure the contract units are in compliance with HQS and that the owner is providing utilities, maintenance and other services in accordance with the HAP contract.

For rehabilitated housing that is developed prior to the HAP contract term or newly constructed housing, the LACDA must inspect each proposed newly constructed and rehabilitated PBV unit before execution of the HAP contract. Each proposed PBV unit must fully comply with HQS prior to HAP contract execution.

For rehabilitated housing that will undergo development activity after HAP contract execution, the LACDA must conduct a unit inspection.

Each PBV unit that underwent substantial improvement must fully comply with HQS prior to the LACDA adding the unit to the HAP contract, returning the unit temporarily removed to the HAP contract, allowing re-occupancy of the unit, and resuming housing assistance payments, as applicable.

#### **19.13.1 HQS Violations**

The LACDA may make no HAP payments to the owner during any period in which the contract unit does not comply with HQS or any other HAP contract requirement.

Remedies for HQS violation include abatement or reduction in HAP payments, reduction of contract units, and termination of the HAP contract.

When a PBV unit is abated, the family will be offered a comparable unit if available. The family will be issued a tenant-based voucher if no comparable unit is available.

#### **19.13.2 Inspecting LACDA-owned Units**

In the case of LACDA-owned units, the inspection must be performed by an independent agency designated by the LACDA and approved by HUD. The independent entity must furnish a copy of each inspection report to the LACDA and to the HUD field office where the project is located. The LACDA must take all necessary actions in response to inspection reports from the independent agency, including exercise of contractual remedies for violation of the HAP contract by the LACDA-owner.

### **19.14 HOUSING ASSISTANCE PAYMENT (HAP) CONTRACT**

[24 CFR §983.202]

The LACDA must enter into a Housing Assistance Payments (HAP) contract with the owner in order to provide housing assistance payments for eligible families.

The LACDA will make housing assistance payments to the owner in accordance with the HAP contract, for contract units leased and occupied by eligible families during the term of the HAP contract.

The LACDA will use the most recent HUD-approved form of the HAP contract.

#### **19.14.1 Execution of the HAP Contract**

Before the HAP contract may be executed, the LACDA will inspect each contract unit in accordance with section 21.15 of this chapter and Chapter Ten of this Plan. For existing housing, the HAP contract must be executed within 30 days of passed inspections for all proposed units under the HAP contract.

For new construction or rehabilitated housing, the HAP contract is executed within 60 days after the LACDA has inspected the completed units and is satisfied that said units are completed in accordance with the AHAP and the owner has furnished the required evidence of completion.

By execution of the HAP contract, the owner certifies:

- The owner is and will maintain all contract units in accordance with HQS;
- The owner is providing all services, maintenance, equipment and utilities as agreed to under the HAP contract and in the leases with assisted families;
- Each contract unit is leased to an eligible family and the lease complies with the HAP contract and HUD requirements;
- Members of the assisted family reside in the contract unit, and it is their only residence;
- The owner is not a relative of any member of the assisted family by blood or operation of law;
- The amount of the housing assistance payment is the correct amount due under the HAP contract;
- The rent to owner for each contract unit does not exceed the rent due to owner for any comparable, unassisted unit;
- The owner will not receive any other payments beyond the tenant rent and housing assistance payments for the contract unit; and
- The family does not own or have any interest in the contract unit.

#### **19.14.2 Term of the HAP Contract**

As of April 18, 2017, the LACDA may enter into a new HAP contract with an owner for an initial term of up to twenty years. The length of the initial term of the HAP contract may not be less than one year.

For any PBV HAP contract that is still within the initial term, the LACDA and owner may mutually agree to extend the contract for up to the maximum initial term of 20 years. If the HAP contract is no longer in the initial term, the LACDA will not extend the initial term.

The LACDA may further extend the HAP contract beyond 20 years from the end of the initial term as long as the following conditions are met:

- (1) Each extension executed must have a term that does not exceed 20 years;
- (2) At no time may the total remaining term of the HAP contract, with extensions, exceed 40 years;

(3) Before agreeing to an extension, the LACDA must determine that the extension is appropriate to continue providing affordable housing for low-income families or to expand housing opportunities; and

(4) Each extension must be on the form and subject to the conditions prescribed by HUD at the time of the extension.

Regardless of the length of the extension, all such extensions must meet the same conditions.

The HAP contract may be terminated by the LACDA for insufficient funds. If it is determined there are insufficient funds available to continue to assist all contract units for the full term, the LACDA may give notice to the owner for all or any of the contract units, in accordance with HUD instructions.

#### **19.14.3 Termination of the HAP Contract by the LACDA**

The HAP Contract provides that the term of the LACDA's contractual agreement is subject to the availability of sufficient appropriated funding as determined by HUD or the LACDA in accordance with HUD instruction. For these purposes, sufficient funding means the availability of appropriations, and of funding under the ACC from such appropriations, to make full payment of housing assistance payments payable to the owner for any contract year in accordance with the terms of the HAP contract.

In times of insufficient funding, HUD requires that the LACDA first take all cost-saving measures prior to failing to make payments under existing PBV HAP Contracts.

If it is determined that there may not be sufficient funding to continue housing assistance payments for all contract units and for the full term of the HAP Contract, the LACDA may terminate the HAP contract by notice to the owner.

As such, the LACDA will implement the HAP Contract termination in accordance with HUD instructions.

#### **19.14.4 Termination of the HAP Contract by the Owner**

Should the owner choose not to renew the HAP contract a minimum of one year's notice to the LACDA and the tenants is required. If an owner fails to provide the required notice, the owner must permit the tenants in assisted units to remain in their units for the required notice period with no increase in the tenant portion of their rent, and with no eviction as a result of an owner's inability to collect an increased tenant portion of rent. An owner and the LACDA may agree to extend the terminating contract for a period of time sufficient to provide tenants with the required notice, under such terms as HUD may require.

Unless a termination or expiration without extension occurs due to a determination of insufficient funding or other extraordinary circumstances determined by HUD, the LACDA shall issue each family occupying a contract unit a tenant-based voucher based on the termination or expiration of the contract no fewer than 60 calendar days prior to the planned termination or expiration of the PBV HAP contract. However, the LACDA is not required to issue the family a voucher if the LACDA has offered the family an alternative housing option (e.g., an assisted unit

in another PBV project), and the family chooses to accept the alternative housing option instead of the voucher.

If the amount of the rent to owner for any contract unit is reduced below the amount of the initial rent to owner, the owner may terminate the HAP contract, upon notice to the LACDA no fewer than 90 calendar days prior to the planned termination, and families must be provided tenant-based assistance and may elect to remain in the project utilizing their tenant-based assistance.

#### **19.14.5 HAP Contract Amendments**

At the discretion of the LACDA, the LACDA and owner may execute an amendment to the HAP contract to substitute a different unit with the same number of bedrooms in the same project for a previously covered contract unit. Additionally, at the discretion of the LACDA, and provided that the total number of units in a project that will receive PBV assistance will not exceed the established limitations, the LACDA and owner may execute an amendment to the HAP contract to add PBV units in the same project to the contract, without a new proposal selection.

Prior to such addition or substitution, the LACDA must inspect the proposed unit (the unit must comply with HQS to be substituted) and must determine the reasonable rent for such unit (the rent to owner must be reasonable for the unit to be substituted). The proposed unit may be vacant or may be occupied. The proposed unit may undergo repairs or renovation prior to amending the PBV HAP contract to substitute the unit.

Units may only be added to the HAP contract or substituted for a previously covered contract unit if one of the following conditions applies:

1. The units to be added or substituted existed at the time of HAP contract execution;
2. In the case of a project completed in stages, the units to be added or substituted existed at the time of PHA acceptance of the last completed unit(s); or
3. A unit, office space, or common area within the interior of a building containing contract units existed at the time is reconfigured without impacting the building envelope into one or more units to be added or substituted.

Added units that qualify for an exclusion from the program cap or an exception to or exclusion from the project cap will not count toward such cap(s). The anniversary and expiration dates of the HAP contract for the additional units must be the same as the anniversary and expiration dates of the HAP contract term for the PBV units originally placed under HAP contract.

These requirements are waived for HUD-VASH units because the veteran must be homeless upon admission, unless the unit is already occupied by a veteran with a tenant-based VASH voucher [FR-6476-N-01].

When a HUD-VASH family has been terminated from the program for failure to participate in case management, the LACDA may substitute the unit on the HAP Contract, remove the unit from the HAP Contract, or change the unit from PBVASH to regular PBV [FR-6476-N-01].

#### **19.14.6 Substantial Improvement to Units Under a HAP Contract**

The owner may undertake substantial improvement on a unit currently under a HAP contract, except a contract subject to a rider under the rehabilitated housing option for development activity after HAP contract, if approved to do so by the LACDA. All conditions under 24 CFR §983.212 must be adhered to and met for the LACDA to approve the owner's request.

### **19.15 SELECTION OF PARTICIPANTS**

[24 CFR §983.251]

The LACDA will only provide PBV assistance to families determined eligible, consistent with Chapter Two of this Plan and using information received and verified by the LACDA within a period of 60 days before commencement of PBV assistance.

#### **19.15.1 Waiting List**

The LACDA will use a separate waiting list for each project receiving Project-Based Voucher assistance or sets of units within a project if there are multiple eligibility restrictions for special needs populations.

If applicable, projects receiving Project-Based Voucher or Project-Based VASH assistance are required to use a Coordinated Access System to identify and refer 80 percent of its eligible applicants for the project's waiting list.

Applicants currently on the tenant-based assistance waiting list will be given an opportunity to place their name on a PBV waiting list, with their original date and time intact. If a new applicant applies to the tenant-based waiting list, the applicant will be given the opportunity to also place their name on any open PBV waiting list.

Upon admission to the PBV program, the applicants name will be removed from any other project-based voucher waiting lists that the applicant has applied for.

#### **19.15.2 Protection of In-Place Families**

Families who reside in units selected to receive PBV assistance on the proposal selection date and who are also eligible in accordance with Section 2.2 of this Plan, will be given the opportunity to place their name on the appropriate PBV site-based waiting list. An absolute preference will be given to that family to be selected from the waiting list. If the family is then determined fully eligible for the PBV program under all LACDA eligibility criteria, the family will then be referred to the owner for an appropriately sized unit in the project.

#### **19.15.3 Local Preferences**

Applicants on any PBV waiting list are subject to the system of local preferences as it pertains to that particular waiting list. PBV site-based waiting lists will have admissions preferences that reflect the target population of each project.

When PBV buildings are selected, the LACDA will publicly notice the selection, as well as the target population of each project. As new waiting lists are opened, an email notice will be sent to the Housing Choice Voucher (Section 8) tenant-based waiting list identifying available site-based PBV lists and their respective

admissions preferences. If a site-based waiting list is opened to the public, it will be advertised on the LACDA's website, along with its admissions preferences.

Disabled families who need an available accessible unit at a particular project may be awarded first preference from the waiting list. Disabled families may not be required to accept the supportive services offered nor can a preference be granted for those with a particular disability.

#### **19.15.4 Refusal of Assistance**

If a family refuses an offer of PBV assistance or the owner rejects a family for admission to the owner's PBV units, the LACDA will remove the family from the site-based waiting list from which they were selected unless the family has good cause to reject the unit. Good cause is defined as:

- A. The family determines the unit is not accessible to a household member with a disability or otherwise does not meet the member's disability-related needs;
- B. The unit has HQS deficiencies;
- C. The family is unable to accept the offer due to circumstances beyond the family's control (such as hospitalization, temporary economic hardship, or natural disaster); or
- D. The family determines the unit presents a health or safety risk to a household member who is or has been a victim of domestic violence, dating violence, sexual assault, or stalking.

Such refusal will not affect the family's position on the tenant-based waiting list or any other PBV site-based waiting list, nor affect any admissions preference for which the family qualifies.

#### **19.15.5 Restriction of Renting to Relatives**

The LACDA will not approve a tenancy if the owner, including principal owners or other interested parties, is the parent, child, grandparent, grandchild, sister, or brother of any member of the family unless the approval is the result of a reasonable accommodation for a disabled family member.

#### **19.15.6 Tenant Screening**

[24 CFR §983.255]

The LACDA may take into consideration any admission criteria outlined in Chapter Two of this Plan in order to screen applicants for eligibility; however, it is the responsibility of the owner to screen applicants for behavior and suitability for tenancy.

The LACDA will provide the owner with the tenant's current and former address, as well as the name and address of the current and/or former landlord, if known. This policy is consistent with information provided to owners under the Housing Choice Voucher program.

### **19.16 INFORMATION FOR SELECTED FAMILIES**

[24 CFR §983.252]

When a family accepts an offer of PBV assistance, the LACDA will provide the family an oral briefing. Attendance at this briefing is mandatory. The briefing will include:

- A description of how the program works;
- The family's and owner responsibilities;
- The family's right to move.

A briefing packet will be provided with information regarding:

1. How the LACDA determines total tenant payment;
2. Family obligations; and
3. Information on Federal, State, and local equal opportunity laws, the contact information for the Section 504 coordinator, a copy of the housing discrimination complaint form, and information on how to request a reasonable accommodation or modification under Section 504, the Fair Housing Act, and the Americans with Disabilities Act;
4. The LACDA subsidy standards, including when the PHA will consider granting exceptions to the standards, and when exceptions are required as a reasonable accommodation for a person with disabilities under Section 504, the Fair Housing Act, or the Americans with Disabilities Act; and
5. Family right to move.

#### **19.17 RESTRICTIONS ON RENTING TO RELATIVES LEASING OF CONTRACT UNITS**

[24 CFR §983.253]

Owners must lease contract units only to eligible families, selected and referred by the LACDA from the waiting list, during the term of the HAP contract.

Owners must develop written tenant selection procedures consistent with the purpose of improving housing opportunities for very low-income families (or low-income VASH-eligible veterans), related to program eligibility and an applicant's ability to perform lease obligations.

An owner must promptly notify in writing any rejected applicant of the grounds for any rejection. The owner must provide a copy of such rejection notice to the LACDA.

Owners must follow the LACDA's subsidy standards when leasing units to referred families.

#### **19.18 LEASE VACANCIES**

[24 CFR §983.254]

The owner must promptly notify the LACDA of any current or expected vacancy in a contract unit. After owner notice, the LACDA will promptly refer a sufficient number of families to the owner to fill the vacancy within 30 days.

If any contract unit has been vacant for at least 120 days since the owner notice of vacancy, the LACDA may give notice to the owner amending the HAP contract to reduce the number of contract units by the number of units that have been vacant for that period.

## **19.19 LEASE**

[24 CFR §983.255]

Owners must use the same lease for contract units as for unassisted units, with the lease being in accordance with state law.

The lease must include the HUD tenancy addendum. All provisions in the tenancy addendum must be included in the lease. Provisions in the addendum shall prevail over provisions in the lease.

The initial term of the lease must be for at least one year.

In addition to an initial term of at least one year, the lease must provide for automatic renewal after the initial term. Automatic renewal may be in the form of:

- Renewal for successive definite terms (ex: Month to month or year to year)
  - Automatic indefinite extension of the lease term
- The lease must specify:
- Names of the owner and tenant;
  - Identifying information of the unit rented;
  - Term of the lease and any provision for renewal;
  - The amount of tenant rent to owner;
  - Specification of services, maintenance, equipment, and utilities to be provided by the owner;
  - The amount of any charges for food, furniture, or supportive services.

### **19.19.1 Changes in the Lease**

If the tenant and owner agree to any changes in the lease, the change must be in writing and must be submitted to the LACDA immediately.

The owner must notify the LACDA of any proposed change in the lease regarding responsibility for utilities. Such changes may only be made with approval of the LACDA. If the LACDA approves a change in responsibilities for utilities, rent reasonableness must then be re-determined. The rent to owner will be re-calculated from the effective date of the change.

## **19.20 ABSENCE FROM THE UNIT**

The LACDA's absence policies found in Chapter Six of this Plan will apply to the PBV program. The lease may specify a maximum period of family absence from the unit that is shorter than that specified by the LACDA.

The HAP contract will not be terminated if the family is absent for longer than the maximum period permitted by the LACDA.

## **19.21 OWNER TERMINATION OF TENANCY AND EVICTION**

[24 CFR §983.257]

Grounds for owner termination and eviction reflect the policies outlined in Chapter Fourteen of this Plan, except that an owner may not terminate tenancy after the initial term of the lease for business or economic reasons, or to repossess the unit for personal, family, or nonresidential use.

If an owner refuses to renew the lease without good cause, the family will be issued a tenant-based voucher, and the unit will be removed from the HAP contract. A PBVASH participant must be issued a tenant-based HUD-VASH voucher [FR-6476-N-01].

The lease terminates if the owner terminates the lease for good cause, or the owner and tenant agree to terminate the lease

## **19.22 LACDA TERMINATION OF TENANCY**

The LACDA may terminate a family that violates the family obligations of the PBV program. Subsequent to a proposed termination of a family's assistance, the LACDA will advise the family of its right to an informal hearing as outlined in chapter sixteen of this plan.

The LACDA is required to automatically terminate the HAP contract 180 calendar days after the last housing assistance payment is made to the owner.

- If the family still resides in the unit after the 180-day period and there is still no HAP payment on their behalf, the unit will be removed from the contract.
- Units on the grounds of a VA facility or a project where HUD-VASH supportive services are provided onsite: The LACDA and owner may choose to allow a zero-HAP family to move into a PBV unit. Because there was no last HAP, the unit is not required to be removed from the HAP Contract; however, the LACDA has the option to remove the unit from the HAP Contract until such time as the family's income has decreased (or as a result of a change in family composition) so that HAP will be paid and the unit may be reinstated onto the HAP Contract [FR-6476-N-01].
- If the family has resided in the unit for more than one year, they may request a tenant-based voucher and attempt to find a unit for which there will be a HAP payment. No voucher will be issued to a family whose assistance has already been terminated.
- If the unit is in a fully assisted project, it may be reinstated once the ineligible family vacates the unit, and in a partially assisted project, another unit may be substituted for the ineligible unit. In both cases the reinstatement/substitution must be in compliance with PBV regulations.

Additionally, the lease terminates if the LACDA terminates the HAP contract or if the LACDA terminates the family's assistance.

The termination of a family's assistance by the PHA alone does not result in an eviction. An owner must pursue eviction in local court. If the owner decides not to pursue eviction, the LACDA may elect to either substitute the ineligible unit or remove the ineligible unit from the HAP contract.

**19.23 SECURITY DEPOSITS**

[24 CFR §983.255]

The owner may collect a security deposit from the tenant. The amount must not exceed that allowed by state and local law or that charged to unassisted units in the same building.

When the tenant moves out, the owner may use the amount of the deposit, in accordance with the lease and state and local law, as reimbursement for any unpaid tenant rent, damage to the unit, or any other amount the tenant owes under the lease.

The owner must give the tenant a written list of all items charged against the security deposit and the amount of each item. After deducting the amount used to reimburse the owner, the owner must promptly refund the full amount of the balance to the tenant.

If the balance is not sufficient to cover amounts the tenant may owe under the lease, the owner may seek the remainder from the tenant. The LACDA has no liability or responsibility for payment of any amount owed by the family to the owner.

**19.24 FAMILY OCCUPANCY OF WRONG SIZE OR ACCESSIBLE UNIT**

[24 CFR §983.260]

If the LACDA determines that a family is occupying the wrong-size unit, or a unit with accessibility features the family does not require and is needed by a family that requires the accessibility features, the LACDA will offer the family continued assistance in another unit and will notify the family and owner immediately of its offer of continued assistance and determination.

The LACDA may offer continued assistance either in another PBV unit or a tenant-based voucher. If appropriate, the LACDA may refer the family to an available public housing unit or other public or private tenant-based assistance (e.g. HOME). If the family is given a tenant-based voucher, policies under the Housing Choice Voucher program regarding voucher issuance and expiration will apply. If a family fails to lease a unit with the tenant-based voucher, assistance will be terminated upon expiration of the voucher (and any subsequent extensions granted by the LACDA).

Upon determination that the family is occupying a wrong-size unit or a unit with accessibility features not required by the family and continued assistance is offered in the form of a project-based voucher, the family will have ninety days in which to move to another unit. If the family fails to move or refuses the offer of continued assistance in another unit, assistance to the family will be terminated.

In the case of a veteran occupying a HUD-VASH unit, the continued housing assistance must be in the form of a tenant-based HUD-VASH voucher or another PBVASH units. If no HUD-VASH voucher is available to offer within 60 days of the determination, the LACDA will remove the wrong-sized or accessible unit from the HAP contract to make a tenant-based HUD-VASH voucher available to issue the family. The family may not elect to use its tenant-based HUD-VASH voucher to remain in the property. The LACDA may use another voucher to add the unit

removed under this alternative requirement to the HAP contract after the family vacates the property [FR-6476-N-01].

### **19.25 FAMILY RIGHT TO MOVE**

[24 CFR §983.261]

Eligible families may terminate the assisted lease at any time after the first year of occupancy. Families who wish to move must first contact the LACDA to request a voucher before submitting a lease termination notice to the owner. Once the LACDA has received a written request for a voucher, the family will be issued a new voucher. If the reexamination is current (within 12 months) the LACDA will not conduct a reexamination before issuing the voucher unless there are reported changes to income or the family composition that would require an interim reexamination. At the same time the voucher is issued, the family will receive a Request for Tenancy Approval (RTA). The family should begin looking for housing immediately in order to ensure a smooth transition to the new unit.

If the family terminates the assisted lease before the end of one year, the family relinquishes the opportunity for continued tenant-based assistance.

Requests to move for families wishing to port to another jurisdiction must be submitted in writing.

If a tenant-based voucher is not available at the time of the family's request, the PHA will give the family priority to receive the next available opportunity for continued tenant-based assistance by maintaining and selecting from a waiting list for PBV participants seeking to transfer to the HCV program.

This requirement is waived for HUD-VASH units because the LACDA may delay HUD-VASH voucher issuance up to 180 days. If a tenant-based voucher is still not available after that period of time, the family must be allowed to move using its VASH voucher as tenant-based assistance. Alternatively, the LACDA may allow the family to move using its HUD-VASH voucher as tenant-based assistance without having to meet this 180day waiting period. In either case, the LACDA may either amend the PBV HAP contract to replace the assistance in the PBV unit with one of its regular vouchers if the unit is eligible for a regular PBV (for instance, so long as the unit is eligible under the program and project caps) or the LACDA and owner may agree to temporarily remove the unit from the HAP contract. If a HUD-VASH veteran has been determined to no longer require case management, the LACDA will allow the family to move with the first available tenant-based voucher if no VASH voucher is immediately available and cannot require the family to wait for a VASH voucher to become available [FR-6476-N-01].

### **19.26 DETERMINING RENT TO OWNER**

[24 CFR §983.301]

The amount of estimated rent to owner must be included in the Agreement for rehabilitated or newly constructed housing. The actual rent to owner must be determined at the beginning of the HAP contract term for all types of housing.

Except for certain tax credit units specified below, the amount of rent to owner must not exceed the lowest of:

- An amount determined by the PHA that does not exceed 110% of the FMR (or any exception payment standard approved by HUD), minus the utility allowance; The LACDA will cap this amount at the current payment standard in effect at the time of the determination.
- The reasonable rent; or
- The rent requested by the owner.

The LACDA may not establish different rental amounts for regular PBV and PBVASH units on the same property regardless of whether the LACDA has an approved exception payment standard for the VASH program [FR-6476-N-01].

The LACDA may include as part of the HAP contract, a provision that the rent to owner will not be reduced below the initial rent. If the LACDA elects to include such a provision, the rent to owner will not be reduced below the initial rental amount during subsequent reasonable rent re-determinations. Additionally, rents will only be reduced below the initial amounts to correct errors in calculations or if additional housing assistance has been combined with the PBV assistance after the execution of the initial HAP contract and a decrease is required due to subsidy layering requirements.

The amount of rent to owner may also be subject to rent control or other limits under local, state, or federal law.

#### **19.26.1 Rent to owner for certain tax credit units**

This applies if:

- (i) A contract unit receives a low-income housing tax credit under the Internal Revenue Code of 1986;
- (ii) The contract unit is not located in a qualified census tract;
- (iii) In the same building, there are comparable tax credit units of the same unit bedroom size as the contract unit and the comparable tax credit units do not have any form of rental assistance other than the tax credit; and
- (iv) The tax credit rent exceeds the applicable fair market rental (or any exception payment standard).

In the case of a contract unit described above, the rent to owner must not exceed the lowest of:

- (i) An amount determined by the LACDA, not to exceed the tax credit rent minus any utility allowance;
- (ii) The reasonable rent; or
- (iv) The rent requested by the owner.

The “tax credit rent” is the rent charged for comparable units of the same bedroom size in the building that also receive the low-income housing tax credit but do not have any additional rental assistance (e.g., additional assistance such as tenant-based voucher assistance).

A “qualified census tract” is any census tract (or equivalent geographic area defined by the Bureau of the Census) in which:

- (i) At least 50 percent of households have an income of less than 60 percent of Area Median Gross Income (AMGI); or
- (ii) Where the poverty rate is at least 25 percent and where the census tract is designated as a qualified census tract by HUD.

### **19.26.2 Rent to owner for other tax credit units**

Except in the case of a tax-credit unit described above, the rent to owner for all other tax credit units may be determined by the LACDA pursuant to section 19.25.

### **19.26.3 LACDA Owned Units**

For LACDA-owned PBV units, the amount of reasonable rent must be determined by an independent agency approved by HUD in accordance with PBV requirements. The independent entity must provide a copy of the determination of reasonable rent for LACDA-owned units to the LACDA and to the HUD field office where the project is located.

Therefore, the initial rent to owner and the annual redetermination of rent at the anniversary of the HAP contract are determined by the independent entity approved by HUD. The LACDA must use the rent to owner established by the independent entity.

## **19.27 USE OF FAIR MARKET RENTS**

Small Area Fair Market Rents (SAFMRs) do not apply to Project-based vouchers regardless of whether HUD designates the metropolitan area or approves the LACDA for SAFMRs. The following exceptions apply:

1. Where the LACDA's notice of owner selection under 24 CFR 983.51(d) was made on or before the effective dates of both the SAFMR designation and LACDA's administrative policy, the LACDA and the owner may mutually agree to apply the SAFMR. The application of the SAFMRs must be prospective and consistent with the LACDA's Administrative Plan. The owner and LACDA may not subsequently choose to revert back to the use of the metropolitan wide FMRs for the PBV project. If the rent to owner will increase as a result of the mutual agreement to apply the SAFMRs to the PBV project, the rent increase shall not be effective until the first annual anniversary of the HAP contract in accordance with 24 CFR 983.302(b).
2. Where the LACDA's notice of owner selection under 24 CFR 983.51(d) was made after the effective dates of both the SAFMR designation and the LACDA's administrative policy, the SAFMRs shall apply to the PBV project if the LACDA's Administrative Plan provides that SAFMRs are used for all future PBV projects. If the LACDA chooses to implement this administrative policy, the policy must apply to all future PBV projects and the LACDA's entire jurisdiction. The owner and the LACDA may not subsequently choose to apply the metropolitan area FMR to the project, regardless of whether LACDA subsequently changes its Administrative Plan to revert to the use of metropolitan-wide FMR for future PBV projects.

### **19.27.1 Decrease in Fair Market Rents**

If as a result of a reduction in the FMR, the LACDA is required to adjust any of its payment standards to remain within the limits of the “basic range” established by HUD, at the discretion of the LACDA the decreased payment standard will not be applied to a participant family continuing to reside in an assisted unit. The LACDA may choose to continue to use the higher voucher payment standard for as long as the participant family continues to receive housing assistance in that assisted unit.

## **19.28 REDETERMINATION OF RENT TO OWNER**

[24 CFR §983.302]

The LACDA will only redetermine rent to the owner when the owner requests an increase at the annual anniversary of the HAP contract or when there is a 10% decrease in the published FMR. Notice of rent increase and other limitations on rent adjustments must conform to the above stated policies of this Plan.

If there is a decrease in rent due to a 10% decrease in the published FMR, the rent to owner must be decreased, whether or not the owner requested a rent adjustment.

The notice of rent adjustment from the LACDA constitutes an amendment of rent to owner specified in the HAP contract.

Rent reasonableness will be determined by a HUD-approved, independent entity for units owned by the LACDA. The entity will provide a copy of the determination to the LACDA and the HUD Los Angeles field office.

An owner’s request for a rent increase must be submitted to the LACDA at least 60 days prior to the anniversary date of the HAP contract and must include the new rent amount the owner is proposing. The LACDA will not approve, and the owner may not receive any increase of rent to owner until and unless the owner has complied with all requirements of the HAP contract, including compliance with Housing Quality Standards. The owner may not receive any retroactive increase of rent for any period of noncompliance.

### **19.28.1 Rent Determination for Projects with Other Subsidies**

Rents may not exceed rent limits as established by the applicable federal program for units subsidized under the following programs:

1. HOME;
2. Insured or non-insured Section 236 project;
3. Formerly insured or non-insured Section 236 project that continues to receive Interest Reduction Payment following a decoupling action;
4. Section 221(d)(3) below market interest rate (BMIR) project;
5. Section 515 project of the Rural Housing Service;
6. Any other type of federally subsidized project specified by HUD.

The LACDA may set reasonable rents up to 110 percent of the HUD Fair Market Rent in projects receiving Low-Income Housing Tax Credits (LIHTC), even if the rent level exceeds the maximum rent under the LIHTC program.

The LACDA may, at its discretion include provisions in the HAP contract to reduce the initial amount of rent to the owner because of other governmental subsidies.

### **19.29 VACANCY PAYMENTS**

[24 CFR §983.302]

If a family moves out of a contract unit, the owner may keep the payment for the full calendar month in which the family moves out. The owner may not keep the payment if the LACDA determines that the vacancy is the owner's fault.

Subject to available funding, the LACDA may provide for vacancy payments to the owner not to exceed two months following move out. The vacancy payment may not exceed the amount of monthly rent under the assisted lease, minus any rent received by the owner, including any available amount from the tenant's security deposit. Vacancy payments may only cover periods the unit is actually vacant.

The LACDA will only make vacancy payments to the owner if:

The owner gives prompt, written notice to the LACDA certifying that the family vacated the unit, including the date the family moved out within 72 hours upon learning of the move out, and certifies:

- The vacancy is not the fault of the owner, and the unit was vacant during the period claimed;
- The owner has taken every reasonable step to minimize the likelihood and length of the vacancy.

The owner must then submit a form requesting vacancy payments and provide the amount of the tenant's security deposit with any amount available to reimburse unpaid rent. The form must accompany receipts substantiating any damages the owner claims from the security deposit. The owner must certify on this form that no other payments were received for the unit during the period vacancy claimed.

### **19.30 TENANT RENT**

[24 CFR §983.353]

The tenant rent is the portion of the rent to owner paid by the family. The LACDA determines the tenant rent in accordance with HUD requirements. Any changes in the amount of the tenant rent will be effective on the date stated in a notice by the LACDA to the family and the owner. The family is responsible for paying the tenant rent directly to the owner. The amount of the tenant rent as determined by the LACDA is the maximum amount the owner may charge the family for rent of a contract unit.

The owner may not demand or accept any rent payment from the tenant in excess of the tenant rent as determined by the LACDA. The owner must immediately return any excess payment to the tenant. The family is not responsible for payment of the portion of the rent to owner covered by the housing assistance payment under the HAP contract. The owner may not terminate the tenancy of an assisted family for nonpayment of the LACDA housing assistance payment.

The LACDA is responsible only for making housing assistance payments to the owner on behalf of a family in accordance with the HAP contract. The LACDA is not responsible for paying the tenant rent, or for paying any other claim by the owner. The LACDA may not use housing assistance payments or other program funds (including any administrative fee reserve) to pay any part of the tenant rent or to pay any other claim by the owner. The LACDA may not make any payment to the owner for any damage to the unit, or for any other amount owed by a family under the family's lease or otherwise.

**19.30.1 Utility Reimbursement Payments (URP)**

If the amount of the utility allowance exceeds the total tenant payment, the LACDA shall pay the amount of such excess as a reimbursement for tenant-paid utilities ("utility reimbursement") directly to the family and the tenant rent to the owner shall be zero. The family may choose to have their utility reimbursement deposited to a checking or savings account. Otherwise, the family will receive a card where the allowance will be deposited monthly.

The utility allowance is intended to help defray the cost of utilities not included in the. The allowances are based on rates and average consumption studies, not on a family's actual consumption. The LACDA will review the Utility Allowance Schedule on an annual basis and revise it if needed (10 percent increase or decrease).

Families must repay Utility Reimbursement Payments (URP) made by the LACDA for periods in which the family was not entitled to the URP. If the amount of the URP owed to the LACDA is \$50 or less, the tenant will be required to pay the debt in full.

**19.31 OTHER CHARGES AND FEES**

[24 CFR §983.353]

The owner may not require the family to pay charges for any meals or supportive services unless the project is an assisted living development, in which case owners may charge tenants, family members, or both for meals and supportive services. These charges may not be included in the rent to owner and may not be used to calculate rent reasonableness. Nonpayment of such charges is grounds for termination under the lease only in an assisted living development.

The owner may not charge tenants or family members extra amounts for items customarily included in the rent in Los Angeles County or provided at no additional cost for unsubsidized tenants on the premises.

## **Chapter 20:**

### **EMERGENCY HOUSING VOUCHER PROGRAM**

#### **20.1 INTRODUCTION**

##### **[PIH Notice 2021-15]**

On March 11, 2021, President Biden signed the American Rescue Plan, which appropriated \$5 billion for approximately 70,000 Emergency Housing Vouchers (EHVs). The U.S. Department of Housing and Urban Development (HUD) has allocated 1,964 EHV's to the LACDA and the program has been implemented commencing on July 1, 2021.

The EHV program is a tenant-based rental assistance program to assist qualifying families through direct referrals from the Coordinated Entry System (CES).

#### **20.2 ELIGIBILITY**

##### **[PIH Notice 2021-15]**

In order to be eligible for an EHV, an individual or family must meet one of four eligibility categories:

1. Homeless
2. At risk of homelessness
3. Fleeing, or attempting to flee, domestic violence, dating violence, sexual assault, stalking or human trafficking
4. Recently homeless and for whom providing rental assistance will prevent the return to homelessness and housing instability

The CES will be responsible for identifying and prioritizing referrals for the EHV program in accordance with a Memorandum of Understanding executed between the LACDA and the Los Angeles Homeless Services Authority (LAHSA) as the lead agency for the Continuum of Care (CoC).

#### **20.3 ALTERNATIVE REQUIREMENTS**

##### **[PIH Notice 2021-15]**

The EHV program will be administered in accordance with the Housing Choice Voucher (HCV) program policies outlined in this Administrative Plan, including any active waivers, except for the alternative requirements listed below:

##### **20.3.1 Referrals and Waiting List**

The LACDA must accept referrals from the CES and/or other partnering agencies when there is a shortage of CES referrals or the CES is not able to identify a category of eligibility. The LACDA shall maintain a separate waiting list for both initial lease-up and any turn-over vouchers.

### **20.3.2 Housing Search Requirement**

The LACDA must ensure that that housing search is made available to EHV applicants during their initial housing search. Housing search assistance may be provided directly by the LACDA or through LAHSA as the lead agency for the CoC or another partnering service provider.

#### **20.3.2.1 Service Fees**

Service fee funding must be used for the outlined eligible uses and not for other administrative expenses associated with the operation of the LACDA's EHV Program. Any service fee assistance that is returned to the LACDA after its initial or subsequent use may only be applied to the eligible services fee uses defined in Notice PIH 2021-15 (or subsequent notice) or other EHV administrative costs.

At the discretion of the LACDA, service fees may be used for the following categories:

- Housing search assistance
- Security deposit, utility deposit, rental application, and/or holding fee use
- Owner-related uses
- Other eligible uses such as moving expenses or tenant-readiness services

In accordance with the service fee requirements described in PIH Notice 2021-15, the LACDA may provide up to \$2,500 in one-time landlord incentives and up to \$5,000 in one-time reimbursements to assist the dwelling unit in passing the initial HQS inspection. The one-time landlord incentives and one-time HQS reimbursements are contingent on funding availability and applicant needs.

### **20.3.3 Local Preferences**

Current HCV preferences do not apply to the EHV program, including the residency preference. No special preferences will be implemented for the EHV program and the LACDA will defer to the CES' prioritization of eligible populations for referrals.

### **20.3.4 Denial of Assistance**

HUD regulations require that the LACDA deny assistance on the EHV program in the following cases:

- Any household member has ever been convicted of drug-related criminal activity for manufacture or production of methamphetamines on the premises of federally assisted housing; and
- Any household member is subject to a lifetime registration requirement under a State sex offender registration

Other reasons for denial of assistance on the HCV program do not apply to the EHV program.

The LACDA must still deny admission to the program if any member of the family fails to sign and submit consent forms for obtaining information but should notify the family of the limited EHV grounds for denial of admission first.

### **20.3.5 Income Verification at Admission**

The LACDA may accept self-certification of income by way of a General Affidavit without first attempting higher levels of verification, and third-party documents may be older than 60 days from the date received.

The LACDA must review the EIV Income and Income Validation Tool (IVT) Reports to confirm/validate family-reported income within 90 days of the PIC submission date and resolve any income discrepancies within 60 days and in accordance with current policies.

### **20.3.6 Eligibility Determination: Verification of Other Requirements**

Verification of *eligible noncitizen status* and *Social Security Number* must be provided within **180 days** of admission in order to remain eligible for the program, unless the LACDA provides an extension based on evidence that the family has made a good-faith effort to obtain the documentation.

Additionally, the LACDA may accept self-certification of *date of birth* and *disability status* if a higher level of verification is not immediately available. However, the LACDA must obtain a higher level of verification within **90 days** of admission.

Submission of false information by the applicant, once verified, may result in termination from the program.

### **20.3.7 Inapplicability of Income Targeting Requirements**

The HCV income targeting requirements do not apply to the EHV program.

### **20.3.8 Use of Recently Conducted Income Determinations and Verifications**

The LACDA may accept income calculations and verifications from third-party providers such as another subsidized housing program in lieu of conducting an initial examination of income as long as the income was calculated in accordance with rules outlined at 24 CFR Part 5 and within the last six months and the family certifies there has been no change in income or family composition in the interim. The LACDA must review the EIV report to confirm/validate family-reported income within 90 days of the PIC submission date and resolve any income discrepancies in accordance with current policies.

### **20.3.9 Pre-inspection of Units**

To expedite the leasing process, the LACDA may pre-inspect available units. If the voucher holder selects a unit that passed an HQS inspection within 45 days of the receipt date of the Request for Tenancy Approval, the unit may be approved as long as it meets all other conditions under § 982.305; however, the LACDA may not *require* any voucher holder to lease a unit that has a passed pre-inspection.

### **20.3.10 Initial Lease Term**

The initial lease term for an EHV family may be less than 12 months.

### **20.3.11 Portability**

The following exceptions to current portability regulations apply to EHV:

- *No prohibition on portability for non-resident applicants.* Non-resident applicants may immediately move under portability.
- *Portability billing and absorption.* A receiving PHA cannot refuse an incoming port, regardless of whether the PHA does or does not currently administer an EHV program. If the receiving PHA has an EHV program, it must absorb or bill depending on whether it has a vacant EHV. If the receiving PHA does not have an EHV program, the PHA may absorb with an HCV voucher or bill.
- *Family briefing/initial PHA and receiving PHA coordination of services.* The PHA must inform families how the port may affect their level of services and must make sure to coordinate with the receiving PHA regarding services being provided.

The LACDA has executed an interagency agreement with the Housing Authority of the City of Los Angeles (HACLA); therefore, EHV applicants may lease-up anywhere within the City of Los Angeles and an EHV applicant is not required to request portability.

### **20.3.12 Payment Standards**

Payment Standards on the EHV program are set at 120% of the HUD published Fair Market Rents and will be adjusted annually if continued funding is available.

## **20.4 WAITING LIST**

The LACDA must maintain a separate waiting list for the EHV program and the current HCV preferences do not apply to the program. After September 30, 2023, no vacant EHV's will be reissued, and any vacated vouchers will be removed from the program.

## **20.5 DEFINITIONS OF ELIGIBILITY**

### **[24 CFR §578.3, PIH Notice 2021-15**

*Homeless* is defined by the McKinney-Vento Homeless Assistance Act as follows:

(1) An individual or family who lacks a fixed, regular, and adequate nighttime residence, meaning:

- (i) An individual or family with a primary nighttime residence that is a public or private place not designed for or ordinarily used as a regular sleeping

accommodation for human beings, including a car, park, abandoned building, bus or train station, airport, or camping ground;

(ii) An individual or family living in a supervised publicly or privately operated shelter designated to provide temporary living arrangements (including congregate shelters, transitional housing, and hotels and motels paid for by charitable organizations or by federal, State, or local government programs for low-income individuals); or

(iii) An individual who is exiting an institution where he or she resided for 90 days or less and who resided in an emergency shelter or place not meant for human habitation immediately before entering that institution;

(2) An individual or family who will imminently lose their primary nighttime residence, provided that:

(i) The primary nighttime residence will be lost within 14 days of the date of application for homeless assistance;

(ii) No subsequent residence has been identified; and

(iii) The individual or family lacks the resources or support networks, e.g., family, friends, faith-based or other social networks, needed to obtain other permanent housing;

(3) Unaccompanied youth under 25 years of age, or families with children and youth, who do not otherwise qualify as homeless under this definition, but who:

(i) Are defined as homeless under section 387 of the Runaway and Homeless Youth Act (42 U.S.C. 5732a), section 637 of the Head Start Act (42 U.S.C. 9832), section 41403 of the Violence Against Women Act of 1994 (42 U.S.C. 14043e-2), section 330(h) of the Public Health Service Act (42 U.S.C. 254b(h)), section 3 of the Food and Nutrition Act of 2008 (7 U.S.C. 2012), section 17(b) of the Child Nutrition Act of 1966 (42 U.S.C. 1786(b)), or section 725 of the McKinney-Vento Homeless Assistance Act (42 U.S.C. 11434a);

(ii) Have not had a lease, ownership interest, or occupancy agreement in permanent housing at any time during the 60 days immediately preceding the date of application for homeless assistance;

(iii) Have experienced persistent instability as measured by two moves or more during the 60-day period immediately preceding the date of applying for homeless assistance; and

(iv) Can be expected to continue in such status for an extended period of time because of chronic disabilities; chronic physical health or mental health conditions; substance addiction; histories of domestic violence or childhood abuse (including neglect); the presence of a child or youth with a disability; or two or more barriers to employment, which include the lack of a high school degree or General Education Development (GED), illiteracy, low English proficiency, a history of incarceration or detention for criminal activity, and a history of unstable employment; or

(4) Any individual or family who:

- (i) Is fleeing, or is attempting to flee, domestic violence, dating violence, sexual assault, stalking, or other dangerous or life-threatening conditions that relate to violence against the individual or a family member, including a child, that has either taken place within the individual's or family's primary nighttime residence or has made the individual or family afraid to return to their primary nighttime residence;
- (ii) Has no other residence; and
- (iii) Lacks the resources or support networks, e.g., family, friends, and faith-based or other social networks, to obtain other permanent housing.

*At risk of homelessness* is defined by the McKinney-Vento Homeless Assistance Act as follows:

(1) An individual or family who:

- (i) Has an annual income below 30 percent of median family income for the area, as determined by HUD;
- (ii) Does not have sufficient resources or support networks, e.g., family, friends, faith-based or other social networks, immediately available to prevent them from moving to an emergency shelter or another place described in paragraph (1) of the "Homeless" definition in this section; and
- (iii) Meets one of the following conditions:
  - (A) Has moved because of economic reasons two or more times during the 60 days immediately preceding the application for homelessness prevention assistance;
  - (B) Is living in the home of another because of economic hardship;
  - (C) Has been notified in writing that their right to occupy their current housing or living situation will be terminated within 21 days of the date of application for assistance;
  - (D) Lives in a hotel or motel and the cost of the hotel or motel stay is not paid by charitable organizations or by federal, State, or local government programs for low-income individuals;
  - (E) Lives in a single-room occupancy or efficiency apartment unit in which there reside more than two persons, or lives in a larger housing unit in which there reside more than 1.5 people per room, as defined by the U.S. Census Bureau;
  - (F) Is exiting a publicly funded institution, or system of care (such as a health-care facility, a mental health facility, foster care or other youth facility, or correction program or institution); or
  - (G) Otherwise lives in housing that has characteristics associated with instability and an increased risk of homelessness, as identified in the recipient's approved consolidated plan;

(2) A child or youth who does not qualify as "homeless" under this section, but qualifies as "homeless" under section 387(3) of the Runaway and Homeless Youth Act (42 U.S.C. 5732a(3)), section 637(11) of the Head Start Act (42 U.S.C.

9832(11)), section 41403(6) of the Violence Against Women Act of 1994 (42 U.S.C. 14043e-2(6)), section 330(h)(5)(A) of the Public Health Service Act (42 U.S.C. 254b(h)(5)(A)), section 3(m) of the Food and Nutrition Act of 2008 (7 U.S.C. 2012(m)), or section 17(b)(15) of the Child Nutrition Act of 1966 (42 U.S.C. 1786(b)(15)); or

(3) A child or youth who does not qualify as “homeless” under this section, but qualifies as “homeless” under section 725(2) of the McKinney-Vento Homeless Assistance Act (42 U.S.C. 11434a(2)), and the parent(s) or guardian(s) of that child or youth if living with her or him.

*Domestic violence* includes felony or misdemeanor crimes of violence committed by:

- a. a current or former spouse or intimate partner of the victim (the term “spouse or intimate partner of the victim” includes a person who is or has been in a social relationship of a romantic or intimate nature with the victim, as determined by the length of the relationship, the type of the relationship, and the frequency of interaction between the persons involved in the relationship),
- b. a person with whom the victim shares a child in common,
- c. a person who is cohabitating with or has cohabitated with the victim as a spouse or intimate partner,
- d. a person similarly situated to a spouse of the victim under the domestic or family violence laws of the jurisdiction receiving grant monies, or
- e. any other person against an adult or youth victim who is protected from that person's acts under the domestic or family violence laws of the jurisdiction.

*Dating violence* means violence committed by a person:

- a. Who is or has been in a social relationship of a romantic or intimate nature with the victim; and
- b. Where the existence of such a relationship shall be determined based on a consideration of the following factors:
  1. The length of the relationship;
  2. The type of relationship; and
  3. The frequency of interaction between the persons involved in the relationship.

*Sexual assault* means any nonconsensual sexual act proscribed by Federal, Tribal, or State law, including when the victim lacks capacity to consent.

Stalking means engaging in a course of conduct directed at a specific person that would cause a reasonable person to:

- (1) Fear for the person's individual safety or the safety of others; or
- (2) Suffer substantial emotional distress.

*Human trafficking* includes both sex and labor trafficking, as outlined in the Trafficking Victims Protection Act of 2000 (TVPA), as amended (22 U.S.C. § 7102). These are defined as:

Sex trafficking means the recruitment, harboring, transportation, provision, obtaining, patronizing, or soliciting of a person for the purpose of a commercial sex act, in which the commercial sex act is induced by force, fraud, or coercion, or in which the person induced to perform such act has not attained 18 years of 21 age; (and)

Labor trafficking means the recruitment, harboring, transportation, provision, or obtaining of a person for labor or services, through the use of force, fraud, or coercion for the purpose of subjection to involuntary servitude, peonage, debt bondage, or slavery.

*Recently homeless* is defined as individuals and families who have previously been classified by a member agency of the CoC as homeless but are not currently homeless as a result of homeless assistance (financial assistance or services), temporary rental assistance or some type of other assistance, and where the CoC or its designee determines that the loss of such assistance would result in a return to homelessness or the family having a high risk of housing instability. Examples of households that may be defined as recently homeless by the CoC include, but are not limited to, participants in rapid rehousing, and permanent supportive housing.

## **Chapter 21:**

### **STABILITY VOUCHER PROGRAM**

#### **21.1 INTRODUCTION**

[PIH NOTICE 2022-24]

The Consolidated Appropriations Act, 2021 (Public Law 116-260) (2021 Act), made available \$43,439,000 for new incremental voucher assistance under Section 8(o) of the United States Housing Act of 1937 for use by individuals and families experiencing or at-risk of homelessness; those fleeing or attempting to flee domestic violence, dating violence, sexual assault, stalking, or human trafficking, and veterans and families that include a veteran family member that meet one of the proceeding criteria.

On August 16, 2022, HUD issued PIH Notice 2022-24, announcing approximately 4,000 new incremental vouchers nationwide for the new Stability Voucher (SV) program. On June 5, 2023, the LACDA received 288 SVs that will be paired with Continuum of Care supportive services funded by HUD's Office of Community Planning and Development.

The SV program is a tenant-based rental assistance program to assist qualifying families through direct referrals from the Coordinated Entry System (CES).

#### **21.2 ELIGIBILITY**

[PIH NOTICE 2022-24]

To be eligible for an SV, an individual or family must meet one of four eligibility categories:

1. Individuals and families who are currently experiencing homelessness.
2. Individuals and families at risk of homelessness.
3. Individuals and families fleeing, or attempting to flee, domestic violence, dating violence, stalking, sexual assault.
4. Veterans and families that include a veteran family that meet one of the preceding criteria.

The CES will be responsible for identifying and prioritizing referrals for the SV program in accordance with a Memorandum of Understanding executed between the LACDA and the Los Angeles Homeless Services Authority (LAHSA) as the lead agency for the Continuum of Care (CoC). See Section 21.4 for the definitions of the eligible categories.

#### **21.3 ALTERNATIVE REQUIREMENTS**

[PIH NOTICE 2022-24]

The SV program will be administered in accordance with the Housing Choice Voucher (HCV) program policies outlined in this Administrative Plan, including any active waivers, except for the alternative requirements listed below:

### **21.3.1 Direct Referrals**

The LACDA must accept direct referrals of eligible applicants from the CES in accordance with the MOU between the LACDA and LAHSA. Direct referrals for SVs are not added to the regular HCV waiting list.

If the CES does not identify a sufficient number of eligible applicants to lease-up the SV allocation or does not identify a sufficient number of eligible applicants who are fleeing, attempting to flee, domestic violence, dating violence, sexual assault, stalking, or human trafficking, the LACDA may accept direct referrals from other agencies such as a Victim Services Provider.

### **21.3.2 Separate Waiting List**

The LACDA shall maintain a separate waiting list for SV referrals. Because the SV program relies on direct referrals from the CES, the LACDA is not required to provide public notice when opening or closing the SV waiting list.

### **21.3.3 Local Preferences**

Local preferences established by the LACDA for HCV admissions do not apply to SVs. Currently, the LACDA has not established alternative local preferences for SVs. If later the LACDA chooses to adopt alternative local preferences, the LACDA will not establish a residency preference for the SV program.

### **21.3.4 Denial of Admission**

HUD regulation requires that the LACDA deny assistance on the SV program in the following cases:

- Any household member has ever been convicted of drug-related criminal activity for manufacture or production of methamphetamines on the premises of federally assisted housing; and
- Any household member is subject to a lifetime registration requirement under a state sex offender registration.

Other reasons for denial of admission on the HCV program do not apply to the SV program.

In contrast to regular HCV admissions, the LACDA may not deny an applicant admission regardless of whether:

- Any member of the family has been evicted from federally assisted housing or the LACDA has ever terminated assistance under the program for any member of the family.
- The family currently owes rent or other monies to the LACDA, to another PHA or owner.
- The family would otherwise be prohibited admission under alcohol abuse standards.
- The LACDA determines that any household member is currently engaged in or has engaged in during a reasonable time before the admission, drug-related criminal activity.

The LACDA will rely on accurate and reliable information when making the determination to deny admission and will not rely on an arrest record alone.

Applicants denied admission can request for an informal review in accordance with Section 16.3 of this plan.

The LACDA must still deny admission to the program if any member of the family fails to sign and submit consent forms for obtaining information but should notify the family of the limited SV grounds for denial of admission first.

### **21.3.5 Verification of Income at Admission**

The LACDA may consider self-certification of income the highest level of verification at admission and is not required to obtain third-party verification when it is not immediately available.

Applicants must sign and submit a General Affidavit attesting to income, assets, expenses, and other factors which would affect an income eligibility determination.

Additionally, documents provided which represent the applicant's income within the 60-day period prior to admission or voucher issuance but is not dated within 60 days of the request by the LACDA are accepted.

The LACDA must review the EIV Income and Income Validation Tool (IVT) Reports to confirm and validate family-reported income within 90 days of the submission date; print and maintain copies of the EIV Income and IVT Reports in the tenant file; and resolve any income discrepancy with the family within 60 days of the EIV Income or IVT Report dates.

If it is determined later that an ineligible participant has received housing assistance, the LACDA will start termination procedures.

### **21.3.6 Verification of Eligibility at Admission**

- **Social Security Number and Immigration Status**: The LACDA will admit applicants who are unable to provide the documentation to verify their SSN or eligible immigration status, but the information must be provided within 180 days of admission. The LACDA may grant an extension based on evidence from the family or confirmation from the CoC that the family made good-faith efforts to obtain the documentation.
- **Date of Birth and Disability Status**: The LACDA will accept self-certification of date of birth and disability status if the documentation is not immediately available. The LACDA must obtain a higher level of verification within 90 days of admission or verify the information in EIV.

### **21.3.7 Income Targeting Requirements**

The income targeting requirements on the HCV program do not apply to the SV program.

### **21.3.8 Use of Recently Conducted Income Determinations and Verifications**

The LACDA may accept income calculations and verifications from third-party providers or from an examination that the LACDA conducted on behalf of the family for another subsidized housing program in lieu of conducting an initial examination of income (at admission) as long as:

1. The income was calculated in accordance with rules outlined at 24 CFR Part 5 and within the last six months.
2. The family certifies there has been no change in income or family composition in the interim.

The LACDA must review the EIV Income and IVT Reports to confirm and validate family-reported income within 90 days of the submission date; print and maintain copies of the EIV Income and IVT Reports in the tenant file; and resolve any income discrepancy with the family within 60 days of the EIV Income or IVT Report dates.

#### **21.3.9 Pre-Inspection of Units**

The LACDA may pre-inspect units available for SV applicants. An RTA must be received within 45 days of the date of the inspection. At no time may any SV applicant be required to lease a pre-inspected unit.

#### **21.3.10 Initial Search Term**

The initial search term for an SV must be 120 days. Any requested extensions will be handled in accordance with regular HCV policies.

#### **21.3.11 Initial Lease Term**

The initial lease term for a unit leased by an SV family may be less than 12 months regardless of whether the shorter term is a prevailing market practice.

#### **21.3.12 Portability**

There is no prohibition on portability for non-resident applicants, therefore SV families may immediately move under portability.

A receiving PHA cannot refuse to assist an incoming SV family, regardless of whether the PHA does or does not administer SVs.

If an SV family moves under portability to another PHA that administers SVs:

- The receiving PHA may only absorb the incoming SV family with an SV (assuming it has a voucher available to do). If the PHA does not have an SV available to absorb the family, it must bill the initial PHA. The receiving PHA must allow the family to lease the unit with SV assistance and may not absorb the family with a regular HCV when the family leases the unit.
- Regardless of whether the receiving PHA absorbs or bills the initial PHA for the family's SV assistance, the SV administration of the voucher is in accordance with the receiving PHA's SV policies.

If the SV family moves under portability to another PHA that does not administer SVs, the receiving PHA may absorb the family into its regular HCV program *or* may bill the initial PHA.

If the portability move is in connection with the SV family's initial lease-up, the receiving PHA and the initial PHA must consult and coordinate on any services and assistance that will be made available to the family.

### **21.3.13 Payment Standards**

The LACDA may establish Payment Standards that are separate and different from the Payment Standards on other HCV programs. However, at no time may the SV Payment Standards be *lower* than the Payment Standards on other HCV programs.

The LACDA may set SV Payment Standards between 90 and 120% of the published FMRs for each unit size without prior HUD approval.

The LACDA may also adopt Payment Standards based on zip code even when not using Small Area FMRs. Payment Standards by zip code will also be set between 90 and 120% of the published Small Area FMRs for that zip code.

### **21.3.14 Increase in Payment Standards Between Annual Reexaminations**

An increase in Payment Standards may be applied during an Interim Reexamination for a tenant reported change in income or an owner requested rent increase.

## **21.4 DEFINITIONS OF ELIGIBILITY**

[24 CFR §578.3, PIH Notice 2022-24]

Homeless is defined by the McKinney-Vento Homeless Assistance Act as follows:

- (1) An individual or family who lacks a fixed, regular, and adequate nighttime residence, meaning:
  - (i) An individual or family with a primary nighttime residence that is a public or private place not designed for or ordinarily used as a regular sleeping accommodation for human beings, including a car, park, abandoned building, bus or train station, airport, or camping ground;
  - (ii) An individual or family living in a supervised publicly or privately operated shelter designated to provide temporary living arrangements (including congregate shelters, transitional housing, and hotels and motels paid for by charitable organizations or by federal, State, or local government programs for low-income individuals); or
  - (iii) An individual who is exiting an institution where he or she resided for 90 days or less and who resided in an emergency shelter or place not meant for human habitation immediately before entering that institution;
- (2) An individual or family who will imminently lose their primary nighttime residence, provided that:
  - (i) The primary nighttime residence will be lost within 14 days of the date of application for homeless assistance;
  - (ii) No subsequent residence has been identified; and
  - (iii) The individual or family lacks the resources or support networks, e.g., family, friends, faith-based or other social networks, needed to obtain other permanent housing;
- (3) Unaccompanied youth under 25 years of age, or families with children and youth, who do not otherwise qualify as homeless under this definition, but who:
  - (i) Are defined as homeless under section 387 of the Runaway and Homeless Youth Act (42 U.S.C. 5732a), section 637 of the Head Start Act (42 U.S.C. 9832), section 41403 of the Violence Against Women Act of 1994 (42 U.S.C. 14043e-2), section 330(h) of the Public Health Service Act (42 U.S.C. 254b(h)), section 3 of the Food and Nutrition Act of 2008 (7 U.S.C.

- 2012), section 17(b) of the Child Nutrition Act of 1966 (42 U.S.C. 1786(b)), or section 725 of the McKinney-Vento Homeless Assistance Act (42 U.S.C. 11434a);
- (ii) Have not had a lease, ownership interest, or occupancy agreement in permanent housing at any time during the 60 days immediately preceding the date of application for homeless assistance;
  - (iii) Have experienced persistent instability as measured by two moves or more during the 60-day period immediately preceding the date of applying for homeless assistance; and
  - (iv) Can be expected to continue in such status for an extended period of time because of chronic disabilities; chronic physical health or mental health conditions; substance addiction; histories of domestic violence or childhood abuse (including neglect); the presence of a child or youth with a disability; or two or more barriers to employment, which include the lack of a high school degree or General Education Development (GED), illiteracy, low English proficiency, a history of incarceration or detention for criminal activity, and a history of unstable employment; or
- (4) Any individual or family who:
- (i) Is fleeing, or is attempting to flee, domestic violence, dating violence, sexual assault, stalking, or other dangerous or life-threatening conditions that relate to violence against the individual or a family member, including a child, that has either taken place within the individual's or family's primary nighttime residence or has made the individual or family afraid to return to their primary nighttime residence;
  - (ii) Has no other residence; and
  - (iii) Lacks the resources or support networks, e.g., family, friends, and faith-based or other social networks, to obtain other permanent housing.

HUD is clarifying that persons who are fleeing or attempting to flee human trafficking qualify as homeless under paragraph (4) of the homeless definition at 24 CFR 578.3. HUD considers human trafficking, including labor and sex trafficking, to be "other dangerous or life-threatening conditions that relate to violence against the individual or family member" under paragraph (4) of the definition of homeless at 24 CFR 578.3. HUD will consider an individual or family as homeless under paragraph 4 of the homeless definition under the following circumstances where an individual or family:

- (1) Is experiencing trauma or a lack of safety related to, or fleeing or attempting to flee, domestic violence, dating violence, sexual assault, stalking, or other dangerous, traumatic, or life-threatening conditions related to the violence against the individual or a family member in the individual's or family's current housing situation, including where the health and safety of children are jeopardized;
- (2) Has no other safe residence; and
- (3) Lacks the resources to obtain other safe permanent housing.

At risk of homelessness is defined by the McKinney-Vento Homeless Assistance Act as follows:

- (1) An individual or family who:
  - (i) Has an annual income below 30 percent of median family income for the area, as determined by HUD;

- (ii) Does not have sufficient resources or support networks, e.g., family, friends, faith-based or other social networks, immediately available to prevent them from moving to an emergency shelter or another place described in paragraph (1) of the “Homeless” definition in this section; and
- (iii) Meets one of the following conditions:
  - a. Has moved because of economic reasons two or more times during the 60 days immediately preceding the application for homelessness prevention assistance;
  - b. Is living in the home of another because of economic hardship;
  - c. Has been notified in writing that their right to occupy their current housing or living situation will be terminated within 21 days of the date of application for assistance;
  - d. Lives in a hotel or motel and the cost of the hotel or motel stay is not paid by charitable organizations or by federal, State, or local government programs for low-income individuals;
  - e. Lives in a single-room occupancy or efficiency apartment unit in which there reside more than two persons, or lives in a larger housing unit in which there reside more than 1.5 people per room, as defined by the U.S. Census Bureau;
  - f. Is exiting a publicly funded institution, or system of care (such as a health-care facility, a mental health facility, foster care or other youth facility, or correction program or institution); or
  - g. Otherwise lives in housing that has characteristics associated with instability and an increased risk of homelessness, as identified in the recipient’s approved consolidated plan;
- (2) A child or youth who does not qualify as “homeless” under this section, but qualifies as “homeless” under section 387(3) of the Runaway and Homeless Youth Act (42 U.S.C. 5732a(3)), section 637(11) of the Head Start Act (42 U.S.C. 9832(11)), section 41403(6) of the Violence Against Women Act of 1994 (42 U.S.C. 14043e-2(6)), section 330(h)(5)(A) of the Public Health Service Act (42 U.S.C. 254b(h)(5)(A)), section 3(m) of the Food and Nutrition Act of 2008 (7 U.S.C. 2012(m)), or section 17(b)(15) of the Child Nutrition Act of 1966 (42 U.S.C. 1786(b)(15)); or
- (3) A child or youth who does not qualify as “homeless” under this section, but qualifies as “homeless” under section 725(2) of the McKinney-Vento Homeless Assistance Act (42 U.S.C. 11434a(2)), and the parent(s) or guardian(s) of that child or youth if living with her or him.

Dating violence means violence committed by a person:

- a. Who is or has been in a social relationship of a romantic or intimate nature with the victim; and
- b. Where the existence of such a relationship shall be determined based on a consideration of the following factors:
  - 1. The length of the relationship;
  - 2. The type of relationship; and
  - 3. The frequency of interaction between the persons involved in the relationship.

Domestic violence includes felony or misdemeanor crimes of violence committed by:

- a. A current or former spouse or intimate partner of the victim (the term “spouse or intimate partner of the victim” includes a person who is or has been in a social relationship of a romantic or intimate nature with the victim, as determined by the length of the relationship, the type of the relationship, and the frequency of interaction between the persons involved in the relationship),
- b. A person with whom the victim shares a child in common,
- c. A person who is cohabitating with or has cohabitated with the victim as a spouse or intimate partner,
- d. d. a person similarly situated to a spouse of the victim under the domestic or family violence laws of the jurisdiction receiving grant monies, or
- e. e. any other person against an adult or youth victim who is protected from that person's acts under the domestic or family violence laws of the jurisdiction.

Economic Abuse is the term ‘economic abuse’, in the context of domestic violence, dating violence, and abuse in later life, means behavior that is coercive, deceptive, or unreasonably controls or restrains a person’s ability to acquire, use, or maintain economic resources to which they are entitled, including using coercion, fraud, or manipulation to:

- a. Restrict a person’s access to money, assets, credit, or financial information;
- b. Unfairly use a person’s personal economic resources, including money, assets, and credit, for one’s own advantage; or
- c. Exert undue influence over a person’s financial and economic behavior or decisions, including forcing default on joint or other financial obligations, exploiting powers of attorney, guardianship, or conservatorship, or failing or neglecting to act in the best interests of a person to whom one has a fiduciary duty.

Fleeing or attempting to flee domestic violence, dating violence, sexual assault, or stalking means any individual or family who is:

- a. Experiencing trauma or a lack of safety related to, or fleeing or attempting to flee, domestic violence, dating violence, sexual assault, stalking, or other dangerous, traumatic, or life-threatening conditions related to the violence against the individual or a family member in the individual’s or family’s current housing situation, including where the health and safety of children are jeopardized;
- b. Has no other safe residence; and
- c. Lacks the resources to obtain other safe permanent housing.

Sexual assault means any nonconsensual sexual act proscribed by Federal, Tribal, or State law, including when the survivor lacks capacity to consent.

Stalking means engaging in a course of conduct directed at a specific person that would cause a reasonable person to:

- 1. Fear for the person’s individual safety or the safety of others; or
- 2. Suffer substantial emotional distress.

Technological Abuse means an act or pattern of behavior that occurs within domestic violence, sexual assault, dating violence or stalking and is intended to harm, threaten, intimidate, control, stalk, harass, impersonate, exploit, extort, or monitor, except as otherwise permitted by law, another person, that occurs using

any form of technology, including but not limited to: internet-enabled devices, online spaces and platforms, computers, mobile devices, cameras and imaging programs, apps, location tracking devices, or communication technologies, or any other emerging technologies.

## **Appendix A: NSPIRE INSPECTION STANDARDS**

## DEFINITIONS OF TERMS USED IN STANDARDS

The following definitions related to inspectable areas are used in the attached proposed standards:

---

<b>Unit</b>	A unit (or “dwelling unit”) of HUD housing refers to the interior components of an individual unit. Examples of components included in the interior of a unit may include the bathroom, call-for-aid (if applicable), carbon monoxide devices, ceiling, doors, electrical systems, enclosed patio, floors, HVAC (where individual units are provided), kitchen, lighting, outlets, smoke detectors, stairs, switches, walls, water heater, and windows.
<b>Inside</b>	Inside of HUD housing (or “inside areas”) refers to the common areas and building systems that can be generally found within the building interior and are not inside a unit. Examples of “inside” common areas may include, basements, interior or attached garages, enclosed carports, restrooms, closets, utility rooms, mechanical rooms, community rooms, day care rooms, halls, corridors, stairs, shared kitchens, laundry rooms, offices, enclosed porches, enclosed patios, enclosed balconies, and trash collection areas. Examples of building systems include those components that provide domestic water, electricity, elevators, emergency power, fire protection, HVAC, and sanitary services.
<b>Outside</b>	Outside of HUD housing (or “outside areas”) refers to the building site, building exterior components, and any building systems located outside of the building or unit. Examples of “outside” components may include fencing, retaining walls, grounds, lighting, mailboxes, project signs, parking lots, detached garage or carport, driveways, play areas and equipment, refuse disposal, roads, storm drainage, non-dwelling buildings, and walkways. Components found on the exterior of the building are also considered outside areas, and examples may include doors, attached porches, attached patios, balconies, car ports, fire escapes, foundations, lighting, roofs, walls, and windows.

---

The following definitions related to health and safety are used in the attached proposed standards:

---

<b>Life-Threatening</b>	The Life-Threatening category includes deficiencies that, if evident in the home or on the property, present a high risk of death to a resident.
<b>Severe</b>	The Severe category includes deficiencies that, if evident in the home or on the property, present a high risk of permanent disability, or serious injury or illness, to a resident; or the physical security or safety of a resident or their property would be seriously compromised.
<b>Moderate</b>	The Moderate Health and Safety category includes deficiencies that, if evident in the home or on the property, present a moderate risk of an adverse medical event requiring a healthcare visit; cause temporary harm; or if left untreated, cause or worsen a chronic condition that may have long-lasting adverse health effects; or that the physical security or safety of a resident or their property could be compromised.
<b>Low</b>	Deficiencies critical to habitability but not presenting a substantive health or safety risk to resident.

---

**TABLE 1—ADDRESS AND SIGNAGE STANDARD**

<b>Definition and Location</b>	
<b>Definition</b>	Unique number and name identifiers assigned to property.
<b>Location</b>	Outside: Near building entrances (either above or alongside the entrance or on a nearby post) and road entrances where the property's private road meets a public road.
<b>Deficiency 1 – Address and Signage: Outside</b>	
<b>Deficiency</b>	Address, signage, or building identification codes are broken, illegible, or not visible.
<b>Deficiency Criteria</b>	Address or building identification codes are broken, illegible, or not visible.
<b>Health and Safety Determination</b>	Moderate
<b>Correction Timeframe</b>	30 days
<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If address, signage, or building identification codes are broken, illegible, or not visible, and there is an emergency, then first responders may be delayed if they are unable to efficiently locate the property.</p> <p>If address, signage, or building identification codes are broken, illegible, or not visible, then it is likely that routine or daily maintenance activities are not being addressed.</p>

**TABLE 2—BATHTUB AND SHOWER STANDARD**

<b>Definition and Location</b>	
<b>Definition</b>	Fixtures typically found in bathrooms that dispense clean water used for bathing and self-care which also contain a method for draining used water.
<b>Location</b>	Unit: Bathroom Inside: Bathroom
<b>Deficiency 1 – Bathtub and Shower: Unit</b>	
<b>Deficiency</b>	Only 1 bathtub or shower is present and it is inoperable or does not drain.
<b>Deficiency Criteria</b>	Only 1 bathtub or shower is present within the unit and it is inoperable (i.e., overall system is not meeting function or purpose, with or without visible

	damage) or standing water is present such that the inspector believes water is unable to drain.
<b>Health and Safety Determination</b>	Severe
<b>Correction Timeframe</b>	24 hours
<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If only 1 bathtub or shower is present within the Unit and it is inoperable or standing water is present such that the inspector believes water is unable to drain, then the resident's ability to maintain hygienic practices is limited, which may result in an increased risk of illness from infectious disease.</p> <p>If only 1 bathtub or shower is present within the Unit and it is inoperable or standing water is present such that the inspector believes water is unable to drain, then the resident may not be able to use a feature that is expected to be provided and maintained as part of their rent.</p> <p>A resident is likely to notice if only 1 bathtub or shower is present within the Unit and it is inoperable or standing water is present, and to recognize it is important enough to report it to property management because it may present sanitary hazards or usability barriers. Property management should be expected to prioritize a work order to remedy this deficiency because it may result in sanitary hazards.</p>
<b>Deficiency 1 – Bathtub and Shower: Inside</b>	
<b>Deficiency</b>	Only 1 bathtub or shower is present and it is inoperable or does not drain.
<b>Deficiency Criteria</b>	Only 1 bathtub or shower is present within the Inside and it is inoperable (i.e., overall system is not meeting function or purpose, with or without visible damage) or standing water is present such that the inspector believes water is unable to drain.
<b>Health and Safety determination</b>	Low
<b>Correction Timeframe</b>	60 Days
<b>HCV Correction Timeframe</b>	N/A
<b>HCV Pass/Fail</b>	Pass

<b>Rationale</b>	<p>If only 1 bathtub or shower is present within the Inside and it is inoperable or standing water is present such that the inspector believes water is unable to drain, then the resident may not be able to use a feature that is expected to be provided and maintained as part of their rent.</p> <p>Property management would be expected to ensure that staff members understand how to identify if there is only 1 bathtub or shower present within the Inside and it is inoperable or standing water is present such that the inspector believes water is unable to drain. Management practices would be expected to assure prompt creation and prioritization of a work order to remedy this deficiency because it may result in usability barriers.</p>
<b>Deficiency 2 – Bathtub and Shower: Unit</b>	
<b>Deficiency</b>	A bathtub or shower is inoperable or does not drain and at least 1 bathtub or shower is present elsewhere that is operational.
<b>Deficiency Criteria</b>	A bathtub or shower is inoperable (i.e., overall system is not meeting function or purpose, with or without visible damage) or standing water is present such that the inspector believes water is unable to drain and at least 1 bathtub or shower is present elsewhere within the Unit that is operational.
<b>Health and Safety Determination</b>	Moderate
<b>Correction Timeframe</b>	30 days
<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If a bathtub or shower is inoperable or standing water is present such that the inspector believes water is unable to drain and at least 1 bathtub or shower is present elsewhere within the Unit that is operational, then the resident’s ability to maintain hygienic practices is limited, which may result in an increased risk of illness from infectious disease.</p> <p>If a bathtub or shower is inoperable or standing water is present such that the inspector believes water is unable to drain and at least 1 bathtub or shower is present elsewhere within the Unit that is operational, then the resident may not be able to use a feature that is expected to be provided and maintained as part of their rent.</p> <p>If there are multiple bathtubs or showers present with the Unit, the resident is likely to notice if one is inoperable or has standing water and to recognize it is important enough to report it to property management because it may present sanitary hazards or usability barriers. Property management should be expected to prioritize a work order to remedy this deficiency because it may result in sanitary hazards.</p>

**Deficiency 2 – Bathtub and Shower: Inside**

<b>Deficiency</b>	A bathtub or shower is inoperable or does not drain and at least 1 bathtub or shower is present elsewhere that is operational.
<b>Deficiency Criteria</b>	A bathtub or shower is inoperable (i.e., overall system is not meeting function or purpose, with or without visible damage) or standing water is present such that the inspector believes water is unable to drain and at least 1 bathtub or shower is present elsewhere within the Inside that is operational.
<b>Health and Safety Determination</b>	Low
<b>Correction Timeframe</b>	60 Days
<b>HCV Correction Timeframe</b>	N/A
<b>HCV Pass/Fail</b>	Pass
<b>Rationale</b>	<p>If a bathtub or shower is inoperable or standing water is present such that the inspector believes water is unable to drain and at least 1 bathtub or shower is present elsewhere within the Inside that is operational, then the resident may not be able to use a feature that is expected to be provided and maintained as part of their rent.</p> <p>Property management would be expected to ensure that staff members understand how to identify if there are multiple bathtubs or showers present within the Inside and one is inoperable or has standing water present such that the inspector believes water is unable to drain. Management practices would be expected to assure prompt creation and prioritization of a work order to remedy this deficiency because it may result in usability barriers.</p>
<b>Deficiency 3 – Bathtub and Shower: Unit</b>	
<b>Deficiency</b>	Bathtub component or shower component is damaged, inoperable, or missing such that it may limit the resident’s ability to maintain personal hygiene.
<b>Deficiency Criteria</b>	<p>Bathtub component or shower component is damaged (i.e., visibly defective; impacts functionality) such that it may limit the resident’s ability to maintain personal hygiene.</p> <p>OR</p> <p>Bathtub component or shower component is inoperable (i.e., component is not meeting function or purpose, with or without visible damage) such that it may limit the resident’s ability to maintain personal hygiene.</p> <p>OR</p>

	Bathtub component or shower component is missing (i.e., evidence of prior installation, but is now not present or is incomplete) such that it may limit the resident's ability to maintain personal hygiene.
<b>Health and Safety Determination</b>	Moderate
<b>Correction Timeframe</b>	30 days
<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If a bathtub component or shower component is damaged, inoperable, or missing such that it may limit the resident's ability to maintain personal hygiene, then the resident may be at an increased risk of illness from infectious disease.</p> <p>If a bathtub component or shower component is damaged, inoperable, or missing such that it may limit the resident's ability to maintain personal hygiene, then the resident may not be able to use a feature that is expected to be provided and maintained as part of their rent.</p> <p>If a bathtub component or shower component is damaged, inoperable, or missing such that it may limit the resident's ability to maintain personal hygiene, then the resident is likely to notice this and to recognize it is important enough to report it to property management because it may present sanitary hazards or usability barriers. Property management should be expected to prioritize a work order to remedy this deficiency because it may result in sanitary hazards.</p>

### Deficiency 3 – Bathtub and Shower: Inside

<b>Deficiency</b>	Bathtub component or shower component is damaged, inoperable, or missing such that it may limit the resident's ability to maintain personal hygiene.
<b>Deficiency Criteria</b>	<p>Bathtub component or shower component is damaged (i.e., visibly defective; impacts functionality) such that it may limit the resident's ability to maintain personal hygiene.</p> <p>OR</p> <p>Bathtub component or shower component is inoperable (i.e., component is not meeting function or purpose, with or without visible damage) such that it may limit the resident's ability to maintain personal hygiene.</p> <p>OR</p> <p>Bathtub component or shower component is missing (i.e., evidence of prior installation, but is now not present or is incomplete) such that it may limit the resident's ability to maintain personal hygiene.</p>

<b>Health and Safety Determination</b>	Low
<b>Correction Timeframe</b>	60 Days
<b>HCV Correction Timeframe</b>	N/A
<b>HCV Pass/Fail</b>	Pass
<b>Rationale</b>	<p>If a bathtub component or shower component is damaged, inoperable, or missing such that it may limit the resident’s ability to maintain personal hygiene, then the resident may not be able to use a feature that is expected to be provided and maintained as part of their rent.</p> <p>Property management would be expected to ensure that staff members understand how to identify a bathtub component or shower component that is damaged, inoperable, or missing such that it may not provide a sanitary area to maintain personal hygiene. Management practices would be expected to assure prompt creation and prioritization of a work order to remedy this defect, because it may result in sanitary hazards or usability barriers.</p>

#### **Deficiency 4 – Bathtub and Shower: Unit**

<b>Deficiency</b>	Bathtub component or shower component is damaged, inoperable, or missing and it does not limit the resident’s ability to maintain personal hygiene.
<b>Deficiency Criteria</b>	<p>Bathtub component or shower component is damaged (i.e., visibly defective; impacts functionality) and it does not limit the resident’s ability to maintain personal hygiene.</p> <p>OR</p> <p>Bathtub component or shower component is inoperable (i.e., component is not meeting function or purpose, with or without visible damage) and it does not limit the resident’s ability to maintain personal hygiene.</p> <p>OR</p> <p>Bathtub component or shower component is missing (i.e., evidence of prior installation, but is now not present or is incomplete) and it does not limit the resident’s ability to maintain personal hygiene.</p>
<b>Health and Safety Determination</b>	Low
<b>Correction Timeframe</b>	60 Days
<b>HCV Correction Timeframe</b>	N/A
<b>HCV Pass/Fail</b>	Pass

<b>Rationale</b>	<p>If the resident’s ability to maintain personal hygiene is not limited, but a bathtub component or shower component is damaged, inoperable, or missing, then the resident’s ability to fully utilize an aspect of the fixture may be reduced.</p> <p>If a bathtub component or shower component is damaged, inoperable, or missing and it does not limit the resident’s ability to maintain personal hygiene, then the resident may notice this and report it to property management. Property management may be expected to prioritize a work order to remedy this deficiency because it may result in the resident’s limited ability to fully utilize an aspect of the fixture.</p>
<b>Deficiency 5 – Bathtub and Shower: Unit</b>	
<b>Affirmative Habitability Requirement: Yes</b>	
<b>Deficiency</b>	Bathtub or shower cannot be used in private.
<b>Deficiency Criteria</b>	Bathtub or shower cannot be used in private.
<b>Health and Safety Determination</b>	Moderate
<b>Correction Timeframe</b>	30 days
<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	If a bathtub or shower cannot be used in private, then the resident's reasonable expectation of privacy within their unit is not being met.
<b>Deficiency 5 – Bathtub and Shower: Inside</b>	
<b>Deficiency</b>	Bathtub or shower cannot be used in private.
<b>Deficiency Criteria</b>	Bathtub or shower cannot be used in private.
<b>Health and Safety Determination</b>	Moderate
<b>Correction Timeframe</b>	30 days
<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	If a bathtub or shower cannot be used in private, then the resident's reasonable expectation of privacy is not being met.

**TABLE 3—CABINET AND STORAGE STANDARD**

**Definition and Location**

<b>Definition</b>	Dedicated space for food, goods, or other items. -
<b>Location</b>	Unit: Kitchens, bathroom, laundry Inside: Kitchens, bathroom, laundry
<b>Deficiency 1 – Cabinet and Storage: Unit</b>	
<b>Affirmative Habitability Requirement: Yes</b>	
<b>Deficiency</b>	Food storage space is not present.
<b>Deficiency Criteria</b>	Food storage space is not present.
<b>Health and Safety Determination</b>	Moderate
<b>Correction Timeframe</b>	30 days
<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	If food storage space is not present, then food may be contaminated, and the resident may become ill if they consume the contaminated food.  If food storage space is not present, then the resident may be unable to use a feature that is expected to be included and maintained in their rent.
<b>Deficiency 2 – Cabinet and Storage: Unit</b>	
<b>Deficiency</b>	Storage component is damaged, inoperable, or missing.
<b>Deficiency Criteria</b>	50% or more of the kitchen, bath, or laundry cabinet, drawers, or shelves are damaged (i.e., visibly defective; impacts functionality).  OR  50% or more of the kitchen, bath, or laundry cabinet, drawers, or shelves are inoperable (i.e., overall system or component thereof not meeting function or purpose; with or without visible damage).  OR  50% or more of the kitchen, bath, or laundry cabinet, drawers, or shelves are missing (i.e., evidence of prior installation, but now not present or is incomplete).
<b>Health and Safety Determination</b>	Moderate
<b>Correction Timeframe</b>	30 days
<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail

<b>Rationale</b>	<p>If a storage component is damaged, inoperable, or missing, then the resident may not have sufficient ability to store food, dishes, personal or cleaning items in a safe and sanitary manner.</p> <p>If a storage component is damaged, inoperable, or missing, then the resident may be unable to use a feature that is expected to be included and maintained as part of their rent.</p> <p>A resident is likely to notice if a storage component is damaged, inoperable, or missing and to recognize it is important enough to report it to property management because it may present safety hazards or usability barriers. Property management should be expected to prioritize a work order to remedy this deficiency because it may result in safety hazards or usability barriers.</p>
<b>Deficiency 2 – Cabinet and Storage: Inside</b>	
<b>Deficiency</b>	Storage component is damaged, inoperable, or missing.
<b>Deficiency Criteria</b>	<p>50% or more of the kitchen, bath, or laundry cabinet, drawers, or shelves are damaged (i.e., visibly defective; impacts functionality).</p> <p>OR</p> <p>50% or more of the kitchen, bath, or laundry cabinet, drawers, or shelves are inoperable (i.e., overall system or component thereof not meeting function or purpose; with or without visible damage).</p> <p>OR</p> <p>50% or more of the kitchen, bath, or laundry cabinet, drawers, or shelves are missing (i.e., evidence of prior installation, but now not present or is incomplete).</p>
<b>Health and Safety Determination</b>	Low
<b>Correction Timeframe</b>	60 Days
<b>HCV Correction Timeframe</b>	N/A
<b>HCV Pass/Fail</b>	Pass
<b>Rationale</b>	<p>If a storage component is damaged, inoperable, or missing, then the resident may be unable to use a feature that is expected to be included and maintained as part of their rent.</p> <p>Property management would be expected to ensure that staff members understand how to identify if a storage component is damaged, inoperable, or missing. Management practices would be expected to assure prompt creation and prioritization of a work order to remedy this deficiency because it may result in safety hazards or usability barriers.</p>

TABLE 4—CALL-FOR-AID SYSTEM STANDARD

<b>Definition and Location</b>	
<b>Definition</b>	A call system used by a resident to summon aid during a medical emergency.
<b>Location</b>	Unit: Bathroom, bedroom, hallway Inside: Common area, including bathroom and hallway
<b>Deficiency 1 – Call-for-Aid System: Unit</b>	
<b>Deficiency</b>	System is blocked, or pull cord is higher than 6 inches off the floor.
<b>Deficiency Criteria</b>	System is blocked. OR Pull cord end is higher than 6 inches off the floor.
<b>Health and Safety Determination</b>	Life-Threatening
<b>Correction Timeframe</b>	24 hours
<b>HCV Correction Timeframe</b>	24 hours
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If the system is blocked or the pull cord end is higher than 6 inches off the floor, and the resident is unable to reach the cord, they may not have access to medical care as their ability to alert emergency services is impacted.</p> <p>If a pull cord is missing or the end is higher than 6 inches off the floor, then the resident may not be able to fully use the device, which is assumed to be maintained as part of their rent.</p> <p>If a pull cord is missing or the end is higher than 6 inches off the floor, then it is likely the resident will report this, and the presence of this deficiency may indicate that complaint-based work orders are not being addressed.</p>
<b>Deficiency 1 – Call-for-Aid System: Inside</b>	
<b>Deficiency</b>	System is blocked, or pull cord is higher than 6 inches off the floor.
<b>Deficiency Criteria</b>	System is blocked. OR Pull cord end is higher than 6 inches off the floor.

<b>Health and Safety Determination</b>	Life-Threatening
<b>Correction Timeframe</b>	24 hours
<b>HCV Correction Timeframe</b>	24 hours
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If the system is blocked or the pull cord end is higher than 6 inches off the floor, and the resident is unable to reach the cord, they may not have access to medical care as their ability to alert emergency services is impacted.</p> <p>If a pull cord is missing or the end is higher than 6 inches off the floor, then the resident may not be able to fully use the device, which is assumed to be maintained as part of their rent.</p> <p>If a pull cord is missing or the end is higher than 6 inches off the floor, then this will likely be observed during routine maintenance activities, and the presence of this deficiency may indicate self-generated work orders are not being addressed.</p>

#### **Deficiency 2 – Call-for-Aid System: Unit**

<b>Deficiency</b>	System does not function properly.
<b>Deficiency Criteria</b>	<p>A call-for-aid system does not emit sound or light or send a signal to the annunciator.</p> <p>OR</p> <p>The annunciator does not indicate the correct corresponding room.</p> <p>OR</p> <p>Pull cord is missing.</p> <p>OR</p> <p>Pull cord is tied up such that it cannot be engaged.</p>
<b>Health and Safety Determination</b>	Life-Threatening
<b>Correction Timeframe</b>	24 hours
<b>HCV Correction Timeframe</b>	24 hours
<b>HCV Pass/Fail</b>	Fail

<b>Rationale</b>	<p>If a call-for-aid system does not function properly, then the resident may not have access to medical care as their ability to alert emergency services is impacted.</p> <p>If a call-for-aid system does not function properly, then the resident may not be able to fully use a feature that is expected to be maintained as part of their rent.</p> <p>If a call-for-aid system does not function properly, then the resident will likely report the deficiency, and the presence of this deficiency may indicate that complaint-based work orders are not being addressed.</p>
<b>Deficiency 2 – Call-for-Aid System: Inside</b>	
<b>Deficiency</b>	System does not function properly.
<b>Deficiency Criteria</b>	<p>A call-for-aid system does not emit sound or light or send a signal to the annunciator.</p> <p>OR</p> <p>The annunciator does not indicate the correct corresponding room.</p> <p>OR</p> <p>Pull cord is missing.</p> <p>OR</p> <p>Pull cord is tied up such that it cannot be engaged.</p>
<b>Health and Safety Determination</b>	Life-Threatening
<b>Correction Timeframe</b>	24 hours
<b>HCV Correction Timeframe</b>	24 hours
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If a call-for-aid system does not function properly, then the resident may not have access to medical care as their ability to alert emergency services is impacted.</p> <p>If a call-for-aid system does not function properly, then the resident may not be able to fully use a feature that is expected to be maintained as part of their rent.</p> <p>If a call-for-aid system does not function properly, then this will likely be observed during routine maintenance activities, and the presence of this deficiency may indicate self-generated work orders are not being addressed.</p>

**TABLE 5—CARBON MONOXIDE ALARM STANDARD**

<b>Definition and Location</b>	
<b>Definition</b>	A single or multiple station alarm intended to detect carbon monoxide gas and alert occupants by a distinct audible signal, or if the unit is occupied by a person with a hearing impairment, a distinct visual alarm or combination of audible and visual alarms. It incorporates a sensor, control components and an alarm notification appliance in a single unit.
<b>Location</b>	Unit: Where required as described in the Deficiency Criteria  Inside: Where required as described in the Deficiency Criteria
<b>Deficiency 1 – Carbon Monoxide Alarm: Unit</b>	
	<b>Affirmative Habitability Requirement: Yes</b>
<b>Deficiency</b>	Carbon monoxide alarm is missing, not installed, or not installed in a proper location.
<b>Deficiency Criteria</b>	<p>One (1) or more of the following scenarios exists:</p> <ol style="list-style-type: none"> <li>1. Unit contains a fuel-burning appliance or fuel-burning fireplace, and a carbon monoxide alarm is not installed: <ol style="list-style-type: none"> <li>a. in the immediate vicinity of each bedroom.</li> <li>OR</li> <li>b. within each bedroom.</li> </ol> </li> <li>2. Bedroom or bathroom attached to bedroom: <ol style="list-style-type: none"> <li>a. contains a fuel-burning appliance or fuel-burning fireplace.</li> <li>OR</li> <li>b. has adjacent spaces from which byproducts of combustion gases can flow.</li> <li>AND</li> <li>c. Carbon monoxide alarm is not installed in each bedroom.</li> </ol> </li> <li>3. Unit or bedroom is served by a forced-air furnace that is located elsewhere and a carbon monoxide alarm is not installed: <ol style="list-style-type: none"> <li>a. in the immediate vicinity of each bedroom.</li> <li>OR</li> <li>b. within each bedroom.</li> <li>OR</li> <li>c. within the room or area with the first duct register and the carbon monoxide alarm signals are automatically transmitted to an approved location.</li> </ol> </li> <li>4. Unit or bedroom is located in a building that contains a fuel-burning appliance or fuel-burning fireplace and: <ol style="list-style-type: none"> <li>a. a carbon monoxide alarm is not installed in an approved location between the fuel-burning appliance or fuel-burning fireplace and the Unit or bedroom.</li> <li>OR</li> </ol> </li> </ol>

- 
- b. a carbon monoxide alarm is not installed on the ceiling of the room containing the fuel-burning appliance or fuel-burning fireplace.  
OR
  - c. the Unit or bedroom has communicated openings to the fuel-burning appliance or fuel-burning fireplace and a carbon monoxide alarm is not installed:
    - i. in the immediate vicinity of each bedroom.  
OR
    - ii. within each bedroom.
5. Unit or bedroom is located one (1) story or less above or below an attached private garage that:
- a. does not have natural ventilation.  
OR
  - b. is enclosed and does not have a ventilation system for vehicle exhaust.  
AND
  - c. Carbon monoxide alarm is not installed:
    - i. in the immediate vicinity of each bedroom.  
OR
    - ii. within each bedroom.
- 

<b>Health and Safety Determination</b>	Life-Threatening
<b>Correction Timeframe</b>	24 hours
<b>HCV Correction Timeframe</b>	24 hours
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If a carbon monoxide alarm is missing, not installed, or not installed in a proper location in the unit or the inside area that provides protection for the unit and there is an elevated level of carbon monoxide in the Unit, then the health of the resident may be at risk due to potential carbon monoxide poisoning.</p> <p>Property management would be expected to ensure that staff members understand how to identify if a carbon monoxide alarm is missing, not installed, or not installed in a proper location. Management practices would be expected to assure prompt creation and prioritization of a work order to remedy this deficiency because it may lead to health hazards.</p>
<b>Deficiency 2 – Carbon Monoxide Alarm: Unit</b>	
<b>Deficiency</b>	Carbon monoxide alarm is obstructed.
<b>Deficiency Criteria</b>	Carbon monoxide alarm is obstructed.

---

<b>Health and Safety Determination</b>	Life-Threatening
<b>Correction Timeframe</b>	24 hours
<b>HCV Correction Timeframe</b>	24 hours
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If a carbon monoxide alarm is obstructed and there is a carbon monoxide leak, then the resident's health may be at risk.</p> <p>If a carbon monoxide alarm is obstructed and there is a carbon monoxide leak, then the resident may not be alerted.</p> <p>If a carbon monoxide alarm is obstructed, then the resident may not be able to use a feature that is expected to be provided and maintained as part of the rent.</p> <p>If a carbon monoxide alarm is obstructed, then this will likely be observed during routine maintenance activities and the presence of this deficiency may indicate self-generated work orders are not being addressed.</p>

#### **Deficiency 2 – Carbon Monoxide Alarm: Inside**

<b>Deficiency</b>	Carbon monoxide alarm is obstructed.
<b>Deficiency Criteria</b>	Carbon monoxide alarm is obstructed.
<b>Health and Safety Determination</b>	Life-Threatening
<b>Correction Timeframe</b>	24 hours
<b>HCV Correction Timeframe</b>	24 hours
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If a carbon monoxide alarm is obstructed and there is a carbon monoxide leak, then the resident's health may be at risk.</p> <p>If a carbon monoxide alarm is obstructed, then this will likely be observed during routine maintenance activities and the presence of this deficiency may indicate self-generated work orders are not being addressed.</p>

#### **Deficiency 3 – Carbon Monoxide Alarm: Unit**

<b>Deficiency</b>	Carbon monoxide alarm does not produce an audio or visual alarm when tested.
-------------------	--

<b>Deficiency Criteria</b>	Carbon monoxide alarm does not produce audio or visual alarm when tested.
<b>Health and Safety Determination</b>	Life-Threatening
<b>Correction Timeframe</b>	24 hours
<b>HCV Correction Timeframe</b>	24 hours
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If a carbon monoxide alarm does not produce an audio or visual alarm, and there is carbon monoxide leak, then the health and safety of the resident could be at risk as they may not be alerted.</p> <p>If a carbon monoxide alarm does not produce an audio or visual alarm, then this will likely be observed during routine maintenance activities, and the presence of this deficiency may indicate self-generated work orders are not being addressed, as carbon monoxide alarms should be tested monthly and batteries changed yearly.</p>

### **Deficiency 3 – Carbon Monoxide Alarm: Inside**

<b>Deficiency</b>	Carbon monoxide alarm does not produce audio or visual alarm when tested.
<b>Deficiency Criteria</b>	Carbon monoxide alarm does not produce an audio or visual alarm when tested.
<b>Health and Safety Determination</b>	Life-Threatening
<b>Correction Timeframe</b>	24 hours
<b>HCV Correction Timeframe</b>	24 hours
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If a carbon monoxide alarm does not produce an audio or visual alarm, and there is carbon monoxide leak, then the health and safety of the resident could be at risk as they may not be alerted.</p> <p>If a carbon monoxide alarm does not produce an audio or visual alarm, then this will likely be observed during routine maintenance activities, and the presence of this deficiency may indicate self-generated work orders are not being addressed, as carbon monoxide alarms should be tested monthly and batteries changed yearly.</p>

TABLE 6—CEILING STANDARD

<b>Definition and Location</b>	
<b>Definition</b>	The upper interior surface of a room that provides separation between rooms, spaces, and floors.
<b>Location</b>	Unit: Upper interior surface of room  Inside: Upper interior surface of room
<b>Deficiency 1 – Ceiling: Unit</b>	
<b>Deficiency</b>	Ceiling has an unstable surface.
<b>Deficiency Criteria</b>	Ceiling has an unstable surface.  OR  There is cracking or small circles or blisters (e.g., nail pops) on the ceiling (which are a sign the plasterboard sheeting may be pulling away from the nails or screws).
<b>Health and Safety Determination</b>	Moderate
<b>Correction Timeframe</b>	30 days
<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	If the ceiling has an unstable surface, then the resident could be injured by falling debris.  If the ceiling has an unstable surface, then a feature of the home that is expected to be provided and maintained as part of the resident’s rent may be jeopardized.  If the ceiling has an unstable surface, then it is likely the resident will report this, and the presence of this deficiency may indicate that complaint-based work orders are not being addressed.
<b>Deficiency 1 – Ceiling: Inside</b>	
<b>Deficiency</b>	Ceiling has an unstable surface.
<b>Deficiency Criteria</b>	Ceiling has an unstable surface.  OR

	There is cracking or small circles or blisters (e.g., nail pops) on the ceiling (which are a sign the plasterboard sheeting may be pulling away from the nails or screws).
<b>Health and Safety Determination</b>	Moderate
<b>Correction Timeframe</b>	30 days
<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If the ceiling has an unstable surface, then the resident could be injured by falling debris.</p> <p>If the ceiling has an unstable surface, then a feature of the home that is expected to be provided and maintained as part of the resident's rent may be jeopardized.</p> <p>If the ceiling has an unstable surface, then it is likely the resident will report this, and the presence of this deficiency may indicate that complaint-based work orders are not being addressed.</p>

#### Deficiency 2 – Ceiling: Unit

<b>Deficiency</b>	Ceiling has a hole.
<b>Deficiency Criteria</b>	<p>A hole is present that opens directly to the outside environment.</p> <p>OR</p> <p>A hole is present that is 2 inches or greater in diameter.</p>
<b>Health and Safety Determination</b>	Moderate
<b>Correction Timeframe</b>	30 days
<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If the ceiling has a hole, then the resident may be exposed to potentially harmful materials that may be in the space above the ceiling (e.g., weather, insulation, vermin).</p> <p>If the ceiling has hole, then it may compromise the fire stop and smoke stop properties of the ceiling. Openings (including those due to breaking, displacing, or removing ceiling tiles) can enable hot gases and smoke from a fire to rise and accumulate above detectors and sprinklers, which can delay</p>

their activation, enabling fires to rapidly grow larger before an alarm and response can occur. This has the potential to put the resident at increased risk in the event of a fire.

If the ceiling has a hole, then the resident is unable to fully rely on or use a feature that is expected to be provided and maintained as part of their rent.

If the ceiling has a hole, and the resident is responsible for utilities, then this may result in increased utility costs to the resident.

If the ceiling has a hole, then it is likely the resident will report this, and the presence of this deficiency may indicate that complaint-based work orders are not being addressed.

### Deficiency 2 – Ceiling: Inside

<b>Deficiency</b>	Ceiling has a hole.
<b>Deficiency Criteria</b>	A hole is present that opens directly to the outside environment.  OR  A hole is present that is 2 inches or greater in diameter.
<b>Health and Safety Determination</b>	Moderate
<b>Correction Timeframe</b>	30 days
<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If the ceiling has a hole, then the resident may be exposed to potentially harmful materials that may be in the space above the ceiling (e.g., weather, insulation, vermin).</p> <p>If the ceiling has a hole, then it may compromise the fire stop and smoke stop properties of the ceiling. Openings (including those due to breaking, displacing, or removing ceiling tiles) can enable hot gases and smoke from a fire to rise and accumulate above detectors and sprinklers, which can delay their activation, enabling fires to rapidly grow larger before an alarm and response can occur. This has the potential to put the resident at increased risk in the event of a fire.</p> <p>If the ceiling has a hole, then the resident is unable to fully rely on or use a feature that is expected to be provided and maintained as part of their rent.</p> <p>If the ceiling has a hole, and the resident is responsible for utilities, then this may result in increased utility costs to the resident.</p>

If the ceiling has a hole, then it is likely the resident will report this, and the presence of this deficiency may indicate that complaint-based work orders are not being addressed.

### Deficiency 3 – Ceiling: Unit

<b>Deficiency</b>	Ceiling component(s) is not functionally adequate.
<b>Deficiency Criteria</b>	Ceiling component(s) is not functionally adequate (i.e., does not allow ceiling to enclose a room, protect shaft or circulation space, create enclosure of and separation between spaces, control the diffusion of light and sound around a room).
<b>Health and Safety Determination</b>	Severe
<b>Correction Timeframe</b>	24 hours
<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If a ceiling component(s) is not functionally adequate, then the resident could be injured by falling debris.</p> <p>If a ceiling component(s) is not functionally adequate, then the resident may be unable to fully rely on or use a feature that is expected to be provided and maintained as part of their rent.</p> <p>A resident is likely to notice if a ceiling component(s) is not functionally adequate and to recognize it is important enough to report it to property management because it may present safety hazards. Property management should be expected to prioritize a work order to remedy this deficiency because it may result in safety hazards.</p>

### Deficiency 3 – Ceiling: Inside

<b>Deficiency</b>	Ceiling component(s) is not functionally adequate.
<b>Deficiency Criteria</b>	Ceiling component(s) is not functionally adequate (i.e., does not allow ceiling to enclose a room, protect shaft or circulation space, create enclosure of and separation between spaces, control the diffusion of light and sound around a room).
<b>Health and Safety Determination</b>	Severe
<b>Correction Timeframe</b>	24 hours

<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If a ceiling component(s) is not functionally adequate, then the resident could be injured by falling debris.</p> <p>If a ceiling component(s) is not functionally adequate, then the resident may be unable to fully rely on or use a feature that is expected to be provided and maintained as part of their rent.</p> <p>Property management would be expected to ensure that staff members understand how to identify if a ceiling component(s) is not functionally adequate. Management practices would be expected to assure prompt creation and prioritization of a work order to remedy this deficiency because it may result in safety hazards.</p>

**TABLE 7—CHIMNEY STANDARD**

<b>Definition and Location</b>	
<b>Definition</b>	A vertical or near vertical passageway connected to a fireplace or wood-burning appliance.
<b>Location</b>	<p>Unit: Any enclosed, habitable space where a gas fireplace, wood-burning fireplace, or wood-burning appliance is located</p> <p>Inside: Any enclosed, shared space where a gas fireplace, wood-burning fireplace, or wood-burning appliance is located</p> <p>Outside: Any exterior, visually accessible component of a gas fireplace, wood-burning fireplace, or wood-burning appliance</p>
<b>Deficiency 1 – Chimney: Unit</b>	
<b>Deficiency</b>	A visually accessible chimney, flue, or firebox connected to a fireplace or wood-burning appliance is incomplete or damaged such that it may not safely contain fire and convey smoke and combustion gases to the exterior.
<b>Deficiency Criteria</b>	<p>A visually accessible (i.e., can be reasonably accessed and observed) chimney, flue, or firebox connected to a fireplace or wood-burning appliance is incomplete (i.e., evidence of a previously installed component that is now not present) such that it may not safely contain fire and convey smoke and combustion gases to the exterior.</p> <p>OR</p> <p>A visually accessible (i.e., can be reasonably accessed and observed) chimney, flue, or firebox connected to a fireplace or wood-burning</p>

	appliance is damaged (i.e., visibly defective; impacts functionality) such that it may not safely contain fire and convey smoke and combustion gases to the exterior.
<b>Health and Safety Determination</b>	Life-Threatening
<b>Correction Timeframe</b>	24 hours
<b>HCV Correction Timeframe</b>	24 hours
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If a visually accessible chimney, flue, or firebox connected to a fireplace or wood-burning appliance is incomplete or damaged such that it may not safely contain fire and convey smoke and combustion gases to the exterior when used, then the resident may be at an increased risk of exposure to gases or smoke, which may result in respiratory issues or asphyxiation.</p> <p>If a visually accessible chimney, flue, or firebox connected to a fireplace or wood-burning appliance is incomplete or damaged such that it may not safely contain fire and convey smoke and combustion gases to the exterior when used, then there may be an increased safety risk to the resident of fire spread, which may result in injury or death.</p> <p>Property management would be expected to ensure that staff members understand how to identify if a visually accessible chimney, flue, or firebox connected to a fireplace or wood-burning appliance is incomplete or damaged such that it may not safely contain fire and convey smoke and combustion gases to the exterior. Management practices would be expected to assure prompt creation and prioritization of a work order to remedy this deficiency because it may lead to health and safety hazards.</p>

#### Deficiency 1 – Chimney: Inside

<b>Deficiency</b>	A visually accessible chimney, flue, or firebox connected to a fireplace or wood-burning appliance is incomplete or damaged such that it may not safely contain fire and convey smoke and combustion gases to the exterior.
<b>Deficiency Criteria</b>	<p>A visually accessible (i.e., can be reasonably accessed and observed) chimney, flue, or firebox connected to a fireplace or wood-burning appliance is incomplete (i.e., evidence of a previously installed component that is now not present) such that it may not safely contain fire and convey smoke and combustion gases to the exterior.</p> <p>OR</p> <p>A visually accessible (i.e., can be reasonably accessed and observed) chimney, flue, or firebox connected to a fireplace or wood-burning</p>

	appliance is damaged (i.e., visibly defective; impacts functionality) such that it may not safely contain fire and convey smoke and combustion gases to the exterior.
<b>Health and Safety Determination</b>	Life-Threatening
<b>Correction Timeframe</b>	24 hours
<b>HCV Correction Timeframe</b>	24 hours
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If a visually accessible chimney, flue, or firebox connected to a fireplace or wood-burning appliance is incomplete or damaged such that it may not safely contain fire and convey smoke and combustion gases to the exterior when used, then the resident may be at an increased risk of exposure to gases or smoke, which may result in respiratory issues or asphyxiation.</p> <p>If a visually accessible chimney, flue, or firebox connected to a fireplace or wood-burning appliance is incomplete or damaged such that it may not safely contain fire and convey smoke and combustion gases to the exterior when used, then there may be an increased safety risk to the resident of fire spread, which may result in injury or death.</p> <p>Property management would be expected to ensure that staff members understand how to identify if a visually accessible chimney, flue, or firebox connected to a fireplace or wood-burning appliance is incomplete or damaged such that it may not safely contain fire and convey smoke and combustion gases to the exterior. Management practices would be expected to assure prompt creation and prioritization of a work order to remedy this deficiency, because it may lead to health and safety hazards.</p>

#### **Deficiency 1 – Chimney: Outside**

<b>Deficiency</b>	A visually accessible chimney, flue, or firebox connected to a fireplace or wood-burning appliance is incomplete or damaged such that it may not safely contain fire and convey smoke and combustion gases to the exterior.
<b>Deficiency Criteria</b>	<p>A visually accessible (i.e., can be reasonably accessed and observed) chimney, flue, or firebox connected to a fireplace or wood-burning appliance is incomplete (i.e., evidence of a previously installed component that is now not present) such that it may not safely contain fire and convey smoke and combustion gases to the exterior.</p> <p>OR</p> <p>A visually accessible (i.e., can be reasonably accessed and observed) chimney, flue, or firebox connected to a fireplace or wood-burning</p>

	appliance is damaged (i.e., visibly defective; impacts functionality) such that it may not safely contain fire and convey smoke and combustion gases to the exterior.
<b>Health and Safety Determination</b>	Life-Threatening
<b>Correction Timeframe</b>	24 hours
<b>HCV Correction Timeframe</b>	24 hours
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If a visually accessible chimney, flue, or firebox connected to a fireplace or wood-burning appliance is incomplete or damaged such that it may not safely contain fire and convey smoke and combustion gases to the exterior when used, then there may be an increased safety risk to the resident of fire spread, which may result in injury or death.</p> <p>Property management would be expected to ensure that staff members understand how to identify if a visually accessible chimney, flue, or firebox connected to a fireplace or wood-burning appliance is incomplete or damaged such that it may not safely contain fire and convey smoke and combustion gases to the exterior. Management practices would be expected to assure prompt creation and prioritization of a work order to remedy this deficiency, because it may lead to health and safety hazards.</p>
<b>Deficiency 2 – Chimney: Outside</b>	
<b>Deficiency</b>	Chimney exhibits signs of structural failure.
<b>Deficiency Criteria</b>	The chimney exhibits signs of structural failure such that the integrity of the chimney is jeopardized.
<b>Health and Safety Determination</b>	Life-Threatening
<b>Correction Timeframe</b>	24 hours
<b>HCV Correction Timeframe</b>	24 hours
<b>HCV Pass/Fail</b>	Fail

<b>Rationale</b>	<p>If the chimney exhibits signs of structural failure such that the integrity of the chimney is jeopardized, then there may be an increased safety risk to the resident due to falling debris, instability, or fire spread, which may result in injury or death.</p> <p>If the chimney exhibits signs of structural failure such that the integrity of the chimney is jeopardized, then the resident may not be able to safely use the fireplace or wood-burning appliance.</p> <p>Property management would be expected to ensure that staff members understand how to identify if a chimney exhibits signs of structural failure such that the integrity of the chimney is jeopardized. Management practices would be expected to assure prompt creation and prioritization of a work order to remedy this deficiency because it may result in safety hazards or usability barriers.</p> <p>If the chimney exhibits signs of structural failure such that the integrity of the chimney is jeopardized, then the chimney may be unable to safely support its related components.</p>
------------------	--

**TABLE 8—CLOTHES DRYER EXHAUST VENTILATION STANDARD**

<b>Definition and Location</b>	
<b>Definition</b>	The system connected to the clothes dryer vent outlet that exhausts air from the dryer blower to a designated area.
<b>Location</b>	Unit: Laundry room, washer and dryer area Inside: Laundry room, washer and dryer area Outside: Exterior vent cover
<b>Deficiency 1 – Clothes Dryer Exhaust Ventilation: Unit</b>	
<b>Deficiency</b>	Electric dryer transition duct is detached or missing.
<b>Deficiency Criteria</b>	Electric dryer transition duct is detached or missing (i.e., evidence of prior installation, but is now not present or is incomplete).
<b>Health and Safety Determination</b>	Life-Threatening
<b>Correction Timeframe</b>	24 hours
<b>HCV Correction Timeframe</b>	24 hours
<b>HCV Pass/Fail</b>	Fail

<b>Rationale</b>	<p>If the electric dryer transition duct is detached or missing, this may increase interior moisture levels, which provides an environment favorable for mold growth and may trigger respiratory issues.</p> <p>If the electric dryer transition duct is detached or missing, and there is a fire within the appliance or dryer transition duct, the ducting cannot adequately contain the fire, and the resident may be at an increased risk of injury or death.</p> <p>If the electric dryer transition duct is detached or missing, then the resident may not be able to fully utilize features of an appliance.</p> <p>Property management would be expected to ensure that staff members understand how to identify an electric dryer transition duct that is detached or missing. Management practices would be expected to assure prompt creation and prioritization of a work order to remedy this deficiency, because it may result in health or safety hazards or usability barriers.</p>
<b>Deficiency 1 – Clothes Dryer Exhaust Ventilation: Inside</b>	
<b>Deficiency</b>	Electric dryer transition duct is detached or missing.
<b>Deficiency Criteria</b>	Electric dryer transition duct is detached or missing (i.e., evidence of prior installation, but is now not present or is incomplete).
<b>Health and Safety Determination</b>	Life-Threatening
<b>Correction Timeframe</b>	24 hours
<b>HCV Correction Timeframe</b>	24 hours
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If the electric dryer transition duct is detached or missing, this may increase interior moisture levels, which provides an environment favorable for mold growth and may trigger respiratory issues.</p> <p>If the electric dryer transition duct is detached or missing, and there is a fire within the appliance or dryer transition duct, the ducting cannot adequately contain the fire, and the resident may be at an increased risk of injury or death.</p> <p>If the electric dryer transition duct is detached or missing, then the resident may not be able to fully utilize features of an appliance.</p> <p>Property management would be expected to ensure that staff members understand how to identify an electric dryer transition duct that is detached or missing. Management practices would be expected to assure prompt</p>

creation and prioritization of a work order to remedy this deficiency, because it may result in health or safety hazards or usability barriers.

#### **Deficiency 2 – Clothes Dryer Exhaust Ventilation: Unit**

<b>Deficiency</b>	Gas dryer transition duct is detached or missing.
<b>Deficiency Criteria</b>	Gas dryer transition duct is detached or missing (i.e., evidence of prior installation, but is now not present or is incomplete).
<b>Health and Safety Determination</b>	Life-Threatening
<b>Correction Timeframe</b>	24 hours
<b>HCV Correction Timeframe</b>	24 hours
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If the gas dryer transition duct is detached or missing, then the resident may be at an increased risk of carbon monoxide exposure, which may cause respiratory issues or death due to carbon monoxide poisoning.</p> <p>If the gas dryer transition duct is detached or missing, and there is a fire within the appliance or dryer transition duct, the ducting cannot adequately contain the fire, and the resident may be at an increased risk of injury or death.</p> <p>If the gas dryer transition duct is detached or missing, then the resident may not be able to safely utilize features of an appliance.</p> <p>Property management would be expected to ensure that staff members understand how to identify a gas dryer transition duct that is detached or missing. Management practices would be expected to assure prompt creation and prioritization of a work order to remedy this deficiency, because it may result in health hazards or usability barriers.</p>

#### **Deficiency 2 – Clothes Dryer Exhaust Ventilation: Inside**

<b>Deficiency</b>	Gas dryer transition duct is detached or missing.
<b>Deficiency Criteria</b>	Gas dryer transition duct is detached or missing (i.e., evidence of prior installation, but is now not present or is incomplete).
<b>Health and Safety Determination</b>	Life-Threatening
<b>Correction Timeframe</b>	24 hours
<b>HCV Correction Timeframe</b>	24 hours

<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If the gas dryer transition duct is detached or missing, then the resident may be at an increased risk of carbon monoxide exposure, which may cause respiratory issues or death due to carbon monoxide poisoning.</p> <p>If the gas dryer transition duct is detached or missing, and there is a fire within the appliance or dryer transition duct, the ducting cannot adequately contain the fire, and the resident may be at an increased risk of injury or death.</p> <p>If the gas dryer transition duct is detached or missing, then the resident may not be able to safely utilize features of an appliance.</p> <p>Property management would be expected to ensure that staff members understand how to identify a gas dryer transition duct that is detached or missing. Management practices would be expected to assure prompt creation and prioritization of a work order to remedy this deficiency, because it may result in health hazards or usability barriers.</p>
<b>Deficiency 3 – Clothes Dryer Exhaust Ventilation: Unit</b>	
<b>Deficiency</b>	Electric dryer exhaust ventilation system has restricted airflow.
<b>Deficiency Criteria</b>	Electric dryer exhaust ventilation system is blocked or damaged such that airflow may be restricted.
<b>Health and Safety Determination</b>	Life-Threatening
<b>Correction Timeframe</b>	24 hours
<b>HCV Correction Timeframe</b>	24 hours
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If the electric dryer exhaust ventilation system is blocked or damaged such that airflow may be restricted, this may increase interior moisture levels, which provides an environment favorable for mold growth and may trigger respiratory issues.</p> <p>If the electric dryer exhaust ventilation system is blocked or damaged such that airflow may be restricted, and the clothes dryer achieves a high enough temperature due to the obstruction, there may be an increased safety risk to the resident of fire, which may result in injury or death.</p> <p>If the electric dryer exhaust ventilation system is blocked or damaged such that airflow may be restricted, then the resident may not be able to fully utilize features of an appliance.</p>

A resident is likely to notice if the electric dryer exhaust ventilation system is blocked or damaged such that airflow may be restricted within the unit and to recognize it is important enough to report it to property management because it may present usability barriers. Property management should be expected to prioritize a work order to remedy this deficiency because it may result in health or safety hazards.

### Deficiency 3 – Clothes Dryer Exhaust Ventilation: Inside

<b>Deficiency</b>	Electric dryer exhaust ventilation system has restricted airflow.
<b>Deficiency Criteria</b>	Electric dryer exhaust ventilation system is blocked or damaged such that airflow may be restricted.
<b>Health and Safety Determination</b>	Life-Threatening
<b>Correction Timeframe</b>	24 hours
<b>HCV Correction Timeframe</b>	24 hours
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If the electric dryer exhaust ventilation system is blocked or damaged such that airflow may be restricted, this may increase interior moisture levels, which provides an environment favorable for mold growth and may trigger respiratory issues.</p> <p>If the electric dryer exhaust ventilation system is blocked or damaged such that airflow may be restricted, and the clothes dryer achieves a high enough temperature due to the obstruction, there may be an increased safety risk to the resident of fire, which may result in injury or death.</p> <p>If the electric dryer exhaust ventilation system is blocked or damaged such that airflow may be restricted, then the resident may not be able to fully utilize features of an appliance.</p> <p>Property management would be expected to ensure that staff members understand how to identify an electric dryer exhaust ventilation system that is blocked or damaged such that airflow may be restricted. Management practices would be expected to assure prompt creation and prioritization of a work order to remedy this deficiency, because it may result in health or safety hazards or usability barriers.</p>

### Deficiency 3 – Clothes Dryer Exhaust Ventilation: Outside

<b>Deficiency</b>	Electric dryer exhaust ventilation system has restricted airflow.
<b>Deficiency Criteria</b>	Electric dryer exhaust ventilation system is blocked or damaged such that airflow may be restricted.

<b>Health and Safety Determination</b>	Life-Threatening
<b>Correction Timeframe</b>	24 hours
<b>HCV Correction Timeframe</b>	24 hours
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If the electric dryer exhaust ventilation system is blocked or damaged such that airflow may be restricted, this may increase interior moisture levels, which provides an environment favorable for mold growth and may trigger respiratory issues.</p> <p>If the electric dryer exhaust ventilation system is blocked or damaged such that airflow may be restricted, and the clothes dryer achieves a high enough temperature due to the obstruction, there may be an increased safety risk to the resident of fire, which may result in injury or death.</p> <p>If the electric dryer exhaust ventilation system is blocked or damaged such that airflow may be restricted, then the resident may not be able to fully utilize features of an appliance.</p> <p>Property management would be expected to ensure that staff members understand how to identify an electric dryer exhaust ventilation system that is blocked or damaged such that airflow may be restricted. Management practices would be expected to assure prompt creation and prioritization of a work order to remedy this deficiency, because it may result in health or safety hazards or usability barriers.</p>
<b>Deficiency 4 – Clothes Dryer Exhaust Ventilation: Outside</b>	
<b>Deficiency</b>	Exterior dryer vent cover, cap, or a component thereof is missing.
<b>Deficiency Criteria</b>	Exterior dryer vent cover, cap, or a component thereof is missing (i.e., evidence of prior installation, but now not present or is incomplete).
<b>Health and Safety Determination</b>	Low
<b>Correction Timeframe</b>	60 Days
<b>HCV Correction Timeframe</b>	N/A
<b>HCV Pass/Fail</b>	Pass

<b>Rationale</b>	Property management would be expected to ensure that staff members understand how to identify an exterior dryer vent cover, cap, or a component thereof that is missing. Management practices would be expected to assure prompt creation and prioritization of a work order to remedy this deficiency because it may allow pests to access the dryer ventilation system and build nests resulting in a blockage.
<b>Deficiency 5 – Clothes Dryer Exhaust Ventilation: Unit</b>	
<b>Deficiency</b>	Dryer transition duct is constructed of unsuitable material.
<b>Deficiency Criteria</b>	Dryer transition duct is not constructed of metal or an approved material.
<b>Health and Safety Determination</b>	Life-Threatening
<b>Correction Timeframe</b>	24 hours
<b>HCV Correction Timeframe</b>	24 hours
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If the dryer transition duct is not constructed of metal or an approved material, and there is a fire within the appliance or dryer transition duct, the ducting cannot adequately contain the fire, and the resident may be at an increased risk of injury or death.</p> <p>Property management would be expected to ensure that staff members understand how to identify a dryer transition duct that is not constructed of metal or an approved material. Management practices would be expected to assure prompt creation and prioritization of a work order to remedy this deficiency because it may result in safety hazards.</p>
<b>Deficiency 5 – Clothes Dryer Exhaust Ventilation: Inside</b>	
<b>Deficiency</b>	Dryer transition duct is constructed of unsuitable material.
<b>Deficiency Criteria</b>	Dryer transition duct is not constructed of metal or an approved material.
<b>Health and Safety Determination</b>	Life-Threatening
<b>Correction Timeframe</b>	24 hours
<b>HCV Correction Timeframe</b>	24 hours
<b>HCV Pass/Fail</b>	Fail

<b>Rationale</b>	<p>If the dryer transition duct is not constructed of metal or an approved material, and there is a fire within the appliance or dryer transition duct, the ducting cannot adequately contain the fire, and the resident may be at an increased risk of injury or death.</p> <p>Property management would be expected to ensure that staff members understand how to identify a dryer transition duct that is not constructed of metal or an approved material. Management practices would be expected to assure prompt creation and prioritization of a work order to remedy this deficiency because it may result in safety hazards.</p>
<b>Deficiency 6 – Clothes Dryer Exhaust Ventilation: Unit</b>	
<b>Deficiency</b>	Gas dryer exhaust ventilation system has restricted airflow.
<b>Deficiency Criteria</b>	Gas dryer exhaust ventilation system is blocked or damaged such that airflow may be restricted.
<b>Health and Safety Determination</b>	Life-Threatening
<b>Correction Timeframe</b>	24 hours
<b>HCV Correction Timeframe</b>	24 hours
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If the gas dryer exhaust ventilation system is blocked or damaged such that airflow may be restricted, then the resident may be at an increased risk of carbon monoxide exposure, which may cause respiratory issues or death due to carbon monoxide poisoning.</p> <p>If the gas dryer exhaust ventilation system is blocked or damaged such that airflow may be restricted, this may increase interior moisture levels, which provides an environment favorable for mold growth and may trigger respiratory issues.</p> <p>If the gas dryer exhaust ventilation system is blocked or damaged such that airflow may be restricted, and the clothes dryer achieves a high enough temperature due to the obstruction, there may be an increased safety risk to the resident of fire, which may result in injury or death.</p> <p>If the gas dryer exhaust ventilation system is blocked or damaged such that airflow may be restricted, then the resident may not be able to fully utilize features of an appliance.</p> <p>A resident is likely to notice if the gas dryer exhaust ventilation system is blocked or damaged such that airflow may be restricted within the unit and to recognize it is important enough to report it to property management</p>

because it may present usability barriers. Property management should be expected to prioritize a work order to remedy this deficiency because it may result in health or safety hazards.

#### **Deficiency 6 – Clothes Dryer Exhaust Ventilation: Inside**

<b>Deficiency</b>	Gas dryer exhaust ventilation system has restricted airflow.
<b>Deficiency Criteria</b>	Gas dryer exhaust ventilation system is blocked or damaged such that airflow may be restricted.
<b>Health and Safety Determination</b>	Life-Threatening
<b>Correction Timeframe</b>	24 hours
<b>HCV Correction Timeframe</b>	24 hours
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If the gas dryer exhaust ventilation system is blocked or damaged such that airflow may be restricted, then the resident may be at an increased risk of carbon monoxide exposure, which may cause respiratory issues or death due to carbon monoxide poisoning.</p> <p>If the gas dryer exhaust ventilation system is blocked or damaged such that airflow may be restricted, this may increase interior moisture levels, which provides an environment favorable for mold growth and may trigger respiratory issues.</p> <p>If the gas dryer exhaust ventilation system is blocked or damaged such that airflow may be restricted, and the clothes dryer achieves a high enough temperature due to the obstruction, there may be an increased safety risk to the resident of fire, which may result in injury or death.</p> <p>If the gas dryer exhaust ventilation system is blocked or damaged such that airflow may be restricted, then the resident may not be able to fully utilize features of an appliance.</p> <p>Property management would be expected to ensure that staff members understand how to identify a gas dryer exhaust ventilation system that is blocked or damaged such that airflow may be restricted. Management practices would be expected to assure prompt creation and prioritization of a work order to remedy this deficiency, because it may result in health or safety hazards or usability barriers.</p>

#### **Deficiency 6 – Clothes Dryer Exhaust Ventilation: Outside**

<b>Deficiency</b>	Gas dryer exhaust ventilation system has restricted airflow.
-------------------	--

<b>Deficiency Criteria</b>	Gas dryer exhaust ventilation system is blocked or damaged such that airflow may be restricted.
<b>Health and Safety Determination</b>	Life-Threatening
<b>Correction Timeframe</b>	24 hours
<b>HCV Correction Timeframe</b>	24 hours
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If the gas dryer exhaust ventilation system is blocked or damaged such that airflow may be restricted, then the resident may be at an increased risk of carbon monoxide exposure, which may cause respiratory issues or death due to carbon monoxide poisoning.</p> <p>If the gas dryer exhaust ventilation system is blocked or damaged such that airflow may be restricted, this may increase interior moisture levels, which provides an environment favorable for mold growth and may trigger respiratory issues.</p> <p>If the gas dryer exhaust ventilation system is blocked or damaged such that airflow may be restricted, and the clothes dryer achieves a high enough temperature due to the obstruction, there may be an increased safety risk to the resident of fire, which may result in injury or death.</p> <p>If the gas dryer exhaust ventilation system is blocked or damaged such that airflow may be restricted, then the resident may not be able to fully utilize features of an appliance.</p> <p>Property management would be expected to ensure that staff members understand how to identify a gas dryer exhaust ventilation system that is blocked or damaged such that airflow may be restricted. Management practices would be expected to assure prompt creation and prioritization of a work order to remedy this deficiency, because it may result in health or safety hazards or usability barriers.</p>

**TABLE 9—COOKING APPLIANCE STANDARD**

<b>Definition and Location</b>	
<b>Definition</b>	<p><u>Cooking range</u>: An electric or gas stove with several burners and one or more connected ovens.</p> <p><u>Cooktop</u>: Usually a standalone device that may be built into a counter and has one or more electric or gas burners.</p>

---

Oven: A thermally insulated chamber used for cooking, heating, and baking food.

Microwave: A small oven that heats food with electromagnetic radiation.

---

**Location** Unit: Kitchen  
Inside: Kitchen

#### **Deficiency 1 – Cooking Appliance: Unit**

**Deficiency** Cooking range, cooktop, or oven does not ignite or produce heat.

**Deficiency Criteria** No burner on the cooking range or cooktop produces heat.  
OR  
The oven does not produce heat.

**Health and Safety Determination** Severe

**Correction Timeframe** 24 hours

**HCV Correction Timeframe** 30 days

**HCV Pass/Fail** Fail

**Rationale**

If the cooking range, cooktop, or oven does not ignite or produce heat, then the resident may be unable to safely prepare food and may be exposed to foodborne germs that increase the risk of foodborne illness.

If the cooking range, cooktop, or oven does not ignite or produce heat, then the resident may not be able to fully use an appliance that is expected to be provided and maintained as part of the rent.

A resident is likely to notice if the cooking range, cooktop, or oven does not ignite or produce heat and recognize it is important enough to report it to property management because it may present health hazards or usability barriers. Property management should be expected to prioritize a work order to remedy this deficiency because it may result in health hazards or usability barriers.

#### **Deficiency 1 – Cooking Appliance: Inside**

**Deficiency** Cooking range, cooktop, or oven does not ignite or produce heat.

**Deficiency Criteria** No burner on the cooking range or cooktop produces heat.  
OR  
The oven does not produce heat.

---

<b>Health and Safety Determination</b>	Low
<b>Correction Timeframe</b>	60 Days
<b>HCV Correction Timeframe</b>	N/A
<b>HCV Pass/Fail</b>	Pass
<b>Rationale</b>	<p>If the cooking range, cooktop, or oven does not ignite or produce heat, then the resident may not be able to fully use an appliance that is expected to be provided and maintained as part of the rent.</p> <p>Property management would be expected to ensure that staff members understand how to identify a cooking range, cooktop, or oven that does not ignite or produce heat. Management practices would be expected to assure prompt creation and prioritization of a work order to remedy this deficiency because it may result in usability barriers.</p>
<b>Deficiency 2 – Cooking Appliance: Unit</b>	
<b>Deficiency</b>	Cooking range, cooktop, or oven component is damaged or missing such that the device is unsafe for use.
<b>Deficiency Criteria</b>	<p>Cooking range, cooktop, or oven component is damaged (i.e., visibly defective) such that the device is unsafe for use.</p> <p>OR</p> <p>Cooking range, cooktop, or oven component is missing (i.e., evidence of prior installation, but now not present or is incomplete) such that the device is unsafe for use.</p>
<b>Health and Safety Determination</b>	Moderate
<b>Correction Timeframe</b>	30 days
<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If a cooking range, cooktop, or oven component is damaged or missing such that the device is unsafe for use, then the resident may be at an increased risk of injury.</p> <p>If a cooking range, cooktop, or oven component is damaged or missing such that the device is unsafe for use, then the resident may not be able to fully</p>

use an appliance that is expected to be provided and maintained as part of the rent.

A resident is likely to notice if a cooking range, cooktop, or oven component is damaged or missing such that the device is unsafe for use and to recognize it is important enough to report it to property management because it may present safety hazards or usability barriers. Property management should be expected to prioritize a work order to remedy this deficiency because it may result in safety hazards or usability barriers.

### **Deficiency 2 – Cooking Appliance: Inside**

<b>Deficiency</b>	Cooking range, cooktop, or oven component is damaged or missing such that the device is unsafe for use.
<b>Deficiency Criteria</b>	Cooking range, cooktop, or oven component is damaged (i.e., visibly defective) such that the device is unsafe for use.  OR  Cooking range, cooktop, or oven component is missing (i.e., evidence of prior installation, but now not present or is incomplete) such that the device is unsafe for use.
<b>Health and Safety Determination</b>	Moderate
<b>Correction Timeframe</b>	30 days
<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If a cooking range, cooktop, or oven component is damaged or missing such that the device is unsafe for use, then the resident may be at an increased risk of injury.</p> <p>If a cooking range, cooktop, or oven component is damaged or missing such that the device is unsafe for use, then the resident may not be able to fully use an appliance that is expected to be provided and maintained as part of the rent.</p> <p>Property management would be expected to ensure that staff members understand how to identify a cooking range, cooktop, or oven component that is damaged or missing such that the device is unsafe for use. Management practices would be expected to assure prompt creation and prioritization of a work order to remedy this deficiency because it may result in safety hazards or usability barriers.</p>

### **Deficiency 3 – Cooking Appliance: Unit**

**Affirmative Habitability Requirement: Yes**

<b>Deficiency</b>	Primary cooking appliance is missing.
<b>Deficiency Criteria</b>	Primary cooking appliance is missing (i.e., evidence of prior installation, but now not present or is incomplete).
<b>Health and Safety Determination</b>	Moderate
<b>Correction Timeframe</b>	30 days
<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If the primary cooking appliance is missing, then the resident may be unable to safely prepare food and may be exposed to foodborne germs that increase the risk of foodborne illness.</p> <p>If the primary cooking appliance is missing, then the resident cannot use an appliance that is expected to be provided and maintained as part of the rent.</p> <p>A resident is likely to notice if the primary cooking appliance and to recognize it is important enough to report it to property management because it may present health hazards or usability barriers. Property management should be expected to prioritize a work order to remedy this deficiency because it may result in health hazards or usability barriers.</p>

#### **Deficiency 4 – Cooking Appliance: Unit**

<b>Deficiency</b>	A microwave is the primary cooking appliance and it is damaged.
<b>Deficiency Criteria</b>	A microwave is the primary cooking appliance and it is damaged (i.e., visibly defective; impacts functionality).
<b>Health and Safety Determination</b>	Severe
<b>Correction Timeframe</b>	24 hours
<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	If a microwave is the primary cooking device and it is damaged, then the resident may be unable to safely prepare food and may be exposed to foodborne germs that increase the risk of foodborne illness.

If a microwave is the primary cooking device and it is damaged, then the resident may not be able to fully use an appliance that is expected to be provided and maintained as part of the rent.

A resident is likely to notice if a microwave is the primary cooking device and it is damaged and to recognize it is important enough to report it to property management because it may present health hazards or usability barriers. Property management should be expected to prioritize a work order to remedy this deficiency because it may result in health hazards or usability barriers.

#### **Deficiency 5 – Cooking Appliance: Unit**

<b>Deficiency</b>	A burner does not produce heat, but at least 1 other burner is present on the cooking range or cooktop and does produce heat.
<b>Deficiency Criteria</b>	A burner does not produce heat, but at least 1 other burner is present on the cooking range or cooktop and does produce heat.
<b>Health and Safety Determination</b>	Moderate
<b>Correction Timeframe</b>	30 days
<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If a burner does not produce heat, but at least 1 other burner is present on the cooking range or cooktop and does produce heat, then there may be an increased safety risk to the resident.</p> <p>If a burner does not produce heat, but at least 1 other burner is present on the cooking range or cooktop and does produce heat, then the resident may not be able to fully use an appliance that is expected to be provided and maintained as part of the rent.</p> <p>A resident is likely to notice if a burner does not produce heat, but at least 1 other burner is present on the cooking range or cooktop and does produce heat and recognize it is important enough to report it to property management because it may present safety hazards or usability barriers. Property management should be expected to prioritize a work order to remedy this deficiency because it may result in safety hazards or usability barriers.</p>

#### **Deficiency 5 – Cooking Appliance: Inside**

<b>Deficiency</b>	A burner does not produce heat, but at least 1 other burner is present on the cooking range or cooktop and does produce heat.
<b>Deficiency Criteria</b>	A burner does not produce heat, but at least 1 other burner is present on the cooking range or cooktop and does produce heat.

<b>Health and Safety Determination</b>	Moderate
<b>Correction Timeframe</b>	30 days
<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If a burner does not produce heat, but at least 1 other burner is present on the cooking range or cooktop and does produce heat, then there may be an increased safety risk to the resident.</p> <p>If a burner does not produce heat, but at least 1 other burner is present on the cooking range or cooktop and does produce heat, then the resident may not be able to fully use an appliance that is expected to be provided and maintained as part of the rent.</p> <p>Property management would be expected to ensure that staff members understand how to identify if a burner does not produce heat, but at least 1 other burner is present on the cooking range or cooktop and does produce heat. Management practices would be expected to assure prompt creation and prioritization of a work order to remedy this deficiency because it may result in safety hazards or usability barriers.</p>

**TABLE 10—DOOR – ENTRY STANDARD**

<b>Definition and Location</b>	
<b>Definition</b>	<p>A door that provides a means of access to the Unit from the Inside or Outside.</p> <p>OR</p> <p>A door that provides a means of access to the Inside from the Outside.</p>
<b>Location</b>	<p>Unit: Entrance to the Unit from the Outside or Inside</p> <p>Inside: Entrance to the Inside from the Outside</p>
<b>Deficiency 1 – Door – Entry: Unit</b>	
<b>Deficiency</b>	Entry door will not open.
<b>Deficiency Criteria</b>	Entry door will not open.
<b>Health and Safety Determination</b>	Moderate
<b>Correction Timeframe</b>	30 days

<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If the entry door will not open, then the resident’s ability to leave or grant access to the unit may be limited, which may result in an increased safety risk in the event of an emergency.</p> <p>If the entry door will not open, then the resident’s ability to grant access to the unit may be limited.</p> <p>If the entry door will not open, then the resident’s ability to leave or grant access to the unit may be limited.</p> <p>A resident is likely to notice if the entry door will not open and to recognize it is important enough to report it to property management because it may present safety hazards or usability barriers. Property management should be expected to prioritize a work order to remedy this deficiency because it may result in safety hazards.</p>
<b>Deficiency 1 – Door – Entry: Inside</b>	
<b>Deficiency</b>	Entry door will not open.
<b>Deficiency Criteria</b>	Entry door will not open.
<b>Health and Safety Determination</b>	Moderate
<b>Correction Timeframe</b>	30 days
<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If the entry door will not open, then the resident's ability to leave or grant access to the building may be limited, which may result in an increased safety risk in the event of an emergency.</p> <p>If the entry door will not open, then the resident's ability to grant access to the building may be limited.</p> <p>If the entry door will not open, then the resident's ability to leave or grant access to the building may be limited.</p> <p>Property management would be expected to ensure that staff members understand how to identify an entry door that will not open. Management practices would be expected to assure prompt creation and prioritization of</p>

a work order to remedy this deficiency because it may result in safety hazards or usability barriers.

#### **Deficiency 2 – Door – Entry: Unit**

<b>Deficiency</b>	Entry door will not close.
<b>Deficiency Criteria</b>	Entry door does not close (i.e., door seats in frame).
<b>Health and Safety Determination</b>	Severe
<b>Correction Timeframe</b>	24 hours
<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If the entry door will not close, and there is inclement weather, then the resident may be at an increased risk of environmental exposure, which may result in illness.</p> <p>If the entry door will not close, then the resident’s ability to manage access to the unit may be limited.</p> <p>If the entry door will not close, then the resident may be unable to reasonably ensure privacy within the unit.</p> <p>If the entry door will not close, then the resident’s ability to manage access to the unit may be limited.</p> <p>A resident is likely to notice if the entry door will not close and to recognize it is important enough to report it to property management because it may present health or safety hazards, or privacy or usability barriers. Property management should be expected to prioritize a work order to remedy this deficiency because it may result in health or safety hazards or privacy or usability barriers.</p>

#### **Deficiency 2 – Door – Entry: Inside**

<b>Deficiency</b>	Entry door will not close.
<b>Deficiency Criteria</b>	Entry door does not close (i.e., door seats in frame).
<b>Health and Safety Determination</b>	Moderate
<b>Correction Timeframe</b>	30 days
<b>HCV Correction Timeframe</b>	30 days

<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If the entry door will not close, then the resident's ability to manage access to the building may be limited.</p> <p>If the entry door will not close, then the resident or POA's ability to manage access to the building may be limited.</p> <p>Property management would be expected to ensure that staff members understand how to identify an entry door that will not close. Management practices would be expected to assure prompt creation and prioritization of a work order to remedy this deficiency because it may result in security hazards or usability barriers.</p>
<b>Deficiency 3 – Door – Entry: Unit</b>	
<b>Deficiency</b>	Entry door self-closing mechanism is damaged, inoperable, or missing.
<b>Deficiency Criteria</b>	<p>The self-closing mechanism is damaged (i.e., visibly defective; impacts functionality).</p> <p>OR</p> <p>The self-closing mechanism does not pull the door closed and engage the latch.</p> <p>OR</p> <p>The self-closing mechanism is missing (i.e., evidence of prior installation, but now not present or is incomplete).</p>
<b>Health and Safety Determination</b>	Moderate
<b>Correction Timeframe</b>	30 days
<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If the entry door self-closer will not pull the door closed and latch, and there is an environmental threat, then the resident cannot reasonably assume measures are in place to mitigate exposure.</p> <p>If the entry door self-closer will not pull the door closed and latch, then the resident is unable to fully use the door, which is expected to be part of their rent.</p>
<b>Deficiency 3 – Door – Entry: Inside</b>	
<b>Deficiency</b>	Entry door self-closing mechanism is damaged, inoperable, or missing.

<b>Deficiency Criteria</b>	<p>The self-closing mechanism is damaged (i.e., visibly defective; impacts functionality).</p> <p>OR</p> <p>The self-closing mechanism does not pull the door closed and engage the latch.</p> <p>OR</p> <p>The self-closing mechanism is missing (i.e., evidence of prior installation, but now not present or is incomplete).</p>
<b>Health and Safety Determination</b>	Moderate
<b>Correction Timeframe</b>	30 days
<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If the entry door self-closer will not pull the door closed and latch, and there is an environmental threat, then the resident cannot reasonably assume measures are in place to mitigate exposure.</p> <p>If the entry door self-closer will not pull the door closed and latch, then the resident is unable to fully use the door, which is expected to be part of their rent.</p>
<b>Deficiency 4 – Door – Entry: Unit</b>	
<b>Deficiency</b>	Entry door cannot be secured.
<b>Deficiency Criteria</b>	Entry door cannot be secured (i.e., access controlled) by at least 1 installed lock.
<b>Health and Safety Determination</b>	Severe
<b>Correction Timeframe</b>	24 hours
<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail

<b>Rationale</b>	<p>If the entry door cannot be secured by at least 1 installed lock, then the resident's ability to control access to the unit may be limited.</p> <p>If the entry door cannot be secured by at least 1 installed lock, then the resident may be unable to reasonably ensure privacy within the unit.</p> <p>If the entry door cannot be secured by at least 1 installed lock, then the resident's ability to control access to the unit may be limited.</p> <p>A resident is likely to notice if the entry door cannot be secured by at least 1 installed lock within the unit and to recognize it is important enough to report it to property management because it may limit their security or privacy. Property management should be expected to prioritize a work order to remedy this deficiency because it may limit the resident's security or privacy.</p>
<b>Deficiency 4 – Door – Entry: Inside</b>	
<b>Deficiency</b>	Entry door cannot be secured.
<b>Deficiency Criteria</b>	Entry door cannot be secured (i.e., access controlled) by at least 1 installed lock.
<b>Health and Safety Determination</b>	Moderate
<b>Correction Timeframe</b>	30 days
<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If the entry door cannot be secured by at least 1 installed lock, then the ability to control access to the property may be limited.</p> <p>If the entry door cannot be secured by at least 1 installed lock, then the ability to control access to the property may be limited.</p> <p>Property management would be expected to ensure that staff members understand how to identify an entry door cannot be secured by at least 1 installed lock. Management practices would be expected to assure prompt creation and prioritization of a work order to remedy this deficiency because it may result in security hazards.</p>
<b>Deficiency 5 – Door – Entry: Unit</b>	
<b>Deficiency</b>	Hole, split, or crack that penetrates completely through entry door.
<b>Deficiency Criteria</b>	<p>A hole <math>\frac{1}{4}</math> inch or greater in diameter that penetrates all the way through the door.</p> <p>OR</p>

	<p>A split or crack <math>\frac{1}{4}</math> inch or greater in width that penetrates all the way through the door.</p> <p>OR</p> <p>A hole or a crack with separation is present, or the glass is missing within the door, side lites, or transom.</p>
<b>Health and Safety Determination</b>	Moderate
<b>Correction Timeframe</b>	30 days
<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If the entry door has a hole that penetrates all the way through the door, and there is inclement weather, then resident is in danger of excess cold and heat, dampness, and mold growth, and spread of smoke, fire, or poisonous gas, which will affect the resident's physical health.</p> <p>If the entry door has a hole that penetrates all the way through the door, then the resident may be in danger of intruders gaining access to the interior space.</p> <p>If the entry door has a hole that penetrates all the way the door, then the resident cannot secure their privacy within the interior space.</p> <p>If the entry door has a hole that penetrates all the way through the door, then the resident is unable to fully use a feature of home that is expected to be part of their rent.</p> <p>If the entry door has a hole that penetrates all the way through the door, and the resident is responsible for utilities, then the resident may experience an increase in utility costs.</p> <p>If the entry door has a hole that penetrates all the way through the door, then it is likely complaint-based work orders are not being addressed.</p> <p>If the entry door has a hole that penetrates all the way through the door, then it is likely routine work orders are not being addressed.</p>
<b>Deficiency 5 – Door – Entry: Inside</b>	
<b>Deficiency</b>	Hole, split, or crack that penetrates completely through entry door.
<b>Deficiency Criteria</b>	<p>A hole <math>\frac{1}{4}</math> inch or greater in diameter that penetrates all the way through the door.</p> <p>OR</p>

	<p>A split or crack <math>\frac{1}{4}</math> inch or greater in width that penetrates all the way through the door.</p> <p>OR</p> <p>A hole or a crack with separation is present, or the glass is missing within the door, side lites, or transom.</p>
<b>Health and Safety Determination</b>	Moderate
<b>Correction Timeframe</b>	30 days
<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If the entry door has a hole that penetrates all the way through the door, and there is inclement weather, then the resident is in danger of excess cold and heat, dampness, and mold growth, and spread of smoke, fire, or poisonous gas, which will affect the resident's physical health.</p> <p>If the entry door has a hole that penetrates all the way through the door, then the resident may be in danger of intruders gaining access to the interior space.</p> <p>If the entry door has a hole that penetrates all the way the door, then the resident cannot secure their privacy within the interior space.</p> <p>If the entry door has a hole that penetrates all the way through, then the resident is unable to fully use a feature that is expected to be part of their rent.</p> <p>If the entry door has a hole that penetrates all the way through the door, then it is likely complaint-based work orders are not being addressed.</p> <p>If the entry door has a hole that penetrates all the way through the door, then it is likely routine work orders are not being addressed.</p>

#### **Deficiency 6 – Door – Entry: Unit**

<b>Deficiency</b>	Entry door is missing.
<b>Deficiency Criteria</b>	The entry door is missing (i.e., evidence of prior installation, but now not present or is incomplete).
<b>Health and Safety Determination</b>	Life-Threatening
<b>Correction Timeframe</b>	24 hours

<b>HCV Correction Timeframe</b>	24 hours
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If the entry door is missing, then there may be an increased safety risk for the resident in the event of a fire or an emergency.</p> <p>If the entry door is missing, and there is inclement weather or an emergency, then the resident's physical health may be in jeopardy.</p> <p>If the entry door is missing, then the resident cannot reasonably secure the property from intruders.</p> <p>If the entry door is missing, then the resident cannot secure their privacy within the interior space.</p> <p>If the entry door is missing, then the resident is unable to fully use a feature which is expected to be part of their rent.</p> <p>If the entry door is missing and the resident is responsibility for utilities, then the resident may experience an increase in utility costs due to inability to protect from the outside environment.</p> <p>If the entry door is missing, then it is likely complaint-based work orders are not being addressed.</p> <p>If the entry door is missing, then it is likely routine work orders are not being addressed.</p> <p>If the entry door is missing, property visitors will observe the deficiency, which will impact their perception of the property.</p>

#### **Deficiency 6 – Door – Entry: Inside**

<b>Deficiency</b>	Entry door is missing
<b>Deficiency Criteria</b>	The entry door is missing (i.e., evidence of prior installation, but now not present or is incomplete).
<b>Health and Safety Determination</b>	Severe
<b>Correction Timeframe</b>	24 hours
<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail

<b>Rationale</b>	<p>If the entry door is missing, and there is inclement weather or an emergency, then the resident's physical health may be in jeopardy.</p> <p>If the entry door is missing, then the resident cannot reasonably secure the property from intruders.</p> <p>If the entry door is missing, then the resident cannot secure their privacy within the interior space.</p> <p>If the entry door is missing, then the resident is unable to fully use a feature, which is expected to be part of their rent.</p> <p>If the entry door is missing, then it is likely complaint-based work orders are not being addressed.</p> <p>If the entry door is missing, then it is likely routine work orders are not being addressed.</p> <p>If the entry door is missing, property visitors will observe the deficiency, which will impact their perception of the property.</p>
<b>Deficiency 7 – Door – Entry: Unit</b>	
<b>Deficiency</b>	Entry door surface is delaminated or separated.
<b>Deficiency Criteria</b>	<p>There is delamination or separation of the door surface 2 inches wide or greater.</p> <p>OR</p> <p>There is delamination or separation that affects the integrity of the door (i.e., surface protection or the strength of the door).</p>
<b>Health and Safety Determination</b>	Moderate
<b>Correction Timeframe</b>	30 days
<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If an entry door surface is pulling away from the door inner core, then pests (e.g., wasps) may be able to nest in the open space, which could affect the resident's physical health.</p> <p>If there is delamination or separation of the entry door, and it impacts the door's integrity, then intruders may be able to easily access the unit.</p>

If an entry door surface is pulling away from the door's inner core, then infestation (e.g., wasps) may occur in the open space. The resident will likely call this in; may indicate work orders are not being addressed.

If the entry door is delaminated or separating, then the public or visitors may see this deficiency, potentially resulting in decreased property reputation.

#### **Deficiency 7 – Door – Entry: Inside**

<b>Deficiency</b>	Entry door surface is delaminated or separated.
<b>Deficiency Criteria</b>	There is delamination or separation of the door surface 2 inches wide or greater.  OR  There is delamination or separation that affects the integrity of the door (i.e., surface protection or the strength of the door).
<b>Health and Safety Determination</b>	Moderate
<b>Correction Timeframe</b>	30 days
<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If an entry door surface is pulling away from the door inner core, then pests (e.g., wasps) may be able to nest in the open space, which could affect the resident's physical health.</p> <p>If there is delamination or separation of the entry door, and it impacts the door's integrity, then intruders may be able to easily access the unit.</p> <p>If an entry door surface is pulling away from the door's inner core, then infestation (e.g., wasps) may occur in the open space. The resident will likely call this in; may indicate work orders are not being addressed.</p> <p>If the entry door is delaminated or separating, then the public or visitors may see this defect, potentially resulting in decreased property reputation.</p>

#### **Deficiency 8 – Door – Entry: Unit**

<b>Deficiency</b>	Entry door frame, threshold, or trim is damaged or missing.
<b>Deficiency Criteria</b>	The entry door frame, threshold, or trim is damaged (i.e., visibly defective; impacts functionality).  OR

	The entry door frame, threshold, or trim is missing (i.e., evidence of prior installation, but now not present or is incomplete).
<b>Health and Safety Determination</b>	Moderate
<b>Correction Timeframe</b>	30 days
<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If the entry door frame, threshold, or trim is damaged, and there is inclement weather or an emergency, then the resident's physical health may be in jeopardy.</p> <p>If the entry door frame, threshold, or trim is damaged or missing, then the resident cannot reasonably secure the property from intruders.</p> <p>If the entry door frame, threshold, or trim is damaged or missing, then the resident cannot secure their privacy within the interior space.</p> <p>If the entry door frame, threshold, or trim is damaged or missing, then the resident is unable to fully use a feature, which is expected to be part of their rent.</p> <p>If the entry door frame, threshold, or trim is damaged or missing, and the resident is responsibility for utilities, then the resident may experience an increase in utility costs due to inability to protect from the outside environment.</p> <p>If the entry door frame, threshold, or trim is damaged or missing, then it is likely complaint-based work orders are not being addressed.</p> <p>If the entry door frame, threshold, or trim is damaged or missing, then it is likely routine work orders are not being addressed.</p>

#### **Deficiency 8 – Door – Entry: Inside**

<b>Deficiency</b>	Entry door frame, threshold, or trim is damaged or missing.
<b>Deficiency Criteria</b>	<p>The entry door frame, threshold, or trim is damaged (i.e., visibly defective; impacts functionality).</p> <p>OR</p> <p>The entry door frame, threshold, or trim is missing (i.e., evidence of prior installation, but now not present or is incomplete).</p>
<b>Health and Safety Determination</b>	Moderate

<b>Correction Timeframe</b>	30 days
<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If the entry door frame, threshold, or trim is damaged, and there is inclement weather or an emergency, then the resident's physical health may be in jeopardy.</p> <p>If the entry door frame, threshold, or trim is damaged or missing, then the resident cannot reasonably secure the property from intruders.</p> <p>If the entry door frame, threshold, or trim is damaged or missing, then the resident cannot secure their privacy within the interior space.</p> <p>If the entry door frame, threshold, or trim is damaged or missing, then the resident is unable to fully use a feature, which is expected to be part of their rent.</p> <p>If the entry door frame, threshold, or trim is damaged or missing, then it is likely complaint-based work orders are not being addressed.</p> <p>If the entry door frame, threshold, or trim is damaged or missing, then it is likely routine work orders are not being addressed.</p>

#### **Deficiency 9 – Door – Entry: Unit**

<b>Deficiency</b>	Entry door seal, gasket, or stripping is damaged, inoperable, or missing.
<b>Deficiency Criteria</b>	<p>The entry door seal, gasket, or stripping is:</p> <ul style="list-style-type: none"> <li>- damaged (i.e., visibly defective; impacts functionality);</li> <li>- inoperable (i.e., overall system or component thereof is not meeting function/purpose, with or without visible damage); or</li> <li>- missing (i.e., evidence of prior installation, but now not present or is incomplete).</li> </ul> <p>AND ONE OF THE FOLLOWING CONDITIONS:</p> <p>Condition 1:</p> <ul style="list-style-type: none"> <li>- <u>General door type</u>: Results in a gap of ¼ inch wide or greater between the door slab and the stop molding on the jamb or the jamb itself, or between the bottom of the door and the threshold or floor AND permits light around the closed door.</li> <li>- <u>Special door type</u>: Results in a gap of ¼ inch wide or greater around or under the door or where the doors meet AND permits light around the closed door or where the doors meet.</li> </ul>

---

 Condition 2:

- General door type: There is evidence of water penetrating (e.g., water damage or dry rot) around or under the door.
- Special door type: There is evidence of water penetrating (e.g., water damage or dry rot) around or under the door or where the doors meet.

<b>Health and Safety Determination</b>	Moderate
<b>Correction Timeframe</b>	30 days
<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If the entry door seal, gasket, or stripping is damaged, inoperable, or missing and there is inclement weather or an emergency (e.g., smoke or fire spread), then the resident's physical health may be in jeopardy.</p> <p>If the entry door seal, gasket, or stripping is damaged, inoperable, or missing and the resident is responsible for utilities, then the resident may experience an increase in utility costs due to inability to protect from the outside environment.</p>

**Deficiency 9 – Door – Entry: Inside**

<b>Deficiency</b>	Entry door seal, gasket, or stripping is damaged, inoperable, or missing.
<b>Deficiency Criteria</b>	<p>The entry door seal, gasket, or stripping is:</p> <ul style="list-style-type: none"> <li>- damaged (i.e., visibly defective; impacts functionality);</li> <li>- inoperable (i.e., overall system or component thereof is not meeting function/purpose; with or without visible damage); or</li> <li>- missing (i.e., evidence of prior installation, but now not present or is incomplete).</li> </ul>

## AND ONE OF THE FOLLOWING CONDITIONS:

## Condition 1:

- General door type: Results in a gap of ¼ inch wide or greater between the door slab and the stop molding on the jamb or the jamb itself, or between the bottom of the door and the threshold or floor AND permits light around the closed door.
-

- Special door type: Results in a gap of ¼ inch wide or greater around or under the door or where the doors meet AND permits light around the closed door or where the doors meet.

Condition 2:

- General door type: There is evidence of water penetrating (e.g., water damage or dry rot) around or under the door.
- Special door type: There is evidence of water penetrating (e.g., water damage or dry rot) around or under the door or where the doors meet.

<b>Health and Safety Determination</b>	Moderate
<b>Correction Timeframe</b>	30 days
<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	If the entry door seal, gasket, or stripping is damaged, inoperable, or missing and there is inclement weather or an emergency (e.g., smoke or fire spread), then the resident's physical health may be in jeopardy.
<b>Deficiency 10 – Door – Entry: Unit</b>	
<b>Deficiency</b>	Entry door component is damaged, inoperable, or missing and it does not limit the door's ability to provide privacy or protection from weather or infestation.
<b>Deficiency Criteria</b>	<p>Entry door component is damaged (i.e., visibly defective) and it does not limit the door's ability to provide privacy or protection from weather or infestation.</p> <p>OR</p> <p>Entry door component is inoperable (i.e., component not meeting function or purpose; with or without visible damage) and it does not limit the door's ability to provide privacy or protection from weather or infestation.</p> <p>OR</p> <p>Entry door component is missing (i.e., evidence of prior installation, but it is now not present or is incomplete) and it does not limit the door's ability to provide privacy or protection from weather or infestation.</p>
<b>Health and Safety Determination</b>	Low
<b>Correction Timeframe</b>	60 Days

<b>HCV Correction Timeframe</b>	N/A
<b>HCV Pass/Fail</b>	Pass
<b>Rationale</b>	If the door's ability to provide privacy or protection from weather or infestation is not limited, but an entry door component is damaged, inoperable, or missing, then the resident may notice this within the unit and may recognize it is important enough to report it to property management. Property management may be expected to prioritize a work order to remedy this deficiency because it may lead to usability barriers.
<b>Deficiency 10 – Door – Entry: Inside</b>	
<b>Deficiency</b>	Entry door component is damaged, inoperable, or missing and it does not limit the door's ability to provide privacy or protection from weather or infestation.
<b>Deficiency Criteria</b>	<p>Entry door component is damaged (i.e., visibly defective) and it does not limit the door's ability to provide privacy or protection from weather or infestation.</p> <p>OR</p> <p>Entry door component is inoperable (i.e., component not meeting function or purpose; with or without visible damage) and it does not limit the door's ability to provide privacy or protection from weather or infestation.</p> <p>OR</p> <p>Entry door component is missing (i.e., evidence of prior installation, but it is now not present or is incomplete) and it does not limit the door's ability to provide privacy or protection from weather or infestation.</p>
<b>Health and Safety Determination</b>	Low
<b>Correction Timeframe</b>	60 Days
<b>HCV Correction Timeframe</b>	N/A
<b>HCV Pass/Fail</b>	Pass
<b>Rationale</b>	If the door's ability to provide privacy or protection from weather or infestation is not limited, but an entry door component is damaged, inoperable, or missing, then property management would be expected to ensure that staff members understand how to identify this deficiency. Management practices may be expected to assure prompt creation and prioritization of a work order to remedy this deficiency, because it may lead to usability barriers.

**TABLE 11—DOOR – FIRE LABELED STANDARD**

<b>Definition and Location</b>	
<b>Definition</b>	A door with a fire-resistant rating (i.e., the time within which materials or assemblies have withstood fire exposure).
<b>Location</b>	Unit: All fire labeled doors throughout the Unit.  Inside: All fire labeled doors throughout the Inside.
<b>Deficiency 1 – Door – Fire Labeled: Unit</b>	
<b>Deficiency</b>	Fire labeled door does not open.
<b>Deficiency Criteria</b>	Fire labeled door does not open such that it may limit access between spaces.
<b>Health and Safety Determination</b>	Severe
<b>Correction Timeframe</b>	24 hours
<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If a fire labeled door does not open such that it may limit access between spaces, then there may be an increased safety risk for the resident in the event of an emergency.</p> <p>If a fire labeled door does not open, then the resident’s ability to move freely between spaces may be limited.</p> <p>A resident is likely to notice if a fire labeled door does not open such that it may limit access between spaces and to recognize it is important enough to report it to property management because it may present safety hazards or usability barriers. Property management should be expected to prioritize a work order to remedy this deficiency because it may result in safety hazards.</p>
<b>Deficiency 1 – Door – Fire Labeled: Inside</b>	
<b>Deficiency</b>	Fire labeled door does not open.
<b>Deficiency Criteria</b>	Fire labeled door does not open such that it may limit access between spaces.
<b>Health and Safety Determination</b>	Severe

<b>Correction Timeframe</b>	24 hours
<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If a fire labeled door does not open such that it may limit access between spaces, then there may be an increased safety risk for the resident in the event of an emergency.</p> <p>If a fire labeled door does not open, then the resident’s ability to move freely between spaces may be limited.</p> <p>Property management would be expected to ensure that staff members understand how to identify a fire labeled door that does not open such that it may limit access between spaces. Management practices would be expected to assure prompt creation and prioritization of a work order to remedy this deficiency, because it may result in safety hazards or usability barriers.</p>
<b>Deficiency 2 – Door – Fire Labeled: Unit</b>	
<b>Deficiency</b>	Fire labeled door does not close and latch or the self-closing hardware is damaged or missing such that the door does not self-close and latch.
<b>Deficiency Criteria</b>	<p>Fire labeled door does not close (i.e., door seats in frame) and latch.</p> <p>OR</p> <p>Fire labeled door self-closing hardware is damaged (i.e., visibly defective; impacts functionality) or missing (i.e., evidence of prior installation, but is now not present or is incomplete) such that the door does not self-close (i.e., door seats in frame) and latch.</p>
<b>Health and Safety Determination</b>	Severe
<b>Correction Timeframe</b>	24 hours
<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If a fire labeled door does not close and latch or the fire labeled door self-closing hardware is damaged or missing such that the door does not self-close and latch, and there is a fire, then the door may not limit the spread of fire or smoke, which may result in an increased safety risk to the resident.</p> <p>If a fire labeled door does not close and latch or the fire labeled door self-closing hardware is damaged or missing such that the door does not self-</p>

close and latch, and there is a fire, then the resident may not be protected by this feature that is expected to be provided and maintained as part of their rent.

A resident is likely to notice if a fire labeled door does not close and latch or the fire labeled door self-closing hardware is damaged or missing such that the door does not self-close and latch and to recognize it is important enough to report it to property management because it may present safety hazards or usability barriers. Property management should be expected to prioritize a work order to remedy this defect because it may result in safety hazards or usability barriers.

### **Deficiency 2 – Door – Fire Labeled: Inside**

<b>Deficiency</b>	Fire labeled door does not close and latch or the self-closing hardware is damaged or missing such that the door does not self-close and latch.
<b>Deficiency Criteria</b>	<p>Fire labeled door does not close (i.e., door seats in frame) and latch.</p> <p>OR</p> <p>Fire labeled door self-closing hardware is damaged (i.e., visibly defective; impacts functionality) or missing (i.e., evidence of prior installation, but is now not present or is incomplete) such that the door does not self-close (i.e., door seats in frame) and latch.</p>
<b>Health and Safety Determination</b>	Severe
<b>Correction Timeframe</b>	24 hours
<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If a fire labeled door does not close and latch or the fire labeled door self-closing hardware is damaged or missing such that the door does not self-close and latch, and there is a fire, then the door may not limit the spread of fire or smoke, which may result in an increased safety risk to the resident.</p> <p>If a fire labeled door does not close and latch or the fire labeled door self-closing hardware is damaged or missing such that the door does not self-close and latch, and there is a fire, then the resident may not be protected by this feature that is expected to be provided and maintained as part of their rent.</p> <p>Property management would be expected to ensure that staff understand how to identify a fire labeled door that does not close and latch or if the fire labeled door self-closing hardware is damaged or missing such that the door</p>

does not self-close and latch. Management practices would be expected to assure prompt creation and prioritization of a work order to remedy this defect, because it may result in safety hazards or usability barriers.

### Deficiency 3 – Door – Fire Labeled: Unit

<b>Deficiency</b>	Fire labeled door assembly has a hole of any size or is damaged such that its integrity may be compromised.
<b>Deficiency Criteria</b>	A fire labeled door assembly has a hole of any size.  OR  A fire labeled door assembly is damaged (i.e., visibly defective; impacts functionality) such that its integrity may be compromised.
<b>Health and Safety Determination</b>	Severe
<b>Correction Timeframe</b>	24 hours
<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If a fire labeled door assembly has a hole of any size or is damaged such that its integrity may be compromised, and there is a fire, then the door may not limit the spread of fire or smoke, which may result in an increased safety risk to the resident.</p> <p>A resident is likely to notice if a fire labeled door assembly has a hole of any size or is damaged such that its integrity may be compromised and to recognize it is important enough to report it to property management because it may present safety hazards. Property management should be expected to prioritize a work order to remedy this deficiency because it may result in safety hazards.</p>

### Deficiency 3 – Door – Fire Labeled: Inside

<b>Deficiency</b>	Fire labeled door assembly has a hole of any size or is damaged such that its integrity may be compromised.
<b>Deficiency Criteria</b>	A fire labeled door assembly has a hole of any size.  OR  A fire labeled door assembly is damaged (i.e., visibly defective; impacts functionality) such that its integrity may be compromised.  OR  25% of the door surface has rust that affects the integrity of the door.

	OR There is broken or missing glass.
<b>Health and Safety Determination</b>	Severe
<b>Correction Timeframe</b>	24 hours
<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If a fire labeled door assembly has a hole of any size or is damaged such that its integrity may be compromised, and there is a fire, then the door may not limit the spread of fire or smoke, which may result in an increased safety risk to the resident.</p> <p>Property management would be expected to ensure that staff members understand how to identify a fire labeled door assembly that has a hole of any size or is damaged such that its integrity may be compromised. Management practices would be expected to assure prompt creation and prioritization of a work order to remedy this deficiency, because it may result in safety hazards.</p>

#### **Deficiency 4 – Door – Fire Labeled: Unit**

<b>Deficiency</b>	Fire labeled door seal or gasket is damaged or missing.
<b>Deficiency Criteria</b>	<p>A fire labeled door seal or gasket is damaged (i.e., visibly defective; impacts functionality).</p> <p>OR</p> <p>A fire labeled door seal or gasket is missing (i.e., evidence of prior installation, but now not present or is incomplete).</p>
<b>Health and Safety Determination</b>	Severe
<b>Correction Timeframe</b>	24 hours
<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	If a fire labeled door seal or gasket is damaged or missing, and there is a fire, then the door may not limit the spread of fire or smoke, which may result in an increased safety risk to the resident.

A resident is likely to notice if a fire labeled door seal or gasket is damaged or missing and to recognize it is important enough to report it to property management because it may present safety hazards. Property management should be expected to prioritize a work order to remedy this deficiency because it may result in safety hazards.

#### **Deficiency 4 – Door – Fire Labeled: Inside**

<b>Deficiency</b>	Fire labeled door seal or gasket is damaged or missing.
<b>Deficiency Criteria</b>	A fire labeled door seal or gasket is damaged (i.e., visibly defective; impacts functionality).  OR  A fire labeled door seal or gasket is missing (i.e., evidence of prior installation, but now not present or is incomplete).
<b>Health and Safety Determination</b>	Severe
<b>Correction Timeframe</b>	24 hours
<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	If a fire labeled door seal or gasket is damaged or missing, and there is a fire, then the door may not limit the spread of fire or smoke, which may result in an increased safety risk to the resident.  Property management would be expected to ensure that staff members understand how to identify a fire labeled door seal or gasket that is damaged or missing. Management practices would be expected to assure prompt creation and prioritization of a work order to remedy this deficiency, because it may result in safety hazards.

#### **Deficiency 5 – Door – Fire Labeled: Unit**

<b>Deficiency</b>	An object is present that may prevent the fire labeled door from closing and latching or self-closing and latching.
<b>Deficiency Criteria</b>	An object is present that may prevent the fire labeled door from closing (i.e., door seats in frame) and latching.  OR  An object is present that may prevent the fire labeled door from self-closing (i.e., door seats in frame) and latching.
<b>Health and Safety Determination</b>	Severe

<b>Correction Timeframe</b>	24 hours
<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If an object is present that may prevent the fire labeled door from closing and latching or self-closing and latching, and there is a fire, then the door may not limit the spread of fire or smoke, which may result in an increased safety risk to the resident.</p> <p>If an object is present that may prevent the fire labeled door from closing and latching or self-closing and latching, then the resident may not be able to fully use a feature of that is expected to be provided and maintained as part of their rent.</p> <p>A resident is likely to notice if an object is present that may prevent the fire labeled door from closing and latching or self-closing and latching and to recognize it is important enough to report it to property management because it may present safety hazards or usability barriers. Property management should be expected to prioritize a work order to remedy this defect because it may result in safety hazards or usability barriers.</p>
<b>Deficiency 5 – Door – Fire Labeled: Inside</b>	
<b>Deficiency</b>	An object is present that may prevent the fire labeled door from closing and latching or self-closing and latching.
<b>Deficiency Criteria</b>	<p>An object is present that may prevent the fire labeled door from closing (i.e., door seats in frame) and latching.</p> <p>OR</p> <p>An object is present that may prevent the fire labeled door from self-closing (i.e., door seats in frame) and latching.</p>
<b>Health and Safety Determination</b>	Severe
<b>Correction Timeframe</b>	24 hours
<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	If an object is present that may prevent the fire labeled door from closing and latching or self-closing and latching, and there is a fire, then the door may not limit the spread of fire or smoke, which may result in an increased safety risk to the resident.

If an object is present that may prevent the fire labeled door from closing and latching or self-closing and latching, then the resident may not be able to fully use a feature of that is expected to be provided and maintained as part of their rent.

Property management would be expected to ensure that staff understand how to identify if an object is present that may prevent the fire labeled door from closing and latching or self-closing and latching. Management practices would be expected to assure prompt creation and prioritization of a work order to remedy this defect, because it may result in safety hazards or usability barriers.

#### **Deficiency 6 – Door – Fire Labeled: Unit**

<b>Deficiency</b>	Fire labeled door cannot be secured.
<b>Deficiency Criteria</b>	Fire labeled door cannot be secured (i.e., access controlled) by at least 1 installed lock.
<b>Health and Safety Determination</b>	Severe
<b>Correction Timeframe</b>	24 hours
<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If the fire labeled door cannot be secured, then the resident’s ability to control access to the unit may be limited.</p> <p>If the fire labeled door cannot be secured, then the resident may be unable to reasonably ensure privacy within the unit.</p> <p>If the fire labeled door cannot be secured, then the resident’s ability to control access to the unit may be limited.</p> <p>A resident is likely to notice if the fire labeled door within the unit cannot be secured and to recognize it is important enough to report it to property management because it may limit their security or privacy. Property management should be expected to prioritize a work order to remedy this deficiency because it may limit the resident’s security or privacy.</p>

#### **Deficiency 6 – Door – Fire Labeled: Inside**

<b>Deficiency</b>	Fire labeled door cannot be secured.
<b>Deficiency Criteria</b>	Fire labeled door cannot be secured (i.e., access controlled) by at least 1 installed lock, if so designed.

<b>Health and Safety Determination</b>	Moderate
<b>Correction Timeframe</b>	30 days
<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If the fire labeled door cannot be secured, then the resident's ability to control access to the property may be limited.</p> <p>If the fire labeled door cannot be secured, then the resident's ability to control access to the property may be limited.</p> <p>Property management would be expected to ensure that staff understand how to identify a fire labeled door that cannot be secured, if so designed. Management practices would be expected to assure prompt creation and prioritization of a work order to remedy this defect, because it may result in security hazards or usability barriers.</p>

#### **Deficiency 7 – Door – Fire Labeled: Unit**

<b>Deficiency</b>	Fire labeled door is missing.
<b>Deficiency Criteria</b>	Fire labeled door is missing (i.e., evidence of prior installation, but is now not present or is incomplete).
<b>Health and Safety Determination</b>	Life-Threatening
<b>Correction Timeframe</b>	24 hours
<b>HCV Correction Timeframe</b>	24 hours
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If the fire labeled door is missing, then there may be an increased safety risk for the resident in the event of an emergency.</p> <p>If the fire labeled door is missing, the resident is unable to fully use a feature which is expected to be provided and maintained as part of their rent.</p> <p>A resident is likely to notice if a fire labeled door is missing and to recognize it is important enough to report it to property management because it may present safety hazards or usability barriers. Property management should be expected to prioritize a work order to remedy this defect because it may result in safety hazards.</p>

#### **Deficiency 7 – Door – Fire Labeled: Inside**

<b>Deficiency</b>	Fire labeled door is missing.
-------------------	-------------------------------

<b>Deficiency Criteria</b>	Fire labeled door is missing (i.e., evidence of prior installation, but is now not present or is incomplete).
<b>Health and Safety Determination</b>	Life-Threatening
<b>Correction Timeframe</b>	24 hours
<b>HCV Correction Timeframe</b>	24 hours
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If the fire labeled door is missing, then there may be an increased safety risk for the resident in the event of an emergency.</p> <p>If the fire labeled door is missing, the resident is unable to fully use a feature which is expected to be provided and maintained as part of their rent.</p> <p>Property management would be expected to ensure that staff understand how to identify a missing fire labeled door. Management practices would be expected to assure prompt creation and prioritization of a work order to remedy this defect, because it may result in security hazards or usability barriers.</p>

**TABLE 12—DOOR – GENERAL STANDARD**

<b>Definition and Location</b>	
<b>Definition</b>	Panel that provides an opening in a building or room and provides separation (i.e., closes an opening).
<b>Location</b>	<p>Unit: All passage doors throughout the Unit (i.e., a door between rooms, door into a walk-in closet, or door into a utility room, storage room, or room that contains washers and dryers).</p> <p>Inside: All passage doors throughout the Inside (i.e., a door between rooms, door into a walk-in closet, or door into a utility room, storage room, or room that contains washers and dryers).</p> <p>Outside: All exterior doors throughout the Outside (i.e., a door into a utility room, storage room, or mechanical room).</p>
<b>Deficiency 1 – Door – General: Unit</b>	
<b>Deficiency</b>	A passage door does not open.
<b>Deficiency Criteria</b>	A passage door does not open such that it may limit the resident’s ability to move freely between rooms.

<b>Health and Safety Determination</b>	Moderate
<b>Correction Timeframe</b>	30 days
<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If a passage door does not open such that it may limit the resident's ability to move freely between rooms, then there may be an increased safety risk for the resident in the event of an emergency.</p> <p>If a passage door does not open, then the resident's ability to move freely between rooms may be limited.</p> <p>A resident is likely to notice if a passage door does not open such that it may limit the resident's ability to move freely between rooms and to recognize it is important enough to report it to property management because it may present safety hazards or usability barriers. Property management should be expected to prioritize a work order to remedy this deficiency because it may result in safety hazards.</p>
<b>Deficiency 1 – Door – General: Inside</b>	
<b>Deficiency</b>	A passage door does not open.
<b>Deficiency Criteria</b>	A passage door does not open such that it may limit the resident's ability to move freely between rooms.
<b>Health and Safety Determination</b>	Moderate
<b>Correction Timeframe</b>	30 days
<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If a passage door does not open such that it may limit the resident's ability to move freely between rooms, then there may be an increased safety risk for the resident in the event of an emergency.</p> <p>If a passage door does not open, then the resident's ability to move freely between rooms may be limited.</p> <p>Property management would be expected to ensure that staff members understand how to identify a passage door that does not open such that it may limit the resident's ability to move freely between rooms. Management practices would be expected to assure prompt creation and prioritization of</p>

a work order to remedy this deficiency, because it may result in safety hazards or usability barriers.

#### **Deficiency 2 – Door – General: Unit**

<b>Deficiency</b>	A passage door component is damaged, inoperable, or missing and the door is not functionally adequate.
<b>Deficiency Criteria</b>	<p>A passage door component is damaged (i.e., visibly defective; impacts functionality) and the door is not functionally adequate.</p> <p>OR</p> <p>A passage door component is inoperable (i.e., component is not meeting function or purpose; with or without visible damage) and the door is not functionally adequate.</p> <p>OR</p> <p>A passage door component is missing (i.e., evidence of prior installation, but is now not present or is incomplete) and the door is not functionally adequate.</p>
<b>Health and Safety Determination</b>	Low
<b>Correction Timeframe</b>	60 Days
<b>HCV Correction Timeframe</b>	N/A
<b>HCV Pass/Fail</b>	Pass
<b>Rationale</b>	<p>If a passage door component is damaged, inoperable, or missing and the door is not functionally adequate, then the resident’s reasonable expectation of privacy may be limited.</p> <p>If a passage door component is damaged, inoperable, or missing and the door is not functionally adequate, then the resident may not be able to fully use a feature of the Unit that is expected to be provided and maintained as part of the rent.</p> <p>A resident is likely to notice a passage door component that is damaged, inoperable, or missing and the door is not functionally adequate, and to recognize it is important enough to report it to property management because it may limit the resident’s privacy. Property management should be expected to prioritize a work order to remedy this deficiency because it may limit the resident’s privacy.</p>
<b>Deficiency 2 – Door – General: Inside</b>	
<b>Deficiency</b>	A passage door component is damaged, inoperable, or missing and the door is not functionally adequate.
<b>Deficiency Criteria</b>	A passage door component is damaged (i.e., visibly defective; impacts functionality) and the door is not functionally adequate.

	<p>OR</p> <p>A passage door component is inoperable (i.e., component is not meeting function or purpose; with or without visible damage) and the door is not functionally adequate.</p> <p>OR</p> <p>A passage door component is missing (i.e., evidence of prior installation, but is now not present or is incomplete) and the door is not functionally adequate.</p>
<b>Health and Safety Determination</b>	Low
<b>Correction Timeframe</b>	60 Days
<b>HCV Correction Timeframe</b>	N/A
<b>HCV Pass/Fail</b>	Pass
<b>Rationale</b>	<p>If a passage door component is damaged, inoperable, or missing and the door is not functionally adequate, then the resident may not be able to fully use a feature that is expected to be provided and maintained as part of the rent.</p> <p>Property management would be expected to ensure that staff members understand how to identify a passage door component that is damaged, inoperable, or missing and the door is not functionally adequate. Management practices would be expected to assure prompt creation and prioritization of a work order to remedy this deficiency, because it may result in usability barriers.</p>
<b>Deficiency 3 – Door – General: Unit</b>	
<b>Deficiency</b>	A door that is not intended to permit access between rooms has a damaged, inoperable, or missing component.
<b>Deficiency Criteria</b>	<p>A door that is not intended to permit access between rooms has a damaged (i.e., visibly defective; impacts functionality) component.</p> <p>OR</p> <p>A door that is not intended to permit access between rooms has an inoperable (i.e., component is not meeting function or purpose, with or without visible damage) component.</p> <p>OR</p> <p>A door that is not intended to permit access between rooms has a missing (i.e., evidence of prior installation, but is now not present or is incomplete) component.</p>
<b>Health and Safety Determination</b>	Low

<b>Correction Timeframe</b>	60 Days
<b>HCV Correction Timeframe</b>	N/A
<b>HCV Pass/Fail</b>	Pass
<b>Rationale</b>	<p>If a door that is not intended to permit access between rooms has a damaged, inoperable, or missing component, then the resident's reasonable expectation of privacy of their personal property may be limited.</p> <p>If a door that is not intended to permit access between rooms has a damaged, inoperable, or missing component, then the resident may not be able to fully use a feature of the Unit that is expected to be provided and maintained as part of the rent.</p> <p>A resident is likely to notice if a door that is not intended to permit access between rooms and has a damaged, inoperable, or missing component and to recognize it is important enough to report it to property management because it may limit the resident's privacy or present usability barriers. Property management should be expected to prioritize a work order to remedy this deficiency because it may limit the resident's privacy or present usability barriers.</p>

#### **Deficiency 4 – Door – General: Outside**

<b>Deficiency</b>	An exterior door component is damaged, inoperable, or missing.
<b>Deficiency Criteria</b>	An exterior door component is damaged (i.e., visibly defective; impacts functionality), inoperable (i.e., component is not meeting function or purpose, with or without visible damage), or missing (i.e., evidence of prior installation, but is now not present or is incomplete).
<b>Health and Safety Determination</b>	Moderate
<b>Correction Timeframe</b>	30 days
<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If an exterior door component is damaged, inoperable, or missing, then the resident may be able to access areas that may be unsafe or not intended for the resident's use, which may result in an increased safety risk to the resident of injury.</p> <p>Property management would be expected to ensure that staff members understand how to identify an exterior door component that is damaged, inoperable, or missing. Management practices would be expected to assure</p>

prompt creation and prioritization of a work order to remedy this deficiency, because it may result in safety hazards.

**TABLE 13—DRAIN STANDARD**

<b>Definition and Location</b>	
<b>Definition</b>	An opening in the floor that drains water into the plumbing system.
<b>Location</b>	Unit: Bathroom, basement, utility room, maintenance closet, laundry, stairwell, etc.  Inside: Bathroom, basement, utility room, maintenance closet, laundry, stairwell, etc.  Outside: Stairwell, entryway, etc.
<b>Deficiency 1 –Drain: Unit</b>	
<b>Deficiency</b>	Drain is fully blocked.
<b>Deficiency Criteria</b>	Standing water is present over the floor drain, or the floor drain is blocked such that the inspector believes water would be unable to drain.
<b>Health and Safety Determination</b>	Moderate
<b>Correction Timeframe</b>	30 days
<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If standing water is present over the floor drain or the floor drain is blocked such that the inspector believes water would be unable to drain, this may increase interior moisture levels, which provides an environment favorable for mold growth and may trigger respiratory issues.</p> <p>If standing water is present over the floor drain or the floor drain is blocked such that the inspector believes water would be unable to drain, there may be an increased safety risk to the resident of slipping or falling in the standing water, which may result in injury.</p> <p>If standing water is present over the floor drain, it may be contaminated with pathogens. The resident may come into contact with this potentially contaminated water, possibly leading to infectious diseases.</p> <p>A resident is likely to notice standing water within the unit and to recognize it is important enough to report to property management because it may result in damage to personal property. Property management should be</p>

expected to prioritize a work order for standing water because it may result in water damage to finish materials.

#### Deficiency 1 –Drain: Inside

<b>Deficiency</b>	Drain is fully blocked.
<b>Deficiency Criteria</b>	Standing water is present over the floor drain, or the floor drain is blocked such that the inspector believes water would be unable to drain.
<b>Health and Safety Determination</b>	Moderate
<b>Correction Timeframe</b>	30 days
<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>In an area accessible to the resident, if standing water is present over the floor drain or the floor drain is blocked such that the inspector believes water would be unable to drain, this may increase interior moisture levels, which provides an environment favorable for mold growth and may trigger respiratory issues.</p> <p>In an area accessible to the resident, if standing water is present over the floor drain or the floor drain is blocked such that the inspector believes water would be unable to drain, there may be an increased safety risk to the resident of slipping or falling in the standing water, which may result in injury.</p> <p>In an area accessible to the resident, if standing water is present over the floor drain, it may be contaminated with pathogens. The resident may come into contact with this potentially contaminated water, possibly leading to infectious diseases.</p> <p>Property management would be expected to ensure that staff members understand how to identify blockages or standing water over a floor drain within the Inside area. Management practices would be expected to assure prompt creation and prioritization of a work order to unblock the drain, because standing water due to a blockage may result in water damage to interior finish materials.</p>

#### Deficiency 1 –Drain: Outside

<b>Deficiency</b>	Drain is fully blocked.
<b>Deficiency Criteria</b>	Standing water is present over the floor drain, or the floor drain is blocked such that the inspector believes water would be unable to drain.

<b>Health and Safety Determination</b>	Moderate
<b>Correction Timeframe</b>	30 days
<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>In an area accessible to the resident, if standing water is present over the floor drain or the floor drain is blocked such that the inspector believes water would be unable to drain, there may be an increased safety risk to the resident of slipping or falling in the standing water, which may result in injury.</p> <p>In an area accessible to the resident, if standing water is present over the floor drain, it may be contaminated with pathogens. The resident may come into contact with this potentially contaminated water, possibly leading to infectious diseases.</p> <p>Property management would be expected to ensure that staff members understand how to identify blockages or standing water over a floor drain throughout the exterior built environment. Management practices would be expected to assure prompt creation and prioritization of a work order to unblock the drain, because standing water due to a blockage may result in safety or sanitary hazards.</p>

**TABLE 14—EGRESS STANDARD**

<b>Definition and Location</b>	
<b>Definition</b>	A safe, continuous, and unobstructed path of travel from any point in the building, unit, or structure to the public way.
<b>Location</b>	Unit: Hallway, stairwell, corridor, sleeping room  Inside: Hallway, stairwell, corridor  Outside: Hallway, stairwell, corridor
<b>Deficiency 1 – Egress: Unit</b>	
<b>Deficiency</b>	Obstructed means of egress.
<b>Deficiency Criteria</b>	The exit access or exit is obstructed.
<b>Health and Safety Determination</b>	Life-Threatening

<b>Correction Timeframe</b>	24 hours
<b>HCV Correction Timeframe</b>	24 hours
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If the exit access or exit is obstructed and there is an emergency, then the resident may be unable to safely and expeditiously exit, which may result in injury or death.</p> <p>If the exit access or exit is obstructed, then the resident may not be able to fully use the means of egress to safely exit.</p> <p>A resident is likely to notice if an exit access or exit is obstructed and to recognize this is important enough to report to property management because it may present safety hazards. Property management should be expected to prioritize a work order to remedy this deficiency because it may result in safety hazards.</p>

#### **Deficiency 1 – Egress: Inside**

<b>Deficiency</b>	Obstructed means of egress.
<b>Deficiency Criteria</b>	The exit access or exit is obstructed.
<b>Health and Safety Determination</b>	Life-Threatening
<b>Correction Timeframe</b>	24 hours
<b>HCV Correction Timeframe</b>	24 hours
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If the exit access or exit is obstructed and there is an emergency, then the resident may be unable to safely and expeditiously exit, which may result in injury or death.</p> <p>If the exit access or exit is obstructed, then the resident may not be able to fully use the means of egress to safely exit.</p> <p>Property management would be expected to ensure that staff members understand how to identify an obstructed exit access and exit. Management practices would be expected to assure prompt creation and prioritization of a work order to remedy this deficiency because it may result in safety hazards or usability barriers.</p>

#### **Deficiency 1 – Egress: Outside**

<b>Deficiency</b>	Obstructed means of egress.
-------------------	-----------------------------

<b>Deficiency Criteria</b>	The exit discharge is obstructed.
<b>Health and Safety Determination</b>	Life-Threatening
<b>Correction Timeframe</b>	24 hours
<b>HCV Correction Timeframe</b>	24 hours
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If the exit discharge is obstructed and there is an emergency, then the resident may be unable to safely and expeditiously exit, which may result in injury or death.</p> <p>If the exit discharge is obstructed, then the resident may not be able to fully use the means of egress to safely exit.</p> <p>Property management would be expected to ensure that staff members understand how to identify an obstructed exit discharge. Management practices would be expected to assure prompt creation and prioritization of a work order to remedy this deficiency because it may result in safety hazards or usability barriers.</p>

#### **Deficiency 2 – Egress: Unit**

<b>Deficiency</b>	Sleeping room is located on the 3rd floor or below and has an obstructed rescue opening.
<b>Deficiency Criteria</b>	Sleeping room is located on the 3rd floor or below and has an obstructed rescue opening.
<b>Health and Safety Determination</b>	Life-Threatening
<b>Correction Timeframe</b>	24 hours
<b>HCV Correction Timeframe</b>	24 hours
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If a sleeping room is located on the 3rd floor or below and has an obstructed rescue opening and there is an emergency, then the resident may be unable to safely and expeditiously exit, which may result in injury or death.</p> <p>If a sleeping room is located on the 3rd floor or below and has an obstructed rescue opening, then the resident may not be able to fully use the means of egress to safely exit.</p>

A resident is likely to notice if a sleeping room is located on the 3rd floor or below and has an obstructed rescue opening and to recognize this is important enough to report to property management because it may present safety hazards. Property management should be expected to prioritize a work order to remedy this deficiency because it may result in safety hazards.

### Deficiency 3 – Egress: Unit

<b>Deficiency</b>	Fire escape access is obstructed.
<b>Deficiency Criteria</b>	Fire escape access is obstructed.
<b>Health and Safety Determination</b>	Life-Threatening
<b>Correction Timeframe</b>	24 hours
<b>HCV Correction Timeframe</b>	24 hours
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If a fire escape access is obstructed and there is an emergency, then the resident may be unable to safely and expeditiously exit, which may result in injury or death.</p> <p>If a fire escape access is obstructed, then the resident may not be able to fully use the means of egress to safely exit.</p> <p>A resident is likely to notice if a fire escape access is obstructed and to recognize this is important enough to report to property management because it may present safety hazards. Property management should be expected to prioritize a work order to remedy this deficiency because it may result in safety hazards.</p>

**TABLE 15—ELECTRICAL – CONDUCTOR, OUTLET, AND SWITCH STANDARD**

<b>Definition and Location</b>	
<b>Definition</b>	<p>Conductor: An object or type of material that carries electrical current.</p> <p>Outlet and Switch: Installations that connect to an electrical supply.</p>
<b>Location</b>	<p>Unit: Throughout the Unit</p> <p>Inside: Throughout the Inside</p> <p>Outside: Throughout the Outside</p>
<b>Deficiency 1 – Electrical – Conductor, Outlet, and Switch: Unit</b>	
<b>Deficiency</b>	Outlet or switch is damaged.

<b>Deficiency Criteria</b>	Any portion of a visually accessible (i.e., can be reasonably accessed and observed) outlet or switch is damaged (i.e., visibly defective; impacts functionality) such that it may not safely carry or control electrical current at the outlet or switch.
<b>Health and Safety Determination</b>	Life-Threatening
<b>Correction Timeframe</b>	24 hours
<b>HCV Correction Timeframe</b>	24 hours
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If any portion of a visually accessible outlet or switch is damaged such that it may not safely carry or control electrical current at the outlet or switch, then there may be an increased safety risk to the resident of fire or electrical shock, which may result in injury or death.</p> <p>If any portion of a visually accessible outlet or switch is damaged such that it may not safely carry or control electrical current at the outlet or switch, then the resident may not be able to safely use appliances, lighting fixtures, or other devices.</p> <p>A resident is likely to notice if any portion of a visually accessible outlet or switch is damaged such that it may not safely carry or control electrical current at the outlet or switch and recognize it is important enough to report to property management because it may present safety hazards. Property management should be expected to prioritize a work order to remedy this deficiency because it may result in safety hazards or usability barriers.</p>

#### **Deficiency 1 – Electrical – Conductor, Outlet, and Switch: Inside**

<b>Deficiency</b>	Outlet or switch is damaged.
<b>Deficiency Criteria</b>	Any portion of a visually accessible (i.e., can be reasonably accessed and observed) outlet or switch is damaged (i.e., visibly defective; impacts functionality) such that it may not safely carry or control electrical current at the outlet or switch.
<b>Health and Safety Determination</b>	Life-Threatening
<b>Correction Timeframe</b>	24 hours
<b>HCV Correction Timeframe</b>	24 hours
<b>HCV Pass/Fail</b>	Fail

<b>Rationale</b>	<p>If any portion of a visually accessible outlet or switch is damaged such that it may not safely carry or control electrical current at the outlet or switch, then there may be an increased safety risk to the resident of fire or electrical shock, which may result in injury or death.</p> <p>If any portion of a visually accessible outlet or switch is damaged such that it may not safely carry or control electrical current at the outlet or switch, then the resident may not be able to safely use appliances, lighting fixtures, or other devices.</p> <p>Property management would be expected to ensure that staff members understand how to identify if any portion of a visually accessible outlet or switch is damaged such that it may not safely carry or control electrical current at the outlet or switch. Management practices would be expected to assure prompt creation and prioritization of a work order to remedy this deficiency because it may result in safety hazards or usability barriers.</p>
<b>Deficiency 1 – Electrical – Conductor, Outlet, and Switch: Outside</b>	
<b>Deficiency</b>	Outlet or switch is damaged.
<b>Deficiency Criteria</b>	Any portion of a visually accessible (i.e., can be reasonably accessed and observed) outlet or switch is damaged (i.e., visibly defective; impacts functionality) such that it may not safely carry or control electrical current at the outlet or switch.
<b>Health and Safety Determination</b>	Life-Threatening
<b>Correction Timeframe</b>	24 hours
<b>HCV Correction Timeframe</b>	24 hours
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If any portion of a visually accessible outlet or switch is damaged such that it may not safely carry or control electrical current at the outlet or switch, then there may be an increased safety risk to the resident of fire or electrical shock, which may result in injury or death.</p> <p>If any portion of a visually accessible outlet or switch is damaged such that it may not safely carry or control electrical current at the outlet or switch, then the resident may not be able to safely use appliances, lighting fixtures, or other devices.</p> <p>Property management would be expected to ensure that staff members understand how to identify if any portion of a visually accessible outlet or switch is damaged such that it may not safely carry or control electrical current at the outlet or switch. Management practices would be expected</p>

to assure prompt creation and prioritization of a work order to remedy this deficiency because it may result in safety hazards or usability barriers.

#### **Deficiency 2 – Electrical – Conductor, Outlet, and Switch: Unit**

<b>Deficiency</b>	Testing indicates a three-pronged outlet is not properly wired or grounded.
<b>Deficiency Criteria</b>	Testing of a three-pronged outlet that is reasonably accessible (i.e., can be reached without moving obstructions, dismantling, destructive measures, or actions that may pose a risk to persons or property) indicates that it is not properly wired or grounded.
<b>Health and Safety Determination</b>	Severe
<b>Correction Timeframe</b>	24 hours
<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If testing of a three-pronged outlet that is reasonably accessible indicates that it is not properly wired or grounded, and a device is plugged into the outlet, then the outlet may not safely conduct the electrical current through the device, which may result in an increased risk to the resident of electrical shock.</p> <p>If testing of a three-pronged outlet that is reasonably accessible indicates that it is not properly wired or grounded, then the resident may not be able to safely use the outlet, which may result in limited use of appliances or lighting fixtures.</p> <p>Property management would be expected to ensure that staff members understand how to identify a three-pronged outlet that is reasonably accessible and is not properly wired or grounded. Management practices would be expected to assure prompt creation and prioritization of a work order to remedy this deficiency because it may result in safety hazards or usability barriers.</p>

#### **Deficiency 2 – Electrical – Conductor, Outlet, and Switch: Inside**

<b>Deficiency</b>	Testing indicates a three-pronged outlet is not properly wired or grounded.
<b>Deficiency Criteria</b>	Testing of a three-pronged outlet that is reasonably accessible (i.e., can be reached without moving obstructions, dismantling, destructive measures, or actions that may pose a risk to persons or property) indicates that it is not properly wired or grounded.
<b>Health and Safety Determination</b>	Severe

<b>Correction Timeframe</b>	24 hours
<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If testing of a three-pronged outlet that is reasonably accessible indicates that it is not properly wired or grounded, and a device is plugged into the outlet, then the outlet may not safely conduct the electrical current through the device, which may result in an increased risk to the resident of electrical shock.</p> <p>If testing of a three-pronged outlet that is reasonably accessible indicates that it is not properly wired or grounded, then the resident may not be able to safely use the outlet, which may result in limited use of appliances or lighting fixtures.</p> <p>Property management would be expected to ensure that staff members understand how to identify a three-pronged outlet that is reasonably accessible and is not properly wired or grounded. Management practices would be expected to assure prompt creation and prioritization of a work order to remedy this deficiency because it may result in safety hazards or usability barriers.</p>
<b>Deficiency 2 – Electrical – Conductor, Outlet, and Switch: Outside</b>	
<b>Deficiency</b>	Testing indicates a three-pronged outlet is not properly wired or grounded.
<b>Deficiency Criteria</b>	Testing of a three-pronged outlet that is reasonably accessible (i.e., can be reached without moving obstructions, dismantling, destructive measures, or actions that may pose a risk to persons or property) indicates that it is not properly wired or grounded.
<b>Health and Safety Determination</b>	Severe
<b>Correction Timeframe</b>	24 hours
<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If testing of a three-pronged outlet that is reasonably accessible indicates that it is not properly wired or grounded, and a device is plugged into the outlet, then the outlet may not safely conduct the electrical current through the device, which may result in an increased risk to the resident of electrical shock.</p> <p>If testing of a three-pronged outlet that is reasonably accessible indicates that it is not properly wired or grounded, then the resident may not be able</p>

to safely use the outlet, which may result in limited use of appliances or lighting fixtures.

Property management would be expected to ensure that staff members understand how to identify a three-pronged outlet that is reasonably accessible and is not properly wired or grounded. Management practices would be expected to assure prompt creation and prioritization of a work order to remedy this deficiency because it may result in safety hazards or usability barriers.

### **Deficiency 3 – Electrical – Conductor, Outlet, and Switch: Unit**

<b>Deficiency</b>	Outlet does not have visible damage and testing indicates it is not energized.
<b>Deficiency Criteria</b>	An outlet that is reasonably accessible (i.e., can be reached without moving obstructions, dismantling, destructive measures, or actions that may pose a risk to persons or property) does not have visible damage and testing indicates that it is not energized.
<b>Health and Safety Determination</b>	Severe
<b>Correction Timeframe</b>	24 hours
<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If an outlet that is reasonably accessible does not have visible damage and testing indicates that it is not energized, then the outlet may not safely conduct the electrical current through the device, possibly resulting in an increased safety risk to the resident of fire, which may result in injury.</p> <p>If an outlet that is reasonably accessible does not have visible damage and testing indicates that it is not energized, then the resident may not be able to safely use the outlet, which may result in limited use of devices.</p> <p>A resident is likely to notice if an outlet is not energized within the unit and to recognize it is important enough to report it to property management because it may present usability barriers. Property management should be expected to prioritize a work order for an outlet that does not have visible damage and testing indicates that it is not energized because it may result in safety hazards or usability barriers.</p>

### **Deficiency 3 – Electrical – Conductor, Outlet, and Switch: Inside**

<b>Deficiency</b>	Outlet does not have visible damage and testing indicates it is not energized.
<b>Deficiency Criteria</b>	An outlet that is reasonably accessible (i.e., can be reached without moving obstructions, dismantling, destructive measures, or actions that may pose a

	risk to persons or property) does not have visible damage and testing indicates that it is not energized.
<b>Health and Safety Determination</b>	Severe
<b>Correction Timeframe</b>	24 hours
<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If an outlet that is reasonably accessible does not have visible damage and testing indicates that it is not energized, then the outlet may not safely conduct the electrical current through the device, possibly resulting in an increased safety risk to the resident of fire, which may result in injury.</p> <p>If an outlet that is reasonably accessible does not have visible damage and testing indicates that it is not energized, then the resident may not be able to safely use the outlet, which may result in limited use of devices.</p> <p>Property management would be expected to ensure that staff members understand how to identify an outlet that does not have visible damage and testing indicates that it is not energized. Management practices would be expected to assure prompt creation and prioritization of a work order to remedy this deficiency, because it may result in safety hazards or usability barriers.</p>
<b>Deficiency 3 – Electrical – Conductor, Outlet, and Switch: Outside</b>	
<b>Deficiency</b>	Outlet does not have visible damage and testing indicates it is not energized.
<b>Deficiency Criteria</b>	An outlet that is reasonably accessible (i.e., can be reached without moving obstructions, dismantling, destructive measures, or actions that may pose a risk to persons or property) does not have visible damage and testing indicates that it is not energized.
<b>Health and Safety Determination</b>	Severe
<b>Correction Timeframe</b>	24 hours
<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	If an outlet that is reasonably accessible does not have visible damage and testing indicates that it is not energized, then the outlet may not safely

conduct the electrical current through the device, possibly resulting in an increased safety risk to the resident of fire, which may result in injury.

If an outlet that is reasonably accessible does not have visible damage and testing indicates that it is not energized, then the resident may not be able to safely use the outlet, which may result in limited use of devices.

Property management would be expected to ensure that staff members understand how to identify an outlet that does not have visible damage and testing indicates that it is not energized. Management practices would be expected to assure prompt creation and prioritization of a work order to remedy this deficiency, because it may result in safety hazards or usability barriers.

#### **Deficiency 4 – Electrical – Conductor, Outlet, and Switch: Unit**

<b>Deficiency</b>	Exposed electrical conductor.
<b>Deficiency Criteria</b>	Electrical conductor is not enclosed or properly insulated (e.g., damaged or missing sheathing that exposes the insulated wiring or conductor, open port, missing knockout, missing outlet or switch cover, or missing breaker or fuse). OR An opening or gap is present and measures greater than 1/2 inch.
<b>Health and Safety Determination</b>	Life-Threatening
<b>Correction Timeframe</b>	24 hours
<b>HCV Correction Timeframe</b>	24 hours
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If an electrical conductor is not enclosed or properly insulated or an opening or gap is present and measures greater than ½ inch, then the resident may contact the exposed electrical conductor and be at an increased risk of electrical shock or shock-related injury, which may result in permanent disability or death.</p> <p>If an electrical conductor is not enclosed or properly insulated or an opening or gap is present and measures greater than ½ inch, and there is a short or arc that causes a fire, then the enclosure may not be able to adequately contain the fire, resulting in an increased fire spread risk, which may result in injury.</p> <p>A resident is likely to notice if an electrical conductor is not enclosed or properly insulated or an opening or gap is present and measures greater than ½ inch within the unit and to recognize it is important enough to report it to property management because it may present safety hazards.</p>

Property management should be expected to prioritize a work order to remedy this deficiency because it may result in safety hazards.

#### **Deficiency 4 – Electrical – Conductor, Outlet, and Switch: Inside**

<b>Deficiency</b>	Exposed electrical conductor.
<b>Deficiency Criteria</b>	Electrical conductor is not enclosed or properly insulated (e.g., damaged or missing sheathing that exposes the insulated wiring or conductor, open port, missing knockout, missing outlet or switch cover, or missing breaker or fuse). OR An opening or gap is present and measures greater than 1/2 inch.
<b>Health and Safety Determination</b>	Life-Threatening
<b>Correction Timeframe</b>	24 hours
<b>HCV Correction Timeframe</b>	24 hours
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If an electrical conductor is not enclosed or properly insulated or an opening or gap is present and measures greater than ½ inch, then the resident may contact the exposed electrical conductor and be at an increased risk of electrical shock or shock-related injury, which may result in permanent disability or death.</p> <p>If an electrical conductor is not enclosed or properly insulated or an opening or gap is present and measures greater than ½ inch, and there is a short or arc that causes a fire, then the enclosure may not be able to adequately contain the fire, resulting in an increased fire spread risk, which may result in injury.</p> <p>Property management would be expected to ensure that staff members understand how to identify an electrical conductor that is not enclosed or properly insulated or if there is an opening or gap present that measures greater than ½ inch. Management practices would be expected to assure prompt creation and prioritization of a work order to remedy this deficiency because it may result in safety hazards.</p>

#### **Deficiency 4 – Electrical – Conductor, Outlet, and Switch: Outside**

<b>Deficiency</b>	Exposed electrical conductor.
<b>Deficiency Criteria</b>	Electrical conductor is not enclosed or properly insulated (e.g., damaged or missing sheathing that exposes the insulated wiring or conductor, open port, missing knockout, missing outlet or switch cover, or missing breaker or fuse). OR

	An opening or gap is present and measures greater than 1/2 inch.
<b>Health and Safety Determination</b>	Life-Threatening
<b>Correction Timeframe</b>	24 hours
<b>HCV Correction Timeframe</b>	24 hours
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If an electrical conductor is not enclosed or properly insulated or an opening or gap is present and measures greater than ½ inch, then the resident may contact the exposed electrical conductor and be at an increased risk of electrical shock or shock-related injury, which may result in permanent disability or death.</p> <p>If an electrical conductor is not enclosed or properly insulated or an opening or gap is present and measures greater than ½ inch, and there is a short or arc that causes a fire, then the enclosure may not be able to adequately contain the fire, resulting in an increased fire spread risk, which may result in injury.</p> <p>Property management would be expected to ensure that staff members understand how to identify an electrical conductor that is not enclosed or properly insulated or if there is an opening or gap present that measures greater than ½ inch. Management practices would be expected to assure prompt creation and prioritization of a work order to remedy this deficiency because it may result in safety hazards.</p>
<b>Deficiency 5 – Electrical – Conductor, Outlet, and Switch: Unit</b>	
<b>Deficiency</b>	Water is currently in contact with an electrical conductor.
<b>Deficiency Criteria</b>	Water is currently in contact with an electrical conductor.
<b>Health and Safety Determination</b>	Life-Threatening
<b>Correction Timeframe</b>	24 hours
<b>HCV Correction Timeframe</b>	24 hours
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If water is in contact with an electrical conductor, then there may be an increased safety risk to the resident of electrical shock or fire hazard, which may result in injury or death.</p> <p>A resident is likely to notice if water is in contact with an electrical conductor and to recognize it is important enough to report it to property</p>

management because it may present safety hazards. Property management should be expected to prioritize a work order to remedy this deficiency because it may result in safety hazards.

<b>Deficiency 5 – Electrical – Conductor, Outlet, and Switch: Inside</b>	
<b>Deficiency</b>	Water is currently in contact with an electrical conductor.
<b>Deficiency Criteria</b>	Water is currently in contact with an electrical conductor.
<b>Health and Safety Determination</b>	Life-Threatening
<b>Correction Timeframe</b>	24 hours
<b>HCV Correction Timeframe</b>	24 hours
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If water is in contact with an electrical conductor, then there may be an increased safety risk to the resident of electrical shock or fire hazard, which may result in injury or death.</p> <p>Property management would be expected to ensure that staff members understand how to identify if water is in contact with an electrical conductor. Management practices would be expected to assure prompt creation and prioritization of a work order to remedy this deficiency because it may result in safety hazards.</p>

**TABLE 16—ELECTRICAL – GROUND-FAULT CIRCUIT INTERRUPTER (GFCI) OR ARC-FAULT CIRCUIT INTERRUPTER (AFCI) – OUTLET OR BREAKER STANDARD**

<b>Definition and Location</b>	
<b>Definition</b>	Electrical protection devices
<b>Location</b>	<p>Unit: Living room, bedroom, kitchen, bathroom, office, mechanical room, closet, hallway, any wall surface.</p> <p>Inside: Living room, kitchen, bathroom, office, mechanical room, closet, hallway, any wall surface.</p> <p>Outside: Exterior wall surface, service panels, or site.</p>
<b>Deficiency 1 – Electrical – Ground-Fault Circuit Interrupter (GFCI) or Arc-Fault Circuit Interrupter (AFCI) – Outlet or Breaker: Unit</b>	
<b>Deficiency</b>	GFCI outlet or GFCI breaker is not visibly damaged and the test or reset button is inoperable.

<b>Deficiency Criteria</b>	GFCI outlet or GFCI breaker does not have visible damage and the test or reset button is inoperable (i.e., overall system or component thereof is not meeting function or purpose).
<b>Health and Safety Determination</b>	Severe
<b>Correction Timeframe</b>	24 hours
<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If a GFCI outlet or GFCI breaker does not have visible damage and the test or reset button is inoperable, and a ground fault occurs, there may be an increased safety risk to the resident of electrical shock, which may result in injury.</p> <p>If a GFCI outlet or GFCI breaker does not have visible damage and the test or reset button is inoperable, then the resident may not be able to test or reset the GFCI outlet or GFCI breaker, which may result in limited use of devices.</p> <p>Property management would be expected to ensure that staff members understand how to identify a GFCI outlet or GFCI breaker that does not have visible damage and the test or reset button is inoperable. Management practices would be expected to assure prompt creation and prioritization of a work order to remedy this deficiency because it may result in safety hazards or usability barriers.</p>

**Deficiency 1 – Electrical – Ground-Fault Circuit Interrupter (GFCI) or Arc-Fault Circuit Interrupter (AFCI) – Outlet or Breaker: Inside**

<b>Deficiency</b>	GFCI outlet or GFCI breaker is not visibly damaged and the test or reset button is inoperable.
<b>Deficiency Criteria</b>	GFCI outlet or GFCI breaker does not have visible damage and the test or reset button is inoperable (i.e., overall system or component thereof is not meeting function or purpose).
<b>Health and Safety Determination</b>	Severe
<b>Correction Timeframe</b>	24 hours
<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail

<b>Rationale</b>	<p>If a GFCI outlet or GFCI breaker does not have visible damage and the test or reset button is inoperable, and a ground fault occurs, there may be an increased safety risk to the resident of electrical shock, which may result in injury.</p> <p>If a GFCI outlet or GFCI breaker does not have visible damage and the test or reset button is inoperable, then the resident may not be able to test or reset the GFCI outlet or GFCI breaker, which may result in limited use of devices.</p> <p>Property management would be expected to ensure that staff members understand how to identify a GFCI outlet or GFCI breaker that does not have visible damage and the test or reset button is inoperable. Management practices would be expected to assure prompt creation and prioritization of a work order to remedy this deficiency because it may result in safety hazards or usability barriers.</p>
<b>Deficiency 1 – Electrical – Ground-Fault Circuit Interrupter (GFCI) or Arc-Fault Circuit Interrupter (AFCI) – Outlet or Breaker: Outside</b>	
<b>Deficiency</b>	GFCI outlet or GFCI breaker is not visibly damaged and the test or reset button is inoperable.
<b>Deficiency Criteria</b>	GFCI outlet or GFCI breaker does not have visible damage and the test or reset button is inoperable (i.e., overall system or component thereof is not meeting function or purpose).
<b>Health and Safety Determination</b>	Severe
<b>Correction Timeframe</b>	24 hours
<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If a GFCI outlet or GFCI breaker does not have visible damage and the test or reset button is inoperable, and a ground fault occurs, there may be an increased safety risk to the resident of electrical shock, which may result in injury.</p> <p>If a GFCI outlet or GFCI breaker does not have visible damage and the test or reset button is inoperable, then the resident may not be able to test or reset the GFCI outlet or GFCI breaker, which may result in limited use of devices.</p> <p>Property management would be expected to ensure that staff members understand how to identify a GFCI outlet or GFCI breaker that does not have visible damage and the test or reset button is inoperable. Management</p>

practices would be expected to assure prompt creation and prioritization of a work order to remedy this deficiency because it may result in safety hazards or usability barriers.

**Deficiency 2 – Electrical – Ground-Fault Circuit Interrupter (GFCI) or Arc-Fault Circuit Interrupter (AFCI) – Outlet or Breaker: Unit**

<b>Deficiency</b>	AFCI outlet or AFCI breaker is not visibly damaged and the test or reset button is inoperable.
<b>Deficiency Criteria</b>	AFCI outlet or AFCI breaker does not have visible damage and the test or reset button is inoperable (i.e., overall system or component thereof is not meeting function or purpose).
<b>Health and Safety Determination</b>	Severe
<b>Correction Timeframe</b>	24 hours
<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If an AFCI outlet or AFCI breaker does not have visible damage and the test or reset button is inoperable, and an arc fault occurs, there may be an increased safety risk to the resident of fire, which may result in injury.</p> <p>If an AFCI outlet or AFCI breaker does not have visible damage and the test or reset button is inoperable, then the resident may not be able to test or reset the AFCI outlet or AFCI breaker, which may result in limited use of devices.</p> <p>Property management would be expected to ensure that staff members understand how to identify an AFCI outlet or AFCI breaker that does not have visible damage and the test or reset button is inoperable.</p> <p>Management practices would be expected to assure prompt creation and prioritization of a work order to remedy this deficiency, because it may result in safety hazards or usability barriers.</p>

**Deficiency 2 – Electrical – Ground-Fault Circuit Interrupter (GFCI) or Arc-Fault Circuit Interrupter (AFCI) – Outlet or Breaker: Inside**

<b>Deficiency</b>	AFCI outlet or AFCI breaker is not visibly damaged and the test or reset button is inoperable.
<b>Deficiency Criteria</b>	AFCI outlet or AFCI breaker does not have visible damage and the test or reset button is inoperable (i.e., overall system or component thereof is not meeting function or purpose).

<b>Health and Safety Determination</b>	Severe
<b>Correction Timeframe</b>	24 hours
<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If an AFCI outlet or AFCI breaker does not have visible damage and the test or reset button is inoperable, and an arc fault occurs, there may be an increased safety risk to the resident of fire, which may result in injury.</p> <p>If an AFCI outlet or AFCI breaker does not have visible damage and the test or reset button is inoperable, then the resident may not be able to test or reset the AFCI outlet or AFCI breaker, which may result in limited use of devices.</p> <p>Property management would be expected to ensure that staff members understand how to identify an AFCI outlet or AFCI breaker that does not have visible damage and the test or reset button is inoperable.</p> <p>Management practices would be expected to assure prompt creation and prioritization of a work order to remedy this deficiency, because it may result in safety hazards or usability barriers.</p>
<b>Deficiency 2 – Electrical – Ground-Fault Circuit Interrupter (GFCI) or Arc-Fault Circuit Interrupter (AFCI) – Outlet or Breaker: Outside</b>	
<b>Deficiency</b>	AFCI outlet or AFCI breaker is not visibly damaged and the test or reset button is inoperable.
<b>Deficiency Criteria</b>	AFCI outlet or AFCI breaker does not have visible damage and the test or reset button is inoperable (i.e., overall system or component thereof is not meeting function or purpose).
<b>Health and Safety Determination</b>	Severe
<b>Correction Timeframe</b>	24 hours
<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	If an AFCI outlet or AFCI breaker does not have visible damage and the test or reset button is inoperable, and an arc fault occurs, there may be an increased safety risk to the resident of fire, which may result in injury.

If an AFCI outlet or AFCI breaker does not have visible damage and the test or reset button is inoperable, then the resident may not be able to test or reset the AFCI outlet or AFCI breaker, which may result in limited use of devices.

Property management would be expected to ensure that staff members understand how to identify an AFCI outlet or AFCI breaker that does not have visible damage and the test or reset button is inoperable.

Management practices would be expected to assure prompt creation and prioritization of a work order to remedy this deficiency, because it may result in safety hazards or usability barriers.

<b>Deficiency 3 – Electrical – Ground-Fault Circuit Interrupter (GFCI) or Arc-Fault Circuit Interrupter (AFCI) – Outlet or Breaker: Unit</b>		<b>Affirmative Habitability Requirement: Yes</b>
<b>Deficiency</b>	An unprotected outlet is present within six feet of a water source.	
<b>Deficiency Criteria</b>	Outlet is present within six feet of a water source (i.e., sink, bathtub, shower, water faucet, toilet) that is located in the same room.  AND  Outlet is not GFCI protected.	
<b>Health and Safety Determination</b>	Severe	
<b>Correction Timeframe</b>	24 hours	
<b>HCV Correction Timeframe</b>	30 days	
<b>HCV Pass/Fail</b>	Fail	
<b>Rationale</b>	<p>If a device is plugged into an unprotected outlet that is present within six feet of a water source within the same room, then there may be an increased safety risk to the resident of electrical shock, which may result in injury.</p> <p>Property management would be expected to ensure that staff members understand how to identify an unprotected outlet that is present within six feet of a water source that is located in the same room. Management practices would be expected to assure prompt creation and prioritization of a work order to remedy this deficiency because it may result in safety hazards.</p>	
<b>Deficiency 3 – Electrical – Ground-Fault Circuit Interrupter (GFCI) or Arc-Fault Circuit Interrupter (AFCI) – Outlet or Breaker: Inside</b>		<b>Affirmative Habitability Requirement: Yes</b>
<b>Deficiency</b>	An unprotected outlet is present within six feet of a water source.	

<b>Deficiency Criteria</b>	Outlet is present within six feet of a water source (i.e., sink, bathtub, shower, water faucet, toilet) that is located in the same room.  AND  Outlet is not GFCI protected.
<b>Health and Safety Determination</b>	Severe
<b>Correction Timeframe</b>	24 hours
<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If a device is plugged into an unprotected outlet that is present within six feet of a water source within the same room, then there may be an increased safety risk to the resident of electrical shock, which may result in injury.</p> <p>Property management would be expected to ensure that staff members understand how to identify an unprotected outlet that is present within six feet of a water source that is located in the same room. Management practices would be expected to assure prompt creation and prioritization of a work order to remedy this deficiency because it may result in safety hazards.</p>
<b>Deficiency 3 – Electrical – Ground-Fault Circuit Interrupter (GFCI) or Arc-Fault Circuit Interrupter (AFCI) – Outlet or Breaker: Outside</b>	
<b>Affirmative Habitability Requirement: Yes</b>	
<b>Deficiency</b>	An unprotected outlet is present within six feet of a water source.
<b>Deficiency Criteria</b>	Outlet is present throughout the Outside.  AND  Outlet is not GFCI protected.
<b>Health and Safety Determination</b>	Severe
<b>Correction Timeframe</b>	24 hours
<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	If a device is plugged into an unprotected outlet that is present within six feet of a water source, then there may be an increased safety risk to the resident of electrical shock, which may result in injury.

Property management would be expected to ensure that staff members understand how to identify an unprotected outlet that is present throughout the Outside area. Management practices would be expected to assure prompt creation and prioritization of a work order to remedy this deficiency because it may result in safety hazards.

**TABLE 17—ELECTRICAL – SERVICE PANEL STANDARD**

<b>Definition and Location</b>	
<b>Definition</b>	An enclosure, cabinet, box, or panelboard containing overcurrent protection devices for the control of light, heat, appliances and power circuits.
<b>Location</b>	<p>Unit: Living room, bedroom, kitchen, bathroom, closet, hallway, office, mechanical room, any wall surface, emergency generator, trash compactor, garage, and storage.</p> <p>Inside: Living room, kitchen, bathroom, closet, hallway, office, mechanical room, any wall surface, emergency generator, trash compactor, garage, storage, and all common areas.</p> <p>Outside: Anywhere on site, any wall surface, HVAC condensers, emergency generator, and trash compactor.</p>
<b>Deficiency 1 – Electrical – Service Panel: Unit</b>	
<b>Deficiency</b>	Electrical service panel is not readily accessible.
<b>Deficiency Criteria</b>	Electrical service panel is not reasonably accessible (i.e., cannot be reached and opened without moving obstructions, dismantling, destructive measures, or actions that may pose a risk to persons or property).
<b>Health and Safety Determination</b>	Moderate
<b>Correction Timeframe</b>	30 days
<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If the electrical service panel is not reasonably accessible and there is a need to shutoff the electrical circuit, there may be an increased safety risk to the resident of fire or electrical shock, which may result in injury.</p> <p>If the electrical service panel is not reasonably accessible, then the resident may not be able to reset a tripped breaker, which may result in limited use of appliances or lighting fixtures.</p>

Property management would be expected to ensure that staff members understand how to identify if an electrical service panel is not reasonably accessible. Management practices would be expected to assure prompt creation and prioritization of a work order to remedy this deficiency, because it may result in safety hazards or usability barriers.

#### **Deficiency 1 – Electrical – Service Panel: Inside**

<b>Deficiency</b>	Electrical service panel is not readily accessible.
<b>Deficiency Criteria</b>	Electrical service panel is not reasonably accessible (i.e., cannot be reached and opened without moving obstructions, dismantling, destructive measures, or actions that may pose a risk to persons or property).
<b>Health and Safety Determination</b>	Moderate
<b>Correction Timeframe</b>	30 days
<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If the electrical service panel is not reasonably accessible and there is a need to shutoff the electrical circuit, there may be an increased safety risk to the resident of fire or electrical shock, which may result in injury.</p> <p>If the electrical service panel is not reasonably accessible, then the resident may not be able to reset a tripped breaker, which may result in limited use of appliances or lighting fixtures.</p> <p>Property management would be expected to ensure that staff members understand how to identify if an electrical service panel is not reasonably accessible. Management practices would be expected to assure prompt creation and prioritization of a work order to remedy this deficiency, because it may result in safety hazards or usability barriers.</p>

#### **Deficiency 1 – Electrical – Service Panel: Outside**

<b>Deficiency</b>	Electrical service panel is not readily accessible.
<b>Deficiency Criteria</b>	Electrical service panel is not reasonably accessible (i.e., cannot be reached and opened without moving obstructions, dismantling, destructive measures, or actions that may pose a risk to persons or property).
<b>Health and Safety Determination</b>	Moderate
<b>Correction Timeframe</b>	30 days

<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If the electrical service panel is not reasonably accessible and there is a need to shutoff the electrical circuit, there may be an increased safety risk to the resident of fire or electrical shock, which may result in injury.</p> <p>If the electrical service panel is not reasonably accessible, then the resident may not be able to reset a tripped breaker, which may result in limited use of appliances or lighting fixtures.</p> <p>Property management would be expected to ensure that staff members understand how to identify if an electrical service panel is not reasonably accessible. Management practices would be expected to assure prompt creation and prioritization of a work order to remedy this deficiency, because it may result in safety hazards or usability barriers.</p>
<b>Deficiency 2 – Electrical – Service Panel: Unit</b>	
<b>Deficiency</b>	The overcurrent protection device is damaged.
<b>Deficiency Criteria</b>	The overcurrent protection device (i.e., fuse or breaker) is damaged (i.e., visibly defective; impacts functionality) such that it may not interrupt the circuit during an overcurrent condition.
<b>Health and Safety Determination</b>	Life-Threatening
<b>Correction Timeframe</b>	24 hours
<b>HCV Correction Timeframe</b>	24 hours
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If the overcurrent protection device is damaged, then it may malfunction and not provide overcurrent protection when required, resulting in an increased safety risk to the resident of fire or electrical shock, which may result in injury or death.</p> <p>If the overcurrent protection device is damaged, then the resident will not be able to safely reset or replace an overcurrent protection device, which may result in limited use of appliances or lighting fixtures.</p> <p>If the overcurrent protection device is damaged, and it malfunctions resulting in the resident's inability to use an appliance or lighting fixture, then the resident is likely to notice this issue and will report it to property management because it may present usability barriers. Property</p>

management should be expected to prioritize a work order to remedy this deficiency because it may result in safety hazards or usability barriers.

#### **Deficiency 2 – Electrical – Service Panel: Inside**

<b>Deficiency</b>	The overcurrent protection device is damaged.
<b>Deficiency Criteria</b>	The overcurrent protection device (i.e., fuse or breaker) is damaged (i.e., visibly defective; impacts functionality) such that it may not interrupt the circuit during an overcurrent condition.
<b>Health and Safety Determination</b>	Life-Threatening
<b>Correction Timeframe</b>	24 hours
<b>HCV Correction Timeframe</b>	24 hours
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If the overcurrent protection device is damaged, then it may malfunction and not provide overcurrent protection when required, resulting in an increased safety risk to the resident of fire or electrical shock, which may result in injury or death.</p> <p>If the overcurrent protection device is damaged, then the resident will not be able to safely reset or replace an overcurrent protection device, which may result in limited use of appliances or lighting fixtures.</p> <p>Property management would be expected to ensure that staff understand how to identify an overcurrent protections device that is damaged. Management practices would be expected to assure prompt creation and prioritization of a work order to remedy this deficiency, because it may result in safety hazards or usability barriers.</p>

#### **Deficiency 2 – Electrical – Service Panel: Outside**

<b>Deficiency</b>	The overcurrent protection device is damaged.
<b>Deficiency Criteria</b>	The overcurrent protection device (i.e., fuse or breaker) is damaged (i.e., visibly defective; impacts functionality) such that it may not interrupt the circuit during an overcurrent condition.
<b>Health and Safety Determination</b>	Life-Threatening
<b>Correction Timeframe</b>	24 hours
<b>HCV Correction Timeframe</b>	24 hours

<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If the overcurrent protection device is damaged, then it may malfunction and not provide overcurrent protection when required, resulting in an increased safety risk to the resident of fire or electrical shock, which may result in injury or death.</p> <p>If the overcurrent protection device is damaged, then the resident will not be able to safely reset or replace an overcurrent protection device, which may result in limited use of appliances or lighting fixtures.</p> <p>Property management would be expected to ensure that staff understand how to identify an overcurrent protections device that is damaged. Management practices would be expected to assure prompt creation and prioritization of a work order to remedy this deficiency, because it may result in safety hazards or usability barriers.</p>
<b>Deficiency 3 – Electrical – Service Panel: Unit</b>	
<b>Deficiency</b>	The overcurrent protection device is contaminated.
<b>Deficiency Criteria</b>	The overcurrent protection device (i.e., fuse or breaker) is contaminated (e.g., water, rust, corrosion).
<b>Health and Safety Determination</b>	Severe
<b>Correction Timeframe</b>	24 hours
<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If the overcurrent protection device is contaminated, then it may malfunction and not provide overcurrent protection when required, resulting in an increased safety risk to the resident of fire, which may result in injury.</p> <p>If the overcurrent protection device is contaminated, then the resident may not be able to safely reset or replace an overcurrent protection device, which may result in limited use of appliances or lighting fixtures.</p> <p>Property management would be expected to ensure that staff members understand how to identify a contaminated overcurrent protection device. Management practices would be expected to assure prompt creation and prioritization of a work order to remedy this deficiency, because it may result in safety hazards or usability barriers.</p>

**Deficiency 3 – Electrical – Service Panel: Inside**

<b>Deficiency</b>	The overcurrent protection device is contaminated.
<b>Deficiency Criteria</b>	The overcurrent protection device (i.e., fuse or breaker) is contaminated (e.g., water, rust, corrosion).
<b>Health and Safety Determination</b>	Severe
<b>Correction Timeframe</b>	24 hours
<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If the overcurrent protection device is contaminated, then it may malfunction and not provide overcurrent protection when required, resulting in an increased safety risk to the resident of fire, which may result in injury.</p> <p>If the overcurrent protection device is contaminated, then the resident may not be able to safely reset or replace an overcurrent protection device, which may result in limited use of appliances or lighting fixtures.</p> <p>Property management would be expected to ensure that staff members understand how to identify a contaminated overcurrent protection device. Management practices would be expected to assure prompt creation and prioritization of a work order to remedy this deficiency, because it may result in safety hazards or usability barriers.</p>

### **Deficiency 3 – Electrical – Service Panel: Outside**

<b>Deficiency</b>	The overcurrent protection device is contaminated.
<b>Deficiency Criteria</b>	The overcurrent protection device (i.e., fuse or breaker) is contaminated (e.g., water, rust, corrosion).
<b>Health and Safety Determination</b>	Severe
<b>Correction Timeframe</b>	24 hours
<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If the overcurrent protection device is contaminated, then it may malfunction and not provide overcurrent protection when required, resulting in an increased safety risk to the resident of fire, which may result in injury.</p>

If the overcurrent protection device is contaminated, then the resident may not be able to safely reset or replace an overcurrent protection device, which may result in limited use of appliances or lighting fixtures.

Property management would be expected to ensure that staff members understand how to identify a contaminated overcurrent protection device. Management practices would be expected to assure prompt creation and prioritization of a work order to remedy this deficiency, because it may result in safety hazards or usability barriers.

**TABLE 18—ELEVATOR STANDARD**

<b>Definition and Location</b>	
<b>Definition</b>	A vertical transport vehicle, generally powered by electric motors that either drive traction cables and counterweight systems or pump hydraulic fluid to raise a cylindrical piston.
<b>Location</b>	Inside: Hallway, building entrance or lobby, parking garage.
<b>Deficiency 1 – Elevator: Inside</b>	
<b>Deficiency</b>	Elevator is inoperable.
<b>Deficiency Criteria</b>	Elevator is inoperable (i.e., overall system or component thereof not meeting function or purpose; with or without visible damage).
<b>Health and Safety Determination</b>	Moderate
<b>Correction Timeframe</b>	30 days
<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If the elevator is inoperable, then the resident’s accessibility and egress or ingress is reduced. If the elevator is inoperable, then the resident may be trapped inside the elevator.</p> <p>If the elevator is inoperable, then the resident may be unable to use a feature that is expected to be provided and maintained as part of their rent.</p> <p>If the elevator is inoperable, then the resident will likely report this deficiency, and presence of this deficiency may indicate that complaint-based work orders are not being addressed.</p>

If the elevator is inoperable, then this will likely be identified through routine maintenance activities, and the presence of this deficiency may indicate that self-generated work orders are not being addressed.

If the elevator is inoperable, then capital costs may be required to repair the deficiency.

### Deficiency 2 – Elevator: Inside

<b>Deficiency</b>	Elevator door does not fully open and close.
<b>Deficiency Criteria</b>	Elevator door does not fully open and close.
<b>Health and Safety Determination</b>	Moderate
<b>Correction Timeframe</b>	30 days
<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If the elevator door does not fully open and close, the elevator may be inaccessible for individuals who use wheelchairs and there may be an increased safety risk to the resident due to fall hazards, which may result in injury.</p> <p>If the elevator door does not fully open and close, then the resident may be unable to use a feature that is expected to be provided and maintained as part of their rent.</p> <p>Property management would be expected to ensure that staff members understand how to identify when an elevator door does not fully open and close. Management practices would be expected to assure prompt creation and prioritization of a work order to repair the elevator door because it may result in safety hazards or usability barriers.</p> <p>Elevators should be checked during periodic property inspections, and according to industry best practices, should be included in a preventative maintenance plan. If the elevator door does not fully open and close, then it may indicate preventative maintenance activities could be improved.</p>

### Deficiency 3 – Elevator: Inside

<b>Deficiency</b>	Elevator cab is not level with the floor.
<b>Deficiency Criteria</b>	There is more than a ¼-inch difference in level between the elevator cab and the building's floor.
<b>Health and Safety Determination</b>	Moderate

<b>Correction Timeframe</b>	30 days
<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If the elevator cab is not level with the floor, then it may be inaccessible for individuals with mobility disabilities and there is a trip hazard for the resident.</p> <p>If the elevator cab is not level with the floor, then the resident will likely report this deficiency, and the presence of this deficiency may indicate that complaint-based work orders are not being addressed.</p> <p>If the elevator cab is not level with the floor, then this will likely be identified through routine maintenance activities, and the presence of this deficiency may indicate that self-generated work orders are not being addressed.</p> <p>Elevators should be checked during periodic property inspections, and according to industry best practices, should be included in a preventative maintenance plan. If the elevator cab is not level with the floor, this may indicate that preventative maintenance activities are not being addressed.</p>

#### **Deficiency 4 – Elevator: Inside**

<b>Deficiency</b>	Safety edge device has malfunctioned or is inoperable
<b>Deficiency Criteria</b>	Safety edge device has malfunctioned or is inoperable (i.e., overall system or component thereof is not meeting function or purpose; with or without visible damage).
<b>Health and Safety Determination</b>	Moderate
<b>Correction Timeframe</b>	30 days
<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If the safety edge device has malfunctioned or is inoperable, then the resident may be injured by the closing door.</p> <p>If the safety edge device has malfunctioned or is inoperable, then the resident may be unable to use a feature that is expected to be provided and maintained as part of their rent.</p> <p>Property management would be expected to ensure that staff members understand how to identify a safety edge device that has malfunctioned or</p>

is inoperable. Management practices would be expected to assure prompt creation and prioritization of a work order to remedy this deficiency because it may result in safety hazards.

Elevators should be checked during periodic property inspections, and according to industry best practices, should be included in a preventative maintenance plan. If the elevator safety edge device has malfunctioned or is inoperable, this may indicate that preventative maintenance activities are not being addressed.

**TABLE 19—EXIT SIGN STANDARD**

<b>Definition and Location</b>	
<b>Definition</b>	Device or placard that identifies the egress route in case of an emergency.
<b>Location</b>	Inside: Hallway; stairway; corridor. Outside: Hallway; stairway; corridor.
<b>Deficiency 1 – Exit Sign: Inside</b>	
<b>Deficiency</b>	Exit sign is damaged, missing, obstructed, or not adequately illuminated.
<b>Deficiency Criteria</b>	Exit sign is damaged (i.e., visibly defective; impacts functionality). OR Exit sign is missing (i.e., evidence of prior installation, but is now not present or is incomplete). OR Exit sign is obstructed such that the word “EXIT” is not clearly visible. OR Exit sign is not adequately illuminated.
<b>Health and Safety Determination</b>	Life-Threatening
<b>Correction Timeframe</b>	24 hours
<b>HCV Correction Timeframe</b>	24 hours
<b>HCV Pass/Fail</b>	Fail

<b>Rationale</b>	<p>If an exit sign is damaged, missing, obstructed, or not adequately illuminated, and there is an emergency, then the resident may be unable to safely and expeditiously exit.</p> <p>If an exit sign is damaged, missing, obstructed, or not adequately illuminated, and there is an emergency, then the resident may be unable to safely and expeditiously exit.</p> <p>Property management would be expected to ensure that staff understand how to identify an exit sign that is damaged, missing, obstructed, or not adequately illuminated. Management practices would be expected to assure prompt creation and prioritization of a work order to remedy this defect, because it may result in health or safety hazards.</p>
<b>Deficiency 1 – Exit Sign: Outside</b>	
<b>Deficiency</b>	Exit sign is damaged, missing, obstructed, or not adequately illuminated.
<b>Deficiency Criteria</b>	<p>Exit sign is damaged (i.e., visibly defective; impacts functionality).</p> <p>OR</p> <p>Exit sign is missing (i.e., evidence of prior installation, but is now not present or is incomplete).</p> <p>OR</p> <p>Exit sign is obstructed such that the word “EXIT” is not clearly visible.</p> <p>OR</p> <p>Exit sign is not adequately illuminated.</p>
<b>Health and Safety Determination</b>	Life-Threatening
<b>Correction Timeframe</b>	24 hours
<b>HCV Correction Timeframe</b>	24 hours
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If an exit sign is damaged, missing, obstructed, or not adequately illuminated, and there is an emergency, then the resident may be unable to safely and expeditiously exit.</p> <p>If an exit sign is damaged, missing, obstructed, or not adequately illuminated, and there is an emergency, then the resident may be unable to safely and expeditiously exit.</p> <p>Property management would be expected to ensure that staff understand how to identify an exit sign that is damaged, missing, obstructed, or not</p>

adequately illuminated. Management practices would be expected to assure prompt creation and prioritization of a work order to remedy this defect, because it may result in health or safety hazards.

**TABLE 20—FENCE AND GATE STANDARD**

<b>Definition and Location</b>	
<b>Definition</b>	Fence: A barrier, railing, or other upright structure to control access.  Gate: A moveable barrier that closes an opening in a wall or fence.
<b>Location</b>	Outside: Throughout the exterior, parking area
<b>Deficiency 1 – Fence – Security: Outside</b>	
<b>Deficiency</b>	Fence component is missing.
<b>Deficiency Criteria</b>	Fence component is missing (i.e., evidence of prior installation, but now not present or is incomplete), resulting in a hole that is approximately 20% or greater of the area of a single section of fence.
<b>Health and Safety Determination</b>	Moderate
<b>Correction Timeframe</b>	30 days
<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If a fence component is missing, and it falls, then the resident may be exposed to hazards.</p> <p>If a fence component is missing, then the resident may be unable to control access to the property.</p> <p>If a fence component is missing, then it may limit the privacy of the property.</p> <p>If a fence component is missing, then the resident may be unable to use a feature of the home that is expected to be provided and maintained as part of their rent.</p> <p>Property management would be expected to ensure that staff understand how to identify if a fence component is missing. Management practices would be expected to assure prompt creation and prioritization of a work order to remedy this defect, because it may result in safety or security hazards or usability barriers.</p>

**Deficiency 2 – Fence – Security: Outside**

<b>Deficiency</b>	Gate does not open, close, latch, or lock.
<b>Deficiency Criteria</b>	Gate will not open. OR Gate will open when locked or latched. OR Gate will not close.
<b>Health and Safety Determination</b>	Moderate
<b>Correction Timeframe</b>	30 days
<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If a gate does not open, and there is an emergency, then the resident may be limited in their ability to leave the property or this may delay entry by emergency personnel.</p> <p>If a gate does not close, latch, or lock, then the resident may be unable to control access to the property.</p> <p>If a gate does not open, close, latch, or lock, then the resident may not be able to fully use a feature that is expected to be provided and maintained as part of their rent.</p> <p>Property management would be expected to ensure that staff understand how to identify if a gate does not open, close, latch, or lock. Management practices would be expected to assure prompt creation and prioritization of a work order to remedy this defect, because it may result in safety or security hazards or usability barriers.</p>

**Deficiency 3 – Fence – Security: Outside**

<b>Deficiency</b>	Fence demonstrates signs of collapse.
<b>Deficiency Criteria</b>	Fence demonstrates signs of collapse.
<b>Health and Safety Determination</b>	Moderate
<b>Correction Timeframe</b>	30 days
<b>HCV Correction Timeframe</b>	30 days

<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If a fence demonstrates signs of collapse, then it may present a hazard to the resident.</p> <p>If a fence demonstrates signs of collapse, then the resident may not be able to control access to the property.</p> <p>If a fence demonstrates signs of collapse, then the resident may not be able to fully use a feature that is expected to be included and maintained as part of their rent.</p> <p>Property management would be expected to ensure that staff understand how to identify if a fence demonstrates signs of collapse. Management practices would be expected to assure prompt creation and prioritization of a work order to remedy this defect, because it may result in safety or security hazards or usability barriers.</p>

**TABLE 21—FIRE ESCAPE STANDARD**

<b>Definition and Location</b>	
<b>Definition</b>	An apparatus on the outside of a building used for escaping from a building on fire.
<b>Location</b>	Outside: Exterior of building—typically high-rises and other multi-story buildings—near windows and exterior doors.
<b>Deficiency 1 – Fire Escape: Outside</b>	
<b>Deficiency</b>	Fire escape component is damaged or missing.
<b>Deficiency Criteria</b>	<p>Any stair, ladder, platform, guardrail, or handrail is damaged (i.e., visibly defective; impacts functionality).</p> <p>OR</p> <p>Any stair, ladder, platform, guardrail, or handrail is missing (i.e., evidence of prior installation, but now not present or is incomplete).</p>
<b>Health and Safety Determination</b>	Life-Threatening
<b>Correction Timeframe</b>	24 hours
<b>HCV Correction Timeframe</b>	24 hours
<b>HCV Pass/Fail</b>	Fail

**Rationale**

If a fire escape component is damaged or missing, and there is an emergency, then resident may sustain an injury when using.

If a fire escape component is damaged or missing, and there is an emergency, then the resident’s ability to safely egress the building is limited, which may jeopardize their safety.

If a fire escape component is damaged or missing, then the resident may be unable to fully use a feature that is expected to be provided and maintained as part of their rent.

If a fire escape component is damaged or missing, then it should be detected through daily maintenance activities and its presence may indicate that self-generated work orders are not being addressed.

If a fire escape component is damaged or missing, then property management may not be following their preventative maintenance plan.

If a fire escape component is damaged or missing, then it may be very expensive to replace or fix the defect.

**TABLE 22—FIRE EXTINGUISHER STANDARD**

<b>Definition and Location</b>	
<b>Definition</b>	A portable fire safety device that discharges a jet of water, foam, gas, or other material to extinguish a fire.
<b>Location</b>	Unit: Includes, but is not limited to: hallways, kitchens, laundry rooms, mechanical rooms.  Inside: Includes, but is not limited to: hallways, kitchens, laundry rooms, common areas, mechanical rooms.  Outside: Parking garages, breezeways, property exterior, roof tops.
<b>Deficiency 1 – Fire Extinguisher: Unit</b>	
<b>Deficiency</b>	Fire extinguisher pressure gauge reads over or under-charged.
<b>Deficiency Criteria</b>	Pressure gauge indicates that the fire extinguisher is over or under-charged.
<b>Health and Safety Determination</b>	Life-Threatening
<b>Correction Timeframe</b>	24 hours
<b>HCV Correction Timeframe</b>	24 hours
<b>HCV Pass/Fail</b>	Fail

**Rationale**

If a fire extinguisher pressure gauge reads over or under-charged, and there is a fire, then the resident may be injured.

If a fire extinguisher pressure gauge reads over or under-charged, then the resident may be unable to use a feature that is expected to be provided and maintained as part of their rent.

If a fire extinguisher pressure gauge reads over or under-charged, then this should be identified through routine maintenance, and the presence of this deficiency may indicate that self-generated work orders are not being addressed.

If a fire extinguisher pressure gauge reads over or under-charged, then it may indicate that preventative maintenance activities are not occurring.

**Deficiency 1 – Fire Extinguisher: Inside**

<b>Deficiency</b>	Fire extinguisher pressure gauge reads over or under-charged.
<b>Deficiency Criteria</b>	Pressure gauge indicates that the fire extinguisher is over or under-charged.
<b>Health and Safety Determination</b>	Life-Threatening
<b>Correction Timeframe</b>	24 hours
<b>HCV Correction Timeframe</b>	24 hours
<b>HCV Pass/Fail</b>	Fail

**Rationale**

If a fire extinguisher pressure gauge reads over or under-charged, and there is a fire, then the resident may be injured.

If a fire extinguisher pressure gauge reads over or under-charged, then the resident may be unable to use a feature that is expected to be provided and maintained as part of their rent.

If a fire extinguisher pressure gauge reads over or under-charged, then this should be identified through routine maintenance and the presence of this deficiency may indicate that self-generated work orders are not being addressed.

If a fire extinguisher pressure gauge reads over or under-charged, then it may indicate that preventative maintenance activities are not occurring.

**Deficiency 1 – Fire Extinguisher: Outside**

<b>Deficiency</b>	Fire extinguisher pressure gauge reads over or under-charged.
<b>Deficiency Criteria</b>	Pressure gauge indicates that the fire extinguisher is over or under-charged.

<b>Health and Safety Determination</b>	Life-Threatening
<b>Correction Timeframe</b>	24 hours
<b>HCV Correction Timeframe</b>	24 hours
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If a fire extinguisher pressure gauge reads over or under-charged, and there is a fire, then the resident may be injured.</p> <p>If a fire extinguisher pressure gauge reads over or under-charged, then the resident may be unable to use a feature that is expected to be provided and maintained as part of their rent.</p> <p>If a fire extinguisher pressure gauge reads over or under-charged, then this should be identified through routine maintenance and the presence of this deficiency may indicate that self-generated work orders are not being addressed.</p> <p>If a fire extinguisher pressure gauge reads over or under-charged, then it may indicate that preventative maintenance activities are not occurring.</p>

#### **Deficiency 2 – Fire Extinguisher: Unit**

<b>Deficiency</b>	Fire extinguisher service tag is missing, illegible, or expired.
<b>Deficiency Criteria</b>	<p>The date on the service tag of any fire extinguisher has exceeded one year.</p> <p>OR</p> <p>The fire extinguisher tag is missing or illegible.</p> <p>OR</p> <p>A nonchargeable or disposable fire extinguisher is more than 12 years old (based on manufacture date).</p>
<b>Health and Safety Determination</b>	Life-Threatening
<b>Correction Timeframe</b>	24 hours
<b>HCV Correction Timeframe</b>	24 hours
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	If a fire extinguisher service tag is missing, illegible, or expired, and there is a fire, then it may not function and result in the resident being unable to extinguish the fire.

If a fire extinguisher service tag is missing, illegible, or expired, then the resident may be unable to use a feature that is expected to be provided and maintained as part of their rent.

If a fire extinguisher service tag is missing, illegible, or expired, then this should be identified through routine maintenance, and the presence of this deficiency may indicate that self-generated work orders are not being addressed.

If a fire extinguisher service tag is missing, illegible, or expired, then it may indicate that preventative maintenance activities are not occurring.

#### Deficiency 2 – Fire Extinguisher: Inside

<b>Deficiency</b>	Fire extinguisher service tag is missing, illegible, or expired.
<b>Deficiency Criteria</b>	The date on the service tag of any fire extinguisher has exceeded one year.  OR  The fire extinguisher tag is missing or illegible.  OR  A nonchargeable or disposable fire extinguisher is more than 12 years old (based on manufacture date).
<b>Health and Safety Determination</b>	Life-Threatening
<b>Correction Timeframe</b>	24 hours
<b>HCV Correction Timeframe</b>	24 hours
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If a fire extinguisher service tag is missing, illegible, or expired, and there is a fire, then it may not function and result in the resident being unable to extinguish the fire.</p> <p>If a fire extinguisher service tag is missing, illegible, or expired, then the resident may be unable to use a feature that is expected to be provided and maintained as part of their rent.</p> <p>If a fire extinguisher service tag is missing, illegible, or expired, then this should be identified through routine maintenance, and the presence of this deficiency may indicate that self-generated work orders are not being addressed.</p> <p>If a fire extinguisher service tag is missing, illegible, or expired, then it may indicate that preventative maintenance activities are not occurring.</p>

**Deficiency 2 – Fire Extinguisher: Outside**

<b>Deficiency</b>	Fire extinguisher service tag is missing, illegible, or expired.
<b>Deficiency Criteria</b>	The date on the service tag of any fire extinguisher has exceeded one year. OR The fire extinguisher tag is missing or illegible. OR A nonchargeable or disposable fire extinguisher is more than 12 years old (based on manufacture date).
<b>Health and Safety Determination</b>	Life-Threatening
<b>Correction Timeframe</b>	24 hours
<b>HCV Correction Timeframe</b>	24 hours
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If a fire extinguisher service tag is missing, illegible, or expired, and there is a fire, then it may not function and result in the resident being unable to extinguish the fire.</p> <p>If a fire extinguisher service tag is missing, illegible, or expired, then the resident may be unable to use a feature that is expected to be provided and maintained as part of their rent.</p> <p>If a fire extinguisher service tag is missing, illegible, or expired, then this should be identified through routine maintenance, and the presence of this deficiency may indicate that self-generated work orders are not being addressed.</p> <p>If a fire extinguisher service tag is missing, illegible, or expired, then it may indicate that preventative maintenance activities are not occurring.</p>

**Deficiency 3 – Fire Extinguisher: Unit**

<b>Deficiency</b>	Fire extinguisher is damaged or missing.
<b>Deficiency Criteria</b>	Fire extinguisher is damaged (i.e., visibly defective; impacts functionality). OR Fire extinguisher is missing (i.e., evidence of prior installation, but now not present or is incomplete).
<b>Health and Safety Determination</b>	Life-Threatening

<b>Correction Timeframe</b>	24 hours
<b>HCV Correction Timeframe</b>	24 hours
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If a fire extinguisher is damaged or missing and there is a fire, then there may be an increased safety risk to the resident of fire-related injury, such as burns or smoke inhalation.</p> <p>If a fire extinguisher is damaged or missing, then the resident may not be able to use the fire extinguisher in the event of a fire.</p> <p>A resident is likely to notice if a fire extinguisher is damaged or missing and to recognize it is important enough to report to property management because it may present safety hazards. Property management should be expected to prioritize a work order to remedy this defect because it may result in safety hazards.</p>

### Deficiency 3 – Fire Extinguisher: Inside

<b>Deficiency</b>	Fire extinguisher is damaged or missing.
<b>Deficiency Criteria</b>	<p>Fire extinguisher is damaged (i.e., visibly defective; impacts functionality).</p> <p>OR</p> <p>Fire extinguisher is missing (i.e., evidence of prior installation, but now not present or is incomplete).</p>
<b>Health and Safety Determination</b>	Life-Threatening
<b>Correction Timeframe</b>	24 hours
<b>HCV Correction Timeframe</b>	24 hours
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If a fire extinguisher is damaged or missing and there is a fire, then there may be an increased safety risk to the resident of fire-related injury, such as burns or smoke inhalation.</p> <p>If a fire extinguisher is damaged or missing, then the resident may not be able to use the fire extinguisher in the event of a fire.</p> <p>Property management would be expected to ensure that staff understand how to identify if a fire extinguisher is damaged or missing. Management practices would be expected to assure prompt creation and prioritization of</p>

a work order to remedy this defect, because it may result in safety hazards or usability barriers.

<b>Deficiency 3 – Fire Extinguisher: Outside</b>	
<b>Deficiency</b>	Fire extinguisher is damaged or missing.
<b>Deficiency Criteria</b>	Fire extinguisher is damaged (i.e., visibly defective; impacts functionality).  OR  Fire extinguisher is missing (i.e., evidence of prior installation, but now not present or is incomplete).
<b>Health and Safety Determination</b>	Life-Threatening
<b>Correction Timeframe</b>	24 hours
<b>HCV Correction Timeframe</b>	24 hours
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If a fire extinguisher is damaged or missing and there is a fire, then there may be an increased safety risk to the resident of fire-related injury, such as burns or smoke inhalation.</p> <p>If a fire extinguisher is damaged or missing, then the resident may not be able to use the fire extinguisher in the event of a fire.</p> <p>Property management would be expected to ensure that staff understand how to identify if a fire extinguisher is damaged or missing. Management practices would be expected to assure prompt creation and prioritization of a work order to remedy this defect, because it may result in safety hazards or usability barriers.</p>

**TABLE 23—FLAMMABLE AND COMBUSTIBLE ITEM STANDARD**

<b>Definition and Location</b>	
<b>Definition</b>	A combustible material is any material that, in the form in which it is used and under the conditions anticipated, will ignite and burn or will add appreciable heat to an ambient fire.
<b>Location</b>	<p>Unit: Within Unit, near water heater, furnace, stove, oven, fireplace, garage, attic, basement.</p> <p>Inside: Near water heater, near furnace, stove, oven, fireplace, garage, attic, basement.</p>

---

Outside: Outside of Unit, yard.

---

**Deficiency 1 – Flammable and Combustible Item: Unit**

**Deficiency** Flammable or combustible item is on or within 3 feet of an appliance that provides heat for thermal comfort or a fuel-burning water heater.

OR

Improperly stored chemicals.

---

**Deficiency Criteria** Flammable or combustible item is on or within 3 feet of an appliance that provides heat for thermal comfort or a fuel-burning water heater.

OR

Improperly stored chemicals.

---

**Health and Safety Determination** Life-Threatening

---

**Correction Timeframe** 24 hours

---

**HCV Correction Timeframe** 24 hours

---

**HCV Pass/Fail** Fail

---

**Rationale** If a flammable or combustible item is on or within 3 feet of an appliance that provides heat for thermal comfort or a fuel-burning water heater or there are improperly stored chemicals, then there may be an increased safety risk to the resident due to fire or explosion.

Property management would be expected to ensure that staff members understand how to identify a flammable or combustible item that is on or within 3 feet of an appliance that provides heat for thermal comfort or a fuel-burning water heater or there are improperly stored chemicals. Management practices would be expected to assure prompt creation and prioritization of a work order to remedy this deficiency because it may result in safety hazards.

---

**Deficiency 1 – Flammable and Combustible Item: Inside**

**Deficiency** Flammable or combustible item is on or within 3 feet of an appliance that provides heat for thermal comfort or a fuel-burning water heater.

OR

Improperly stored chemicals.

---

**Deficiency Criteria** Flammable or combustible item is on or within 3 feet of an appliance that provides heat for thermal comfort or a fuel-burning water heater.

OR

---

	Improperly stored chemicals.
<b>Health and Safety Determination</b>	Life-Threatening
<b>Correction Timeframe</b>	24 hours
<b>HCV Correction Timeframe</b>	24 hours
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If a flammable or combustible item is on or within 3 feet of an appliance that provides heat for thermal comfort or a fuel-burning water heater or there are improperly stored chemicals, then there may be an increased safety risk to the resident due to fire or explosion.</p> <p>Property management would be expected to ensure that staff members understand how to identify a flammable or combustible item that is on or within 3 feet of an appliance that provides heat for thermal comfort or a fuel-burning water heater or there are improperly stored chemicals. Management practices would be expected to assure prompt creation and prioritization of a work order to remedy this deficiency because it may result in safety hazards.</p>
<b>Deficiency 1 – Flammable and Combustible Item: Outside</b>	
<b>Deficiency</b>	<p>Flammable or combustible item is on or within 3 feet of an appliance that provides heat for thermal comfort or a fuel-burning water heater.</p> <p>OR</p> <p>Improperly stored chemicals.</p>
<b>Deficiency Criteria</b>	<p>Flammable or combustible item is on or within 3 feet of an appliance that provides heat for thermal comfort or a fuel-burning water heater.</p> <p>OR</p> <p>Improperly stored chemicals.</p>
<b>Health and Safety Determination</b>	Life-Threatening
<b>Correction Timeframe</b>	24 hours
<b>HCV Correction Timeframe</b>	24 hours
<b>HCV Pass/Fail</b>	Fail

<b>Rationale</b>	<p>If a flammable or combustible item is on or within 3 feet of an appliance that provides heat for thermal comfort or a fuel-burning water heater or there are improperly stored chemicals, then there may be an increased safety risk to the resident due to fire or explosion.</p> <p>Property management would be expected to ensure that staff members understand how to identify a flammable or combustible item that is on or within 3 feet of an appliance that provides heat for thermal comfort or a fuel-burning water heater or there are improperly stored chemicals. Management practices would be expected to assure prompt creation and prioritization of a work order to remedy this deficiency because it may result in safety hazards.</p>
------------------	---

**TABLE 24—FLOOR STANDARD**

<b>Definition and Location</b>	
<b>Definition</b>	Lower surface of a room.
<b>Location</b>	<p>Unit: Dining room, living room, kitchen, bathroom, bedroom, closet, hallway, or other unit spaces.</p> <p>Inside: Dining room, living room, kitchen, bathroom, closet, hallway, or other common spaces.</p>
<b>Deficiency 1 – Floor: Unit</b>	
<b>Deficiency</b>	Floor substrate is exposed.
<b>Deficiency Criteria</b>	10% or more of the floor substrate area is exposed in any room.
<b>Health and Safety Determination</b>	Moderate
<b>Correction Timeframe</b>	30 days
<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If 10% or more of the floor substrate area is exposed in any room, then it is not a cleanable surface and could harbor pathogens, mold, mildew, dust, or allergens, thereby impacting the resident’s physical health.</p> <p>If 10% or more of the floor substrate area is exposed in any room, then the resident may be injured by splinters or trip hazards.</p> <p>If 10% or more of the floor substrate area is exposed in any room, then it is not a cleanable covering and could harbor mold, mildew, dust, or allergens.</p>

If 10% or more of the floor substrate area is exposed in any room, then the resident may be unable to fully use a feature of their home that is expected to be provided and maintained as part of their rent.

If 10% or more of the floor substrate area is exposed in any room, then the resident will likely report this deficiency and its presence may indicate that complaint-based work orders are not being addressed.

If 10% or more of the floor substrate area is exposed in any room, then this will likely be observed during routine maintenance activities and may indicate that self-generated work orders are not being addressed.

If 10% or more of the floor substrate area is exposed in any room, and it is occurring across a significant portion of the property, then it may result in a capital cost expenditure to repair the deficiency.

#### **Deficiency 1 – Floor: Inside**

<b>Deficiency</b>	Floor substrate is exposed.
<b>Deficiency Criteria</b>	10% or more of the floor substrate area is exposed in any room.
<b>Health and Safety Determination</b>	Moderate
<b>Correction Timeframe</b>	30 days
<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If 10% or more of the floor substrate area is exposed in any room, then it is not a cleanable surface and could harbor pathogens, mold, mildew, dust, or allergens, thereby impacting the resident’s physical health.</p> <p>If 10% or more of the floor substrate area is exposed in any room, then the resident may be injured via splinters or trip hazards.</p> <p>If 10% or more of the floor substrate area is exposed in any room, then it is not a cleanable covering and could harbor mold, mildew, dust, or allergens.</p> <p>If 10% or more of the floor substrate area is exposed in any room, then the resident may be unable to fully use a feature of their home that is expected to be provided and maintained as part of their rent.</p> <p>If 10% or more of the floor substrate area is exposed in any room, then the resident will likely report this deficiency and its presence may indicate that complaint-based work orders are not being addressed.</p>

If 10% or more of the floor substrate area is exposed in any room, then this will likely be observed during routine maintenance activities and may indicate that self-generated work orders are not being addressed.

If 10% or more of the floor substrate area is exposed in any room, and it is occurring across a significant portion of the property, then it may result in a capital cost expenditure to repair the deficiency.

#### Deficiency 2 – Floor: Unit

<b>Deficiency</b>	Floor component(s) is not functionally adequate.
<b>Deficiency Criteria</b>	Floor component(s) is not functionally adequate (i.e., does not allow floor to separate levels or to be walked on).
<b>Health and Safety Determination</b>	Moderate
<b>Correction Timeframe</b>	30 days
<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If the floor component(s) is not functionally adequate, and there is wood rot, then the resident may be exposed to health hazards.</p> <p>If the floor component(s) is not functionally adequate, and there are uneven surfaces, then there may be an increased safety risk to the resident due to trip hazards.</p> <p>A resident is likely to notice if a floor component(s) is not functionally adequate and to recognize it is important enough to report it to property management because it may present health and safety hazards. Property management should be expected to prioritize a work order to remedy this deficiency because it may result in health and safety hazards.</p>

#### Deficiency 2 – Floor: Inside

<b>Deficiency</b>	Floor component(s) is not functionally adequate.
<b>Deficiency Criteria</b>	Floor component(s) is not functionally adequate (i.e., does not allow floor to separate levels or to be walked on).
<b>Health and Safety Determination</b>	Moderate
<b>Correction Timeframe</b>	30 days
<b>HCV Correction Timeframe</b>	30 days

<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If the floor component(s) is not functionally adequate, and there is wood rot, then the resident may be exposed to health hazards.</p> <p>If the floor component(s) is not functionally adequate, and there are uneven surfaces, then there may be an increased safety risk to the resident due to trip hazards.</p> <p>Property management would be expected to ensure that staff members understand how to identify if a floor component(s) is not functionally adequate. Management practices would be expected to assure prompt creation and prioritization of a work order to remedy this deficiency because it may result in health and safety hazards.</p>

**TABLE 25—FOOD PREPARATION AREA STANDARD**

<b>Definition and Location</b>	
<b>Definition</b>	Flat surfaces designed, arranged, intended, or used for cooking or otherwise making food ready for consumption.
<b>Location</b>	Unit: Kitchen or food preparation space.  Inside: Kitchen or food preparation space.
<b>Deficiency 1 – Food Preparation Area: Unit</b>	
	<b>Affirmative Habitability Requirement: Yes</b>
<b>Deficiency</b>	Food preparation area is not present.
<b>Deficiency Criteria</b>	Food preparation area is not present.
<b>Health and Safety Determination</b>	Moderate
<b>Correction Timeframe</b>	30 days
<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If a food preparation area is not present, then the resident's ability to prepare food safely and in a sanitary manner may be limited.</p> <p>If a food preparation area is not present, then the resident is unable to use a feature of the home that is expected to be provided and maintained as part of their rent and may not be able to safely prepare food.</p> <p>A resident is likely to notice if a food preparation area is not present and to recognize it is important enough to report to property management</p>

because it may present sanitation hazards and usability barriers. Property management should be expected to prioritize a work order to remedy this defect because it may result in sanitation hazards or usability barriers.

#### **Deficiency 2 – Food Preparation Area: Unit**

<b>Deficiency</b>	Food preparation area is damaged or is not functionally adequate.
<b>Deficiency Criteria</b>	Exposed substrate surface comprises at least 10% or more of the total food preparation area.  OR  The food preparation area is not functionally adequate (i.e., does not reasonably allow for adequate preparation of food).
<b>Health and Safety Determination</b>	Moderate
<b>Correction Timeframe</b>	30 days
<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If the food preparation area has exposed substrate or is not functionally adequate, then the resident's ability to prepare food safely and in a sanitary manner may be impacted.</p> <p>If the food preparation area has exposed substrate or is not functionally adequate, then the resident may be unable to use a feature that is expected to be provided and maintained as part of their rent.</p> <p>A resident is likely to notice if the food preparation area has exposed substrate or is not functionally adequate and to recognize it is important enough to report to property management because it may present sanitation hazards or usability barriers. Property management should be expected to prioritize a work order to remedy this defect because it may result in sanitation hazards or usability barriers.</p>

#### **Deficiency 2 – Food Preparation Area: Inside**

<b>Deficiency</b>	Food preparation area is damaged or is not functionally adequate.
<b>Deficiency Criteria</b>	Exposed substrate surface comprises at least 10% or more of the total food preparation area.  OR  The food preparation area is not functionally adequate (i.e., does not reasonably allow for adequate preparation of food).

<b>Health and Safety Determination</b>	Moderate
<b>Correction Timeframe</b>	30 days
<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If the food preparation area has exposed substrate or is not functionally adequate, then the resident's ability to prepare food safely and in a sanitary manner may be impacted.</p> <p>If the food preparation area has exposed substrate or is not functionally adequate, then the resident may be unable to use a feature that is expected to be provided and maintained as part of their rent.</p> <p>Property management would be expected to ensure that staff members understand how to identify if a food preparation area has exposed substrate or is not functionally adequate. Management practices would be expected to assure prompt creation and prioritization of a work order to remedy this deficiency because it may result in sanitary hazards or usability barriers.</p>

**TABLE 26—FOUNDATION STANDARD**

<b>Definition and Location</b>	
<b>Definition</b>	Lowest load-bearing part of a building.
<b>Location</b>	<p>Unit: Basement; floor; wall; ceiling.</p> <p>Inside: Basement; floor; wall; ceiling.</p> <p>Outside: Exterior of property.</p>
<b>Deficiency 1 – Foundation: Unit</b>	
<b>Deficiency</b>	Foundation is cracked.
<b>Deficiency Criteria</b>	Crack is present with a width of ¼-inch or greater and a length of 12 inches or greater.
<b>Health and Safety Determination</b>	Moderate
<b>Correction Timeframe</b>	30 days
<b>HCV Correction Timeframe</b>	30 days

<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If the foundation is cracked, then the structure could be compromised, resulting in potential health hazards to the resident.</p> <p>If the foundation is cracked, then the structure could be compromised, resulting in potential safety hazards to the resident.</p> <p>If the foundation is cracked, then the thermal envelope could be broken, resulting in the home being less energy efficient.</p> <p>It is reasonable to expect the resident to report issues that are characteristics of foundation damage, such as windows and doors not opening or closing.</p> <p>Depending on the extent of the damage, the cost may be significant enough to be a capital cost to repair.</p> <p>A cracked foundation may indicate a potential structural failure.</p>

#### Deficiency 1 – Foundation: Inside

<b>Deficiency</b>	Foundation is cracked.
<b>Deficiency Criteria</b>	Crack is present with a width of ¼-inch or greater and a length of 12 inches or greater.
<b>Health and Safety Determination</b>	Moderate
<b>Correction Timeframe</b>	30 days
<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If the foundation is cracked, then the structure could be compromised, resulting in potential health hazards to the resident.</p> <p>If the foundation is cracked, then the structure could be compromised, resulting in potential safety hazards to the resident.</p> <p>It is reasonable to expect the resident to report issues that are characteristics of foundation damage, such as windows and doors not opening or closing.</p> <p>Depending on the extent of the damage, the cost may be significant enough to be a capital cost to repair.</p> <p>If the foundation is cracked, then the thermal envelope could be broken, resulting in the property being less energy efficient.</p>

A cracked foundation may indicate a potential structural failure.

#### Deficiency 1 – Foundation: Outside

<b>Deficiency</b>	Foundation is cracked.
<b>Deficiency Criteria</b>	Crack is present with a width of ¼-inch or greater and a length of 12 inches or greater.
<b>Health and Safety Determination</b>	Moderate
<b>Correction Timeframe</b>	30 days
<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If the foundation is cracked, then the structure could be compromised, resulting in potential health hazards to the resident.</p> <p>If the foundation is cracked, then the structure could be compromised, resulting in potential safety hazards to the resident.</p> <p>It is reasonable to expect facilities management to recognize issues that are characteristics of foundation damage, such as windows and doors not opening or closing.</p> <p>Depending on the extent of the damage, the cost may be significant enough to be a capital cost to repair.</p> <p>If the foundation is cracked, then the thermal envelope could be broken, resulting in the home being less energy efficient.</p> <p>A cracked foundation may indicate a potential structural failure.</p>

#### Deficiency 2 – Foundation: Outside

<b>Deficiency</b>	Foundation vent cover is missing or damaged.
<b>Deficiency Criteria</b>	Foundation vent cover is missing (i.e., evidence of prior installation, but now not present or is incomplete) or damaged (i.e., visibly defective; impacts functionality).
<b>Health and Safety Determination</b>	Moderate
<b>Correction Timeframe</b>	30 days
<b>HCV Correction Timeframe</b>	30 days

<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If a foundation vent cover is missing or damaged, then insects or vermin may penetrate the dwelling and damage building components (e.g., electrical, insulation), which may result in an increased safety risk to the resident of injury, such as electrocution.</p> <p>If a foundation vent cover is missing or damaged, then the resident's ability to control access may be limited, which may present a security risk.</p>
<b>Deficiency 3 – Foundation: Unit</b>	
<b>Deficiency</b>	Foundation has exposed rebar or foundation is spalling, flaking, or chipping.
<b>Deficiency Criteria</b>	<p>The structure has any exposed rebar.</p> <p>OR</p> <p>Foundation is spalling, flaking, or chipping, and the affected area is 12x12 inches or greater and goes into the foundation at a depth of ¾-inch or greater.</p>
<b>Health and Safety Determination</b>	Moderate
<b>Correction Timeframe</b>	30 days
<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If the foundation has exposed rebar or is spalling, flaking, or chipping, then it may be a cut hazard to residents.</p> <p>If the foundation has exposed rebar or is spalling, flaking, or chipping, this should be detected through regular maintenance activities, and the presence of this deficiency may indicate that self-generated work orders are not being addressed.</p> <p>If the foundation has exposed rebar or is spalling, flaking, or chipping, there may be a structural defect.</p>
<b>Deficiency 3 – Foundation: Inside</b>	
<b>Deficiency</b>	Foundation has exposed rebar or foundation is spalling, flaking, or chipping.
<b>Deficiency Criteria</b>	<p>The structure has any exposed rebar.</p> <p>OR</p>

	Foundation is spalling, flaking, or chipping, and the affected area is 12x12 inches or greater and goes into the foundation at a depth of ¾-inch or greater.
<b>Health and Safety Determination</b>	Moderate
<b>Correction Timeframe</b>	30 days
<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If the foundation has exposed rebar or is spalling, flaking, or chipping, then it may be a cut hazard to residents.</p> <p>If the foundation has exposed rebar or is spalling, flaking, or chipping, this should be detected through regular maintenance activities, and the presence of this deficiency may indicate that self-generated work orders are not being addressed.</p> <p>If the foundation has exposed rebar or is spalling, flaking, or chipping, there may be a structural defect.</p>

### Deficiency 3 – Foundation: Outside

<b>Deficiency</b>	Foundation has exposed rebar or foundation is spalling, flaking, or chipping.
<b>Deficiency Criteria</b>	<p>The structure has any exposed rebar.</p> <p>OR</p> <p>Foundation is spalling, flaking, or chipping, and the affected area is 12x12 inches or greater and goes into the foundation at a depth of ¾-inch or greater.</p>
<b>Health and Safety Determination</b>	Moderate
<b>Correction Timeframe</b>	30 days
<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If the foundation has exposed rebar or is spalling, flaking, or chipping, then it may be a cut hazard to residents.</p> <p>If the foundation has exposed rebar or is spalling, flaking, or chipping, this should be detected through regular maintenance activities, and the</p>

presence of this deficiency may indicate that self-generated work orders are not being addressed.

If the foundation has exposed rebar or is spalling, flaking, or chipping, there may be a structural defect.

#### Deficiency 4 – Foundation: Unit

<b>Deficiency</b>	Foundation is infiltrated by water.
<b>Deficiency Criteria</b>	Evidence of water infiltration through the foundation.
<b>Health and Safety Determination</b>	Moderate
<b>Correction Timeframe</b>	30 days
<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If the foundation is infiltrated by water, then there is an increased of risk of mold exposure, which could negatively impact air quality.</p> <p>If the foundation is infiltrated by water, then the resident may be exposed to an unsanitary environment.</p> <p>If the foundation is infiltrated by water, then the resident may be unable to fully use a feature (i.e., sealed foundation) that is expected to be provided and maintained as part of their rent.</p> <p>If the foundation is infiltrated by water, then the resident will likely report this deficiency, and the presence of this deficiency may indicate a lack of corrective maintenance.</p> <p>If the foundation is infiltrated by water, then this should be identified through routine maintenance and the presence of this deficiency may indicate self-generated work orders are not being addressed.</p> <p>If the foundation is infiltrated by water, then it may cause the structure to deteriorate.</p>

#### Deficiency 4 – Foundation: Inside

<b>Deficiency</b>	Foundation is infiltrated by water.
<b>Deficiency Criteria</b>	Evidence of water infiltration through the foundation.
<b>Health and Safety Determination</b>	Moderate
<b>Correction Timeframe</b>	30 days

<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If the foundation is infiltrated by water, then there is an increased of risk of mold exposure which could negatively impact air quality.</p> <p>If the foundation is infiltrated by water, then the resident may be exposed to an unsanitary environment.</p> <p>If the foundation is infiltrated by water, then the resident may be unable to fully use a feature (i.e., sealed foundation) that is expected to be provided and maintained as part of their rent.</p> <p>If the foundation is infiltrated by water, then the resident will likely report this deficiency, and the presence of this deficiency may indicate a lack of corrective maintenance.</p> <p>If the foundation is infiltrated by water, then this should be identified through routine maintenance, and the presence of this deficiency may indicate self-generated work orders are not being addressed.</p> <p>If the foundation is infiltrated by water, then it may cause the structure to deteriorate.</p>

#### **Deficiency 5 – Foundation: Unit**

<b>Deficiency</b>	Foundation support post, column, beam, or girder is damaged.
<b>Deficiency Criteria</b>	Any support post, column, or girder area is damaged (i.e., visibly defective; impacts functionality).
<b>Health and Safety Determination</b>	Moderate
<b>Correction Timeframe</b>	30 days
<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If a foundation support post, column, beam, or girder is damaged, then it may cause the structure to become unstable.</p> <p>If a foundation support post, column, beam, or girder is damaged, then maintenance should identify it through regular maintenance activities and the presence of this deficiency may indicate self-generated work orders are not being addressed.</p>

If a foundation support post, column, beam, or girder is damaged, then it could be a sign of a structural issue.

#### Deficiency 5 – Foundation: Inside

<b>Deficiency</b>	Foundation support post, column, beam, or girder is damaged.
<b>Deficiency Criteria</b>	Any support post, column, or girder area is damaged (i.e., visibly defective; impacts functionality).
<b>Health and Safety Determination</b>	Moderate
<b>Correction Timeframe</b>	30 days
<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If a foundation support post, column, beam, or girder is damaged, then it may cause the structure to become unstable.</p> <p>If a foundation support post, column, beam, or girder is damaged, then maintenance should identify this through regular maintenance activities, and the presence of this deficiency may indicate self-generated work orders are not being addressed.</p> <p>If a foundation support post, column, beam, or girder is damaged, then it could be a sign of a structural issue.</p>

#### Deficiency 5 – Foundation: Outside

<b>Deficiency</b>	Foundation support post, column, beam, or girder is damaged.
<b>Deficiency Criteria</b>	Any support post, column, or girder area is damaged (i.e., visibly defective; impacts functionality).
<b>Health and Safety Determination</b>	Moderate
<b>Correction Timeframe</b>	30 days
<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If a foundation support post, column, beam, or girder is damaged, then it may cause the structure to become unstable.</p> <p>If a foundation support post, column, beam, or girder is damaged, then maintenance should identify this through regular maintenance activities</p>

and the presence of this deficiency may indicate self-generated work orders are not being addressed.

If a foundation support post, column, beam, or girder is damaged, then it could be a sign of a structural issue.

**TABLE 27—GARAGE DOOR STANDARD**

<b>Definition and Location</b>	
<b>Definition</b>	A large door on a garage that opens either manually or by an electric motor. Garage doors are frequently large enough to accommodate automobiles and other vehicles. Small garage doors may be constructed as a single panel that tilts up and back across the garage ceiling.
<b>Location</b>	Unit: Attached or detached garage.  Inside: Attached or detached garage.  Outside: Attached or detached garage.
<b>Deficiency 1 – Garage Door: Unit</b>	
<b>Deficiency</b>	Garage door has a hole.
<b>Deficiency Criteria</b>	Garage door has a hole of any size that penetrates through to the interior.
<b>Health and Safety Determination</b>	Moderate
<b>Correction Timeframe</b>	30 days
<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If the garage door has a hole of any size that penetrates through to the interior, then the resident may be unable to control access to their personal property.</p> <p>If the garage door has a hole of any size that penetrates through to the interior, then it is likely the resident will report this deficiency and its presence may indicate complaint-based work orders are not being addressed.</p> <p>If the garage door has a hole of any size that penetrates through to the interior, then it is likely to be observed during routine maintenance activities and its presence may indicate that self-generated work orders are not being addressed.</p>

**Deficiency 1 – Garage Door: Inside**

<b>Deficiency</b>	Garage door has a hole.
<b>Deficiency Criteria</b>	Garage door has a hole of any size that penetrates through to the interior.
<b>Health and Safety Determination</b>	Moderate
<b>Correction Timeframe</b>	30 days
<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If the garage door has a hole of any size that penetrates through to the interior, then the resident may be unable to control access to their personal property.</p> <p>If the garage door has a hole of any size that penetrates through to the interior, then it is likely the resident will report this deficiency and its presence may indicate complaint-based work orders are not being addressed.</p> <p>If the garage door has a hole of any size that penetrates through to the interior, then it is likely to be observed during routine maintenance activities and its presence may indicate that self-generated work orders are not being addressed.</p>

**Deficiency 1 – Garage Door: Outside**

<b>Deficiency</b>	Garage door has a hole.
<b>Deficiency Criteria</b>	Garage door has a hole of any size that penetrates through to the interior.
<b>Health and Safety Determination</b>	Moderate
<b>Correction Timeframe</b>	30 days
<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If the garage door has a hole of any size that penetrates through to the interior, then the resident may be unable to control access to their personal property.</p> <p>If the garage door has a hole of any size that penetrates through to the interior, then it is likely the resident will report this deficiency and its</p>

presence may indicate complaint-based work orders are not being addressed.

If the garage door has a hole of any size that penetrates through to the interior, then it is likely to be observed during routine maintenance activities and its presence may indicate that self-generated work orders are not being addressed.

#### Deficiency 2 – Garage Door: Unit

<b>Deficiency</b>	Garage door does not open, close, or remain open or closed.
<b>Deficiency Criteria</b>	Door will not open and remain open.  OR  Door will not close and remain closed.
<b>Health and Safety Determination</b>	Moderate
<b>Correction Timeframe</b>	30 days
<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If the garage door does not open and remain open or close and remain closed, then the resident may be exposed to associated hazards (e.g., the door closing on them).</p> <p>If the garage door does not close or remain closed, then the resident may be unable to control access to their personal property.</p> <p>If the garage door does not open and remain open or close and remain closed, then it is likely the resident will report this deficiency and its presence may indicate complaint-based work orders are not being addressed.</p> <p>If the garage door does not open and remain open or close and remain closed, then it is likely to be observed during routine maintenance activities and its presence may indicate that self-generated work orders are not being addressed.</p>

#### Deficiency 2 – Garage Door: Inside

<b>Deficiency</b>	Garage door does not open, close, or remain open or closed.
<b>Deficiency Criteria</b>	Door will not open and remain open.  OR

	Door will not close and remain closed.
<b>Health and Safety Determination</b>	Moderate
<b>Correction Timeframe</b>	30 days
<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If the garage door does not open and remain open or close and remain closed, then the resident may be exposed to associated hazards (e.g., the door closing on them).</p> <p>If the garage door does not close or remain closed, then the resident may be unable to control access to their personal property.</p> <p>If the garage door does not open and remain open or close and remain closed, then it is likely the resident will report this deficiency and its presence may indicate complaint-based work orders are not being addressed.</p> <p>If the garage door does not open and remain open or close and remain closed, then it is likely to be observed during routine maintenance activities and its presence may indicate that self-generated work orders are not being addressed.</p>

#### **Deficiency 2 – Garage Door: Outside**

<b>Deficiency</b>	Garage door does not open, close, or remain open or closed.
<b>Deficiency Criteria</b>	<p>Door will not open and remain open.</p> <p>OR</p> <p>Door will not close and remain closed.</p>
<b>Health and Safety Determination</b>	Moderate
<b>Correction Timeframe</b>	30 days
<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	If the garage door does not open and remain open or close and remain closed, then the resident may be exposed to associated hazards (e.g., the door closing on them).

If the garage door does not close or remain closed, then the resident may be unable to control access to their personal property.

If the garage door does not open and remain open or close and remain closed, then it is likely the resident will report this deficiency and its presence may indicate complaint-based work orders are not being addressed.

If the garage door does not open and remain open or close and remain closed, then it is likely to be observed during routine maintenance activities and its presence may indicate that self-generated work orders are not being addressed.

**TABLE 28—GRAB BAR STANDARD**

<b>Definition and Location</b>	
<b>Definition</b>	Safety device designed to be grasped and enable a person to maintain balance.
<b>Location</b>	Unit: Bathroom.  Inside: Bathroom.
<b>Deficiency 1 – Grab Bar: Unit</b>	
<b>Deficiency</b>	Grab bar is not secure.
<b>Deficiency Criteria</b>	Any movement whatsoever is detected in the grab bar.
<b>Health and Safety Determination</b>	Moderate
<b>Correction Timeframe</b>	30 days
<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If any movement whatsoever is detected in the grab bar, and the resident grabs it for stability, then they may fall and be injured.</p> <p>If any movement whatsoever is detected in the grab bar, then resident may be unable to use a fixture that is expected to be provided and maintained as part of their rent.</p> <p>If any movement whatsoever is detected in the grab bar, then the resident will likely report the deficiency and its presence may indicate that complaint-based work orders are not being addressed.</p>

If any movement whatsoever is detected in the grab bar, then it should be identified through routine maintenance activities and the deficiency's presence may indicate that self-generated work orders are not being addressed.

#### Deficiency 1 – Grab Bar: Inside

<b>Deficiency</b>	Grab bar is not secure.
<b>Deficiency Criteria</b>	Any movement whatsoever is detected in the grab bar.
<b>Health and Safety Determination</b>	Moderate
<b>Correction Timeframe</b>	30 days
<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If any movement whatsoever is detected in the grab bar, and the resident grabs it for stability, then they may fall and be injured.</p> <p>If any movement whatsoever is detected in the grab bar, then the resident may be unable to use a fixture that is expected to be provided and maintained as part of their rent.</p> <p>If any movement whatsoever is detected in the grab bar, then the resident will likely report the deficiency and its presence may indicate that complaint-based work orders are not being addressed.</p> <p>If any movement whatsoever is detected in the grab bar, then it should be identified through routine maintenance activities and the deficiency's presence may indicate that self-generated work orders are not being addressed.</p>

**TABLE 29—GUARDRAIL STANDARD**

<b>Definition and Location</b>	
<b>Definition</b>	A barrier along an open, raised walking surface.
<b>Location</b>	<p>Unit: All accessible walking surfaces within the dwelling and those areas to which the resident has sole access (e.g., dwelling balconies, stairs, ramps, decks, hallways).</p> <p>Inside: All accessible walking surfaces within the interior common spaces (e.g., stairs, ramps, hallways).</p>

Outside: All accessible walking surfaces (e.g., balconies, stairs, ramps, decks, rooftops, retaining walls) throughout the exterior built environment (i.e., human-made structures, features, and facilities).

<b>Deficiency 1 – Guardrail: Unit</b>		<b>Affirmative Habitability Requirement: Yes</b>
---------------------------------------	--	--

<b>Deficiency</b>	Guardrail is missing or not installed.
<b>Deficiency Criteria</b>	The guardrail is missing (i.e., evidence of prior installation, but is now not present or is incomplete) or not installed (i.e., never installed, but should have been) along a walking surface that is more than 30 inches above the floor or grade below.
<b>Health and Safety Determination</b>	Life-Threatening
<b>Correction Timeframe</b>	24 hours
<b>HCV Correction Timeframe</b>	24 hours
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If a guardrail is missing or not installed along a walking surface that is more than 30 inches above the floor or grade below, then there may be an increased safety risk to the resident of fall hazards, which may result in injury or death.</p> <p>A resident is likely to notice if a guardrail is missing or not installed along a walking surface that is more than 30 inches above the floor or grade below and to recognize it is important enough to report to property management because it may present safety hazards. Property management should be expected to prioritize a work order to remedy this deficiency because it may result in safety hazards.</p>

<b>Deficiency 1 – Guardrail: Inside</b>		<b>Affirmative Habitability Requirement: Yes</b>
---	--	--

<b>Deficiency</b>	Guardrail is missing or not installed.
<b>Deficiency Criteria</b>	The guardrail is missing (i.e., evidence of prior installation, but is now not present or is incomplete) or not installed (i.e., never installed, but should have been) along a walking surface that is more than 30 inches above the floor or grade below.
<b>Health and Safety Determination</b>	Life-Threatening
<b>Correction Timeframe</b>	24 hours
<b>HCV Correction Timeframe</b>	24 hours

<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If a guardrail is missing or not installed along a walking surface that is more than 30 inches above the floor or grade below, then there may be an increased safety risk to the resident of fall hazards, which may result in injury or death.</p> <p>Property management would be expected to ensure that staff members understand how to identify if a guardrail is missing or not installed along a walking surface that is more than 30 inches above the floor or grade below. Management practices would be expected to assure prompt creation and prioritization of a work order to remedy this deficiency, because it may result in safety hazards.</p>
<b>Deficiency 1 – Guardrail: Outside</b>	
<b>Affirmative Habitability Requirement: Yes</b>	
<b>Deficiency</b>	Guardrail is missing or not installed.
<b>Deficiency Criteria</b>	The guardrail is missing (i.e., evidence of prior installation, but is now not present or is incomplete) or not installed (i.e., never installed, but should have been) along a walking surface that is more than 30 inches above the floor or grade below.
<b>Health and Safety Determination</b>	Life-Threatening
<b>Correction Timeframe</b>	24 hours
<b>HCV Correction Timeframe</b>	24 hours
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If a guardrail is missing or not installed along a walking surface that is more than 30 inches above the floor or grade below, then there may be an increased safety risk to the resident of fall hazards, which may result in injury or death.</p> <p>Property management would be expected to ensure that staff members understand how to identify if a guardrail is missing or not installed along a walking surface that is more than 30 inches above the floor or grade below. Management practices would be expected to assure prompt creation and prioritization of a work order to remedy this deficiency, because it may result in safety hazards.</p>
<b>Deficiency 2 – Guardrail: Unit</b>	
<b>Deficiency</b>	Guardrail is not functionally adequate.
<b>Deficiency Criteria</b>	Guardrail is missing functional component(s) (i.e., a component that is critical to the guardrail protecting from fall hazards).

	OR Guardrail is damaged (i.e., visibly defective; impacts functionality).
	OR Guardrail is less than 30 inches in height.
	OR Guardrail is not securely attached and cannot reasonably protect from fall hazards.
<b>Health and Safety Determination</b>	Life-Threatening
<b>Correction Timeframe</b>	24 hours
<b>HCV Correction Timeframe</b>	24 hours
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If a guardrail is missing functional component(s), damaged, less than 30 inches in height, or not securely attached, there may be an increased safety risk to the resident of falling from a walking surface, which may result in injury or death.</p> <p>Property management would be expected to ensure that staff members understand how to identify a guardrail that is missing functional component(s), damaged, less than 30 inches in height, or not securely attached. Management practices would be expected to assure prompt creation and prioritization of a work order to remedy this deficiency because it may lead to safety hazards.</p>

**Deficiency 2 – Guardrail: Inside**

<b>Deficiency</b>	Guardrail is not functionally adequate.
<b>Deficiency Criteria</b>	<p>Guardrail is missing functional component(s) (i.e., a component that is critical to the guardrail protecting from fall hazards).</p> <p>OR</p> <p>Guardrail is damaged (i.e., visibly defective; impacts functionality).</p> <p>OR</p> <p>Guardrail is less than 30 inches in height.</p> <p>OR</p> <p>Guardrail is not securely attached and cannot reasonably protect from fall hazards.</p>

<b>Health and Safety Determination</b>	Life-Threatening
<b>Correction Timeframe</b>	24 hours
<b>HCV Correction Timeframe</b>	24 hours
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If a guardrail is missing functional component(s), damaged, less than 30 inches in height, or not securely attached, there may be an increased safety risk to the resident of falling from a walking surface, which may result in injury or death.</p> <p>Property management would be expected to ensure that staff members understand how to identify a guardrail that is missing functional component(s), damaged, less than 30 inches in height, or not securely attached. Management practices would be expected to assure prompt creation and prioritization of a work order to remedy this deficiency because it may lead to safety hazards.</p>

#### **Deficiency 2 – Guardrail: Outside**

<b>Deficiency</b>	Guardrail is not functionally adequate.
<b>Deficiency Criteria</b>	<p>Guardrail is missing functional component(s) (i.e., a component that is critical to the guardrail protecting from fall hazards).</p> <p>OR</p> <p>Guardrail is damaged (i.e., visibly defective; impacts functionality).</p> <p>OR</p> <p>Guardrail is less than 30 inches in height.</p> <p>OR</p> <p>Guardrail is not securely attached and cannot reasonably protect from fall hazards.</p>
<b>Health and Safety Determination</b>	Life-Threatening
<b>Correction Timeframe</b>	24 hours
<b>HCV Correction Timeframe</b>	24 hours
<b>HCV Pass/Fail</b>	Fail

<b>Rationale</b>	<p>If a guardrail is missing functional component(s), damaged, less than 30 inches in height, or not securely attached, there may be an increased safety risk to the resident of falling from a walking surface, which may result in injury or death.</p> <p>Property management would be expected to ensure that staff members understand how to identify a guardrail that is missing functional component(s), damaged, less than 30 inches in height, or not securely attached. Management practices would be expected to assure prompt creation and prioritization of a work order to remedy this deficiency because it may lead to safety hazards.</p>
------------------	--

**TABLE 30—HANDRAIL STANDARD**

<b>Definition and Location</b>	
<b>Definition</b>	A rail fixed to posts or a wall for people to hold on to for support.
<b>Location</b>	<p>Unit: Stairs, hallways, ramps.</p> <p>Inside: Stairs, hallways, ramps, elevators.</p> <p>Outside: Stairs, ramps, elevators.</p>
<b>Deficiency 1 – Handrail: Unit</b>	
<b>Deficiency</b>	Handrail is missing.
<b>Deficiency Criteria</b>	Handrail is missing (i.e., evidence of prior installation, but now not present or is incomplete).
<b>Health and Safety Determination</b>	Moderate
<b>Correction Timeframe</b>	30 days
<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If a handrail is missing, then there is an increased probability of falls that may lead to injury.</p> <p>If a handrail is missing, then the resident is unable to use a feature that is expected to be provided and maintained as part of their rent.</p> <p>If a handrail is missing, then it is likely to be observed during daily maintenance activities, and the presence of this deficiency may indicate that self-generated work orders are not being addressed.</p>

**Deficiency 1 – Handrail: Inside**

<b>Deficiency</b>	Handrail is missing.
<b>Deficiency Criteria</b>	Handrail is missing (i.e., evidence of prior installation, but now not present or is incomplete).
<b>Health and Safety Determination</b>	Moderate
<b>Correction Timeframe</b>	30 days
<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If a handrail is missing, then there is an increased probability of falls that may lead to injury.</p> <p>If a handrail is missing, then the resident is unable to use a feature that is expected to be provided and maintained as part of their rent.</p> <p>If a handrail is missing, then it is likely to be observed during daily maintenance activities, and the presence of this deficiency may indicate that self-generated work orders are not being addressed.</p>

**Deficiency 1 – Handrail: Outside**

<b>Deficiency</b>	Handrail is missing.
<b>Deficiency Criteria</b>	Handrail is missing (i.e., evidence of prior installation, but now not present or is incomplete).
<b>Health and Safety Determination</b>	Moderate
<b>Correction Timeframe</b>	30 days
<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If a handrail is missing, then there is an increased probability of falls that may lead to injury.</p> <p>If a handrail is missing, then the resident is unable to use a feature that is expected to be provided and maintained as part of their rent.</p> <p>If a handrail is missing, then it is likely to be observed during daily maintenance activities, and the presence of this deficiency may indicate that self-generated work orders are not being addressed.</p>

**Deficiency 2 – Handrail: Unit**

<b>Deficiency</b>	Handrail is not secure.
<b>Deficiency Criteria</b>	There is movement in the anchors of the handrail.
<b>Health and Safety Determination</b>	Moderate
<b>Correction Timeframe</b>	30 days
<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If a handrail is not secure, then there is an increased probability of falls that may lead to injury.</p> <p>If a handrail is not secure, then the resident will likely report this deficiency, and its presence may indicate that complaint-based work orders are not being addressed.</p> <p>If a handrail is not secure, then it is likely to be observed during daily maintenance activities, and the presence of this deficiency may indicate that self-generated work orders are not being addressed.</p>

**Deficiency 2 – Handrail: Inside**

<b>Deficiency</b>	Handrail is not secure.
<b>Deficiency Criteria</b>	There is movement in the anchors of the handrail.
<b>Health and Safety Determination</b>	Moderate
<b>Correction Timeframe</b>	30 days
<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If a handrail is not secure, then there is an increased probability of falls that may lead to injury.</p> <p>If a handrail is not secure, then the resident will likely report this deficiency and its presence may indicate that complaint-based work orders are not being addressed.</p> <p>If a handrail is not secure, then it is likely to be observed during daily maintenance activities, and the presence of this deficiency may indicate that self-generated work orders are not being addressed.</p>

**Deficiency 2 – Handrail: Outside**

<b>Deficiency</b>	Handrail is not secure.
<b>Deficiency Criteria</b>	There is movement in the anchors of the handrail.
<b>Health and Safety Determination</b>	Moderate
<b>Correction Timeframe</b>	30 days
<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If a handrail is not secure, then there is an increased probability of falls that may lead to injury.</p> <p>If a handrail is not secure, then the resident will likely report this deficiency and its presence may indicate that complaint-based work orders are not being addressed.</p> <p>If a handrail is not secure, then it is likely to be observed during daily maintenance activities, and the presence of this deficiency may indicate that self-generated work orders are not being addressed.</p>

**Deficiency 3 – Handrail: Unit**

<b>Deficiency</b>	Handrail is not functionally adequate.
<b>Deficiency Criteria</b>	<p>Handrail is not functionally adequate (i.e., it cannot reasonably be grasped by hand to provide stability or support when ascending or descending stairways).</p> <p>OR</p> <p>Handrail is not continuous for the full length of each stair flight.</p> <p>OR</p> <p>Handrail is not between 28 inches and 42 inches in height.</p>
<b>Health and Safety Determination</b>	Moderate
<b>Correction Timeframe</b>	30 days
<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail

<b>Rationale</b>	If a handrail is not functionally adequate or not continuous for the full length of each stair flight, or not between 28 inches and 42 inches in height, there may be an increased safety risk to the resident of falling down a staircase, which may result in injury.
<b>Deficiency 3 – Handrail: Inside</b>	
<b>Deficiency</b>	Handrail is not functionally adequate.
<b>Deficiency Criteria</b>	Handrail is not functionally adequate (i.e., it cannot reasonably be grasped by hand to provide stability or support when ascending or descending stairways).  OR  Handrail is not continuous for the full length of each stair flight.  OR  Handrail is not between 28 inches and 42 inches in height.
<b>Health and Safety Determination</b>	Moderate
<b>Correction Timeframe</b>	30 days
<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	If a handrail is not functionally adequate or not continuous for the full length of each stair flight, or not between 28 inches and 42 inches in height, there may be an increased safety risk to the resident of falling down a staircase, which may result in injury.
<b>Deficiency 3 – Handrail: Outside</b>	
<b>Deficiency</b>	Handrail is not functionally adequate.
<b>Deficiency Criteria</b>	Handrail is not functionally adequate (i.e., it cannot reasonably be grasped by hand to provide stability or support when ascending or descending stairways).  OR  Handrail is not continuous for the full length of each stair flight.  OR  Handrail is not between 28 inches and 42 inches in height.
<b>Health and Safety Determination</b>	Moderate

<b>Correction Timeframe</b>	30 days
<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	If a handrail is not functionally adequate or not continuous for the full length of each stair flight, or not between 28 inches and 42 inches in height, there may be an increased safety risk to the resident of falling down a staircase, which may result in injury.

#### Deficiency 4 – Handrail: Unit

<b>Deficiency</b>	Handrail is not installed where required.
<b>Deficiency Criteria</b>	4 or more stair risers are present and a handrail is not installed.  OR  A ramp has a rise greater than 6 inches or a horizontal projection greater than 72 inches and a handrail is not installed on both sides.
<b>Health and Safety Determination</b>	N/A
<b>Correction Timeframe</b>	N/A
<b>HCV Correction Timeframe</b>	N/A
<b>HCV Pass/Fail</b>	Pass
<b>Rationale</b>	If handrail not installed where required, then the resident is unable to use a feature that is expected to be provided and maintained as part of their rent.  Property management would be expected to ensure that staff members understand how to identify if a handrail is not installed where required. Management practices would be expected to assure prompt creation and prioritization of a work order to remedy this deficiency because it may lead to usability barriers.

#### Deficiency 4 – Handrail: Inside

<b>Deficiency</b>	Handrail is not installed where required.
<b>Deficiency Criteria</b>	4 or more stair risers are present and a handrail is not installed.  OR  A ramp has a rise greater than 6 inches or a horizontal projection greater than 72 inches and a handrail is not installed on both sides.
<b>Health and Safety Determination</b>	Low

<b>Correction Timeframe</b>	60 Days
<b>HCV Correction Timeframe</b>	N/A
<b>HCV Pass/Fail</b>	Pass
<b>Rationale</b>	<p>If handrail not installed where required, then the resident is unable to use a feature that is expected to be provided and maintained as part of their rent.</p> <p>Property management would be expected to ensure that staff members understand how to identify if a handrail is not installed where required. Management practices would be expected to assure prompt creation and prioritization of a work order to remedy this deficiency because it may lead to usability barriers.</p>
<b>Deficiency 4 – Handrail: Outside</b>	
<b>Deficiency</b>	Handrail is not installed where required.
<b>Deficiency Criteria</b>	<p>4 or more stair risers are present and a handrail is not installed.</p> <p>OR</p> <p>A ramp has a rise greater than 6 inches or a horizontal projection greater than 72 inches and a handrail is not installed on both sides.</p>
<b>Health and Safety Determination</b>	Low
<b>Correction Timeframe</b>	60 Days
<b>HCV Correction Timeframe</b>	N/A
<b>HCV Pass/Fail</b>	Pass
<b>Rationale</b>	<p>If handrail not installed where required, then the resident is unable to use a feature that is expected to be provided and maintained as part of their rent.</p> <p>Property management would be expected to ensure that staff members understand how to identify if a handrail is not installed where required. Management practices would be expected to assure prompt creation and prioritization of a work order to remedy this deficiency because it may lead to usability barriers.</p>

**TABLE 31—HEATING, VENTILATION, AND AIR CONDITIONING (HVAC) STANDARD**

<b>Definition and Location</b>	
<b>Definition</b>	<u>Heating</u> : A system consisting of a heat source and method of distribution designed to heat the surrounding air and area.

Ventilation: A method of air distribution by air ducts to transfer air from one location to another. Air can be distributed passively or forced.

Air Conditioning: A system consisting of a cooling source and method of distribution designed to cool the surrounding air and area.

**Location**

Unit: Living room, bedroom, kitchen, bathroom, closet.

Inside: Any indoor common area (e.g., hall, bath, kitchen, office, exercise room, etc.).

**Deficiency 1 – Heating, Ventilation, and Air Conditioning (HVAC): Unit****Affirmative Habitability Requirement: Yes****Deficiency**

The inspection date is on or between October 1 and March 31 and the permanently installed heating source is not working or the permanently installed heating source is working and the interior temperature is below 64 degrees Fahrenheit.

**Deficiency Criteria**

The inspection date is on or between October 1 and March 31.

AND

The permanently installed heating source is not working.

OR

The permanently installed heating source is working and the interior temperature is below 64 degrees Fahrenheit.

**Health and Safety Determination**

Life-Threatening

**Correction Timeframe**

24 hours

**HCV Correction Timeframe**

24 hours

**HCV Pass/Fail**

Fail

**Rationale**

If the inspection date is on or between October 1 and March 31 and the permanently installed heating source is not working or the permanently installed heating source is working and the interior temperature is below 64 degrees Fahrenheit, then the resident's body may lose heat faster than it can make it, leading to symptoms of hypothermia, which may result in unconsciousness or death.

If the inspection date is on or between October 1 and March 31 and the permanently installed heating source is not working or the permanently installed heating source is working and the interior temperature is below 64 degrees Fahrenheit, then the resident may be unable to use the appliance to safely heat the unit.

A resident is likely to notice if the inspection date is on or between October 1 and March 31 and the permanently installed heating source is not working or the permanently installed heating source is working and the interior temperature is below 64 degrees Fahrenheit and to recognize it is important enough to report to property management because it may present health hazards. Property management should be expected to prioritize a work order to remedy this defect because it may result in health hazards.

<b>Deficiency 2 – Heating, Ventilation, and Air Conditioning (HVAC): Unit</b>		<b>Affirmative Habitability Requirement: Yes</b>
<b>Deficiency</b>	The inspection date is on or between October 1 and March 31 and the permanently installed heating source is working and the interior temperature is 64 to 67.9 degrees Fahrenheit.	
<b>Deficiency Criteria</b>	<p>The inspection date is on or between October 1 and March 31.</p> <p>AND</p> <p>The permanently installed heating source is working and the interior temperature is 64 to 67.9 degrees Fahrenheit.</p>	
<b>Health and Safety Determination</b>	Severe	
<b>Correction Timeframe</b>	24 hours	
<b>HCV Correction Timeframe</b>	30 days	
<b>HCV Pass/Fail</b>	Fail	
<b>Rationale</b>	<p>If the inspection date is on or between October 1 and March 31 and the permanently installed heating source is working and the interior temperature is 64 to 67.9 degrees Fahrenheit, then the resident may experience respiratory or cardiovascular issues.</p> <p>If the inspection date is on or between October 1 and March 31 and the permanently installed heating source is working and the interior temperature is 64 to 67.9 degrees Fahrenheit, then the resident may be unable to use the appliance to safely heat the unit.</p> <p>A resident is likely to notice if the inspection date is on or between October 1 and March 31 and the permanently installed heating source is working and the interior temperature is 64 to 67.9 degrees Fahrenheit and to recognize it is important enough to report to property management because it may present health hazards. Property management should be expected to prioritize a work order to remedy this defect because it may result in health hazards.</p>	

**Deficiency 3 – Heating, Ventilation, and Air Conditioning (HVAC): Unit**

<b>Deficiency</b>	Air conditioning system or device is not operational.
<b>Deficiency Criteria</b>	System or device does not turn on.  OR  System or device only produces hot or room temperature air.
<b>Health and Safety Determination</b>	Moderate
<b>Correction Timeframe</b>	30 days
<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If the air conditioning system or device does not turn on or it only produces hot or room temperature air, then the resident may be at an increased risk of heat-related illness.</p> <p>If the air conditioning system or device does not turn on or it only produces hot or room temperature air, then the resident may be unable to utilize the appliance.</p> <p>The resident is likely to notice if the air conditioning system or device does not turn on or it only produces hot or room temperature air and to recognize it is important enough to report it to property management because it may present health hazards or usability barriers. Property management should be expected to prioritize a work order to remedy this deficiency because it may result in health hazards.</p>

**Deficiency 3 – Heating, Ventilation, and Air Conditioning (HVAC): Inside**

<b>Deficiency</b>	Air conditioning system or device is not operational.
<b>Deficiency Criteria</b>	System or device does not turn on.  OR  System or device only produces hot or room temperature air.
<b>Health and Safety Determination</b>	Low
<b>Correction Timeframe</b>	60 Days
<b>HCV Correction Timeframe</b>	N/A
<b>HCV Pass/Fail</b>	Pass

<b>Rationale</b>	<p>If the air conditioning system or device does not turn on or it only produces hot or room temperature air, then the resident may be unable to utilize the appliance.</p> <p>Property management would be expected to ensure that staff members understand how to identify an air conditioning system or device that does not turn on or only produces hot or room temperature air. Management practices would be expected to assure prompt creation and prioritization of a work order to remedy this deficiency, because it may result in usability barriers.</p>
<b>Deficiency 4 – Heating, Ventilation, and Air Conditioning (HVAC): Unit</b> <span style="float: right;"><b>Affirmative Habitability Requirement: Yes</b></span>	
<b>Deficiency</b>	Unvented space heater that burns gas, oil, or kerosene is present.
<b>Deficiency Criteria</b>	Unvented space heater that burns gas, oil, or kerosene is present.
<b>Health and Safety Determination</b>	Life-Threatening
<b>Correction Timeframe</b>	24 hours
<b>HCV Correction Timeframe</b>	24 hours
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If the fuel burning heating system or device is not vented, then the resident may be exposed carbon monoxide leaks, which may cause health issues.</p> <p>A fuel burning heating system or device should be checked during periodic property inspections, and according to industry best practices, should be included in a preventative maintenance plan. If the fuel burning heating system or device is not vented, this may indicate that preventative maintenance activities are not being addressed.</p>
<b>Deficiency 4 – Heating, Ventilation, and Air Conditioning (HVAC): Inside</b> <span style="float: right;"><b>Affirmative Habitability Requirement: Yes</b></span>	
<b>Deficiency</b>	Unvented space heater that burns gas, oil, or kerosene is present.
<b>Deficiency Criteria</b>	Unvented space heater that burns gas, oil, or kerosene is present.
<b>Health and Safety Determination</b>	Life-Threatening
<b>Correction Timeframe</b>	24 hours
<b>HCV Correction Timeframe</b>	24 hours

<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If the fuel burning heating system or device is not vented, then the resident may be exposed carbon monoxide leaks, which may cause health issues.</p> <p>A fuel burning heating system or device should be checked during periodic property inspections, and according to industry best practices, should be included in a preventative maintenance plan. If the fuel burning heating system or device is not vented, this may indicate that preventative maintenance activities are not being addressed.</p>
<b>Deficiency 5 – Heating, Ventilation, and Air Conditioning (HVAC): Unit</b>	
<b>Deficiency</b>	Combustion chamber cover or gas shutoff valve is missing from a fuel burning heating appliance.
<b>Deficiency Criteria</b>	Combustion chamber cover or gas shutoff valve is missing (i.e., evidence of prior installation, but is now not present or is incomplete) from a fuel burning heating appliance.
<b>Health and Safety Determination</b>	Life-Threatening
<b>Correction Timeframe</b>	24 hours
<b>HCV Correction Timeframe</b>	24 hours
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If a combustion chamber cover or gas shutoff valve is missing from a fuel burning heating appliance, and there is a need to isolate the appliance, there may be an increased safety risk to the resident of fire, which may result in injury (e.g., burns) or death.</p> <p>Property management would be expected to ensure that staff understand how to identify a combustion chamber cover or gas shutoff valve that is missing from a fuel burning heating appliance. Management practices would be expected to assure prompt creation and prioritization of a work order to remedy this defect, because it may result in safety hazards or usability barriers.</p>
<b>Deficiency 5 – Heating, Ventilation, and Air Conditioning (HVAC): Inside</b>	
<b>Deficiency</b>	Combustion chamber cover or gas shutoff valve is missing from a fuel burning heating appliance.
<b>Deficiency Criteria</b>	Combustion chamber cover or gas shutoff valve is missing (i.e., evidence of prior installation, but is now not present or is incomplete) from a fuel burning heating appliance.

<b>Health and Safety Determination</b>	Life-Threatening
<b>Correction Timeframe</b>	24 hours
<b>HCV Correction Timeframe</b>	24 hours
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If a combustion chamber cover or gas shutoff valve is missing from a fuel burning heating appliance, and there is a need to isolate the appliance, there may be an increased safety risk to the resident of fire, which may result in injury (e.g., burns) or death.</p> <p>Property management would be expected to ensure that staff understand how to identify a combustion chamber cover or gas shutoff valve that is missing from a fuel burning heating appliance. Management practices would be expected to assure prompt creation and prioritization of a work order to remedy this defect, because it may result in safety hazards or usability barriers.</p>

#### **Deficiency 6 – Heating, Ventilation, and Air Conditioning (HVAC): Unit**

<b>Deficiency</b>	Heating system or device safety shield is damaged or missing.
<b>Deficiency Criteria</b>	Heating system or device safety shield is damaged (i.e., visibly defective; impacts functionality) or missing (i.e., evidence of prior installation, but is now not present or is incomplete).
<b>Health and Safety Determination</b>	Severe
<b>Correction Timeframe</b>	24 hours
<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If a heating system or device safety shield is damaged or missing, then there may be an increased safety risk to the resident of burn hazards.</p> <p>Property management would be expected to ensure that staff understand how to identify a safety shield that is damaged or missing from a heating system or device. Management practices would be expected to assure prompt creation and prioritization of a work order to remedy this defect, because it may result in safety hazards.</p>

#### **Deficiency 6 – Heating, Ventilation, and Air Conditioning (HVAC): Inside**

<b>Deficiency</b>	Heating system or device safety shield is damaged or missing.
-------------------	---

<b>Deficiency Criteria</b>	Heating system or device safety shield is damaged (i.e., visibly defective; impacts functionality) or missing (i.e., evidence of prior installation, but is now not present or is incomplete).
<b>Health and Safety Determination</b>	Severe
<b>Correction Timeframe</b>	24 hours
<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If a heating system or device safety shield is damaged or missing, then there may be an increased safety risk to the resident of burn hazards.</p> <p>Property management would be expected to ensure that staff understand how to identify a safety shield that is damaged or missing from a heating system or device. Management practices would be expected to assure prompt creation and prioritization of a work order to remedy this defect, because it may result in safety hazards.</p>

**Deficiency 7 – Heating, Ventilation, and Air Conditioning (HVAC): Unit**

**Affirmative Habitability Requirement: Yes**

<b>Deficiency</b>	The inspection date is on or between April 1 and September 30 and a permanently installed heating source is damaged, inoperable, missing, or not installed.
<b>Deficiency Criteria</b>	<p>The inspection date is on or between April 1 and September 30.</p> <p>AND</p> <p>A permanently installed heating source is damaged (i.e., visibly defective; impacts functionality).</p> <p>OR</p> <p>A permanently installed heating source is inoperable (i.e., not meeting function or purpose, with or without visible damage).</p> <p>OR</p> <p>A permanently installed heating source is missing (i.e., evidence of prior installation, but is now not present or is incomplete).</p> <p>OR</p> <p>A permanently installed heating source is not installed.</p>
<b>Health and Safety Determination</b>	Moderate
<b>Correction Timeframe</b>	30 days

<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If the inspection date is on or between April 1 and September 30 and a permanently installed heating source is damaged, inoperable, missing, or not installed, then the resident may be unable to maintain their thermal environment.</p> <p>If the inspection date is on or between April 1 and September 30 and a permanently installed heating source is damaged, inoperable, missing, or not installed, then the resident may be unable to use the appliance to safely heat the unit.</p> <p>A resident is likely to notice if the inspection date is on or between April 1 and September 30 and a permanently installed heating source is damaged, inoperable, missing, or not installed and to recognize it is important enough to report to property management because it may present health hazards. Property management should be expected to prioritize a work order to remedy this defect because it may result in health hazards.</p>
<b>Deficiency 7 – Heating, Ventilation, and Air Conditioning (HVAC): Inside</b>	
<b>Deficiency</b>	The inspection date is on or between April 1 and September 30 and a permanently installed heating source is damaged, inoperable, missing, or not installed.
<b>Deficiency Criteria</b>	<p>The inspection date is on or between April 1 and September 30.</p> <p>AND</p> <p>A permanently installed heating source is damaged (i.e., visibly defective; impacts functionality).</p> <p>OR</p> <p>A permanently installed heating source is inoperable (i.e., not meeting function or purpose, with or without visible damage).</p> <p>OR</p> <p>A permanently installed heating source is missing (i.e., evidence of prior installation, but is now not present or is incomplete).</p> <p>OR</p> <p>A permanently installed heating source is not installed.</p>
<b>Health and Safety Determination</b>	Moderate
<b>Correction Timeframe</b>	30 days

<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If the inspection date is on or between April 1 and September 30 and a permanently installed heating source is damaged, inoperable, missing, or not installed, then the resident may be unable to maintain their thermal environment.</p> <p>If the inspection date is on or between April 1 and September 30 and a permanently installed heating source is damaged, inoperable, missing, or not installed, then the resident may be unable to use the appliance to safely heat the unit.</p> <p>Property management would be expected to ensure that staff understand how to identify if a permanently installed heating source is damaged, inoperable, missing, or not installed. Management practices would be expected to assure prompt creation and prioritization of a work order to remedy this defect, because it may result in health hazards.</p>
<b>Deficiency 8 – Heating, Ventilation, and Air Conditioning (HVAC): Unit</b>	
<b>Deficiency</b>	Fuel burning heating system or device exhaust vent is misaligned, blocked, disconnected, improperly connected, damaged, or missing.
<b>Deficiency Criteria</b>	<p>Fuel burning heating system or device is present.</p> <p>AND</p> <p>Exhaust vent is misaligned, blocked, disconnected, or improperly connected through to the ceiling or wall.</p> <p>OR</p> <p>Exhaust vent is damaged (i.e., visibly defective; impacts functionality).</p> <p>OR</p> <p>Exhaust vent is missing (i.e., evidence of prior installation, but now not present or is incomplete).</p>
<b>Health and Safety Determination</b>	Life-Threatening
<b>Correction Timeframe</b>	24 hours
<b>HCV Correction Timeframe</b>	24 hours
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	If the fuel burning heating system or device exhaust vent is misaligned, disconnected, improperly connected, damaged, blocked, or missing, then

the resident may be exposed carbon monoxide leaks, which may cause health issues.

A fuel burning heating system or device should be checked during periodic property inspections, and according to industry best practices, should be included in a preventative maintenance plan. If the fuel burning heating system or device exhaust vent is misaligned, disconnected, improperly connected, damaged, blocked, or missing, this may indicate that preventative maintenance activities are not being addressed.

#### **Deficiency 8 – Heating, Ventilation, and Air Conditioning (HVAC): Inside**

<b>Deficiency</b>	Fuel burning heating system or device exhaust vent is misaligned, blocked, disconnected, improperly connected, damaged, or missing.
<b>Deficiency Criteria</b>	Fuel burning heating system or device is present.  AND  Exhaust vent is misaligned, blocked, disconnected, or improperly connected through to the ceiling or wall.  OR  Exhaust vent is damaged (i.e., visibly defective; impacts functionality).  OR  Exhaust vent is missing (i.e., evidence of prior installation, but now not present or is incomplete).
<b>Health and Safety Determination</b>	Life-Threatening
<b>Correction Timeframe</b>	24 hours
<b>HCV Correction Timeframe</b>	24 hours
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	If the fuel burning heating system or device exhaust vent is misaligned, disconnected, improperly connected, damaged, blocked, or missing, then the resident may be exposed carbon monoxide leaks, which may cause health issues.  A fuel burning heating system or device should be checked during periodic property inspections, and according to industry best practices, should be included in a preventative maintenance plan. If the fuel burning heating system or device exhaust vent is misaligned, disconnected, improperly connected, damaged, blocked, or missing, this may indicate that preventative maintenance activities are not being addressed.

#### **Deficiency 8 – Heating, Ventilation, and Air Conditioning (HVAC): Outside**

<b>Deficiency</b>	Fuel burning heating system or device exhaust vent is misaligned, blocked, disconnected, improperly connected, damaged, or missing.
<b>Deficiency Criteria</b>	Fuel burning heating system or device is present.  AND  Exhaust vent is misaligned, blocked, disconnected, or improperly connected through to the ceiling or wall.  OR  Exhaust vent is damaged (i.e., visibly defective; impacts functionality).  OR  Exhaust vent is missing (i.e., evidence of prior installation, but now not present or is incomplete).
<b>Health and Safety Determination</b>	Life-Threatening
<b>Correction Timeframe</b>	24 hours
<b>HCV Correction Timeframe</b>	24 hours
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	If the fuel burning heating system or device exhaust vent is misaligned, disconnected, improperly connected, damaged, blocked, or missing, then the resident may be exposed carbon monoxide leaks, which may cause health issues.  A fuel burning heating system or device should be checked during periodic property inspections, and according to industry best practices, should be included in a preventative maintenance plan. If the fuel burning heating system or device exhaust vent is misaligned, disconnected, improperly connected, damaged, blocked, or missing, this may indicate that preventative maintenance activities are not being addressed.
<b>Deficiency 9 – Heating, Ventilation, and Air Conditioning (HVAC): Inside</b>	
<b>Affirmative Habitability Requirement: Yes</b>	
<b>Deficiency</b>	The inspection date is on or between October 1 and March 31 and the permanently installed heating source is inoperable.
<b>Deficiency Criteria</b>	The inspection date is on or between October 1 and March 31.  AND  A permanently installed heating source is inoperable (i.e., not meeting function or purpose, with or without visible damage).

<b>Health and Safety Determination</b>	Moderate
<b>Correction Timeframe</b>	30 days
<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If the inspection date is on or between October 1 and March 31 and a permanently installed heating source is inoperable, then the resident may be unable to maintain their thermal environment.</p> <p>If the inspection date is on or between October 1 and March 31 and a permanently installed heating source is inoperable, then the resident may be unable to use the appliance to safely heat the unit.</p> <p>Property management would be expected to ensure that staff understand how to identify if a permanently installed heating source is inoperable. Management practices would be expected to assure prompt creation and prioritization of a work order to remedy this defect, because it may result in health hazards.</p>

**TABLE 32—INFESTATION STANDARD**

<b>Definition and Location</b>	
<b>Definition</b>	The presence of animals with potential impacts on resident health and safety.
<b>Location</b>	<p>Unit: Kitchen, cabinet, refrigerator, cooking appliance, bathroom, furniture, bed, carpet, drapes (Note that this is not an exhaustive list).</p> <p>Inside: Kitchen, cabinet, refrigerator, cooking appliance, bathroom, furniture, carpet, drapes (Note that this is not an exhaustive list).</p> <p>Outside: Near refuse enclosure or anywhere garbage is present, eaves of roofing (Note that this is not an exhaustive list).</p>
<b>Deficiency 1 – Infestation: Unit</b>	
<b>Deficiency</b>	Evidence of cockroaches.
<b>Deficiency Criteria</b>	Evidence of cockroaches is found (i.e., a live or dead cockroach, shed skins, droppings, or egg cases).
<b>Health and Safety Determination</b>	Moderate
<b>Correction Timeframe</b>	30 days

<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>Cockroach allergen has been identified as one of the most important asthma triggers for children and severe asthma often results in the need for acute emergency care or hospitalization.</p> <p>If there is evidence of cockroaches, then the resident may be unable to maintain a sanitary environment.</p> <p>If there is evidence of cockroaches, then the resident will likely report this, and the presence of this deficiency may indicate that complaint-based work orders are not being addressed.</p> <p>If there is evidence of cockroaches, then it should be identified through routine maintenance activities and their presence may indicate that self-generated work orders are not being addressed.</p>
<b>Deficiency 1 – Infestation: Inside</b>	
<b>Deficiency</b>	Evidence of cockroaches.
<b>Deficiency Criteria</b>	Evidence of cockroaches is found (i.e., a live or dead cockroach, shed skins, droppings, or egg cases).
<b>Health and Safety Determination</b>	Moderate
<b>Correction Timeframe</b>	30 days
<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>Cockroach allergen has been identified as one of the most important asthma triggers for children and severe asthma often results in the need for acute emergency care or hospitalization.</p> <p>If there is evidence of cockroaches, then the resident may be unable to maintain a sanitary environment.</p> <p>If there is evidence of cockroaches, then the resident will likely report this, and the presence of this deficiency may indicate that complaint-based work orders are not being addressed.</p> <p>If there is evidence of cockroaches, then it should be identified through routine maintenance activities and their presence may indicate that self-generated work orders are not being addressed.</p>

**Deficiency 2 – Infestation: Unit**

<b>Deficiency</b>	Extensive cockroach infestation.
<b>Deficiency Criteria</b>	Sighting of at least one live cockroach in two or more Units during a daytime surface visual assessment.  OR  Sighting of at least one live cockroach in two or more rooms in a Unit during a daytime surface visual assessment.
<b>Health and Safety Determination</b>	Severe
<b>Correction Timeframe</b>	24 hours
<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>Cockroach allergen has been identified as one of the most important asthma triggers for children and severe asthma often results in the need for acute emergency care or hospitalization. Extensive cockroach infestation provides an increased risk of resident contact with cockroach allergen.</p> <p>If there is extensive cockroach infestation, then the resident may be unable to maintain a sanitary environment.</p> <p>If there is extensive cockroach infestation, then the resident will likely report this, and the presence of this deficiency may indicate that complaint-based work orders are not being addressed.</p> <p>If there is extensive cockroach infestation, then it should be identified through routine maintenance activities and their presence may indicate that self-generated work orders are not being addressed.</p>

**Deficiency 2 – Infestation: Inside**

<b>Deficiency</b>	Extensive cockroach infestation.
<b>Deficiency Criteria</b>	Sighting of at least one live cockroach in two or more separate locations in the building is a sign of extensive infestation.
<b>Health and Safety Determination</b>	Moderate
<b>Correction Timeframe</b>	30 days
<b>HCV Correction Timeframe</b>	30 days

<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>Cockroach allergen has been identified as one of the most important asthma triggers for children and severe asthma often results in the need for acute emergency care or hospitalization. Extensive cockroach infestation provides increased risk of resident contact with cockroach allergen. Residents, if they are not in the Unit but within the Inside inspectable area, can avoid lengthy exposure in areas with extensive cockroach infestation.</p> <p>If there is extensive cockroach infestation, then the resident may be unable to maintain a sanitary environment.</p> <p>If there is extensive cockroach infestation, then the resident will likely report this, and the presence of this deficiency may indicate that complaint-based work orders are not being addressed.</p> <p>If there is extensive cockroach infestation, then it should be identified through routine maintenance activities and their presence may indicate that self-generated work orders are not being addressed.</p>
<b>Deficiency 3 – Infestation: Unit</b>	
<b>Deficiency</b>	Evidence of bedbugs.
<b>Deficiency Criteria</b>	Evidence of bedbugs is found (i.e., live or dead bedbugs, feces, eggs, or blood trails).
<b>Health and Safety Determination</b>	Moderate
<b>Correction Timeframe</b>	30 days
<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If there is evidence of bedbugs, then the resident may be subjected to skin irritants.</p> <p>If there is evidence of bedbugs, then the resident may be unable to maintain a sanitary environment.</p> <p>If there is evidence of bedbugs, then the resident will likely report this, and the presence of this deficiency may indicate that complaint-based work orders are not being addressed.</p>
<b>Deficiency 3 – Infestation: Inside</b>	
<b>Deficiency</b>	Evidence of bedbugs.

<b>Deficiency Criteria</b>	Evidence of bedbugs is found (i.e., live or dead bedbugs, feces, eggs, or blood trails).
<b>Health and Safety Determination</b>	Moderate
<b>Correction Timeframe</b>	30 days
<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If there is evidence of bedbugs, then the resident may be subjected to skin irritants.</p> <p>If there is evidence of bedbugs, then the resident may be unable to maintain a sanitary environment.</p> <p>If there is evidence of bedbugs, then it should be identified through routine maintenance activities and their presence may indicate that self-generated work orders are not being addressed.</p>

#### **Deficiency 4 – Infestation: Unit**

<b>Deficiency</b>	Extensive bedbug infestation.
<b>Deficiency Criteria</b>	<p>Sighting of at least one live bedbug in two or more Units during a daytime surface visual assessment.</p> <p>OR</p> <p>Sighting of at least one live bedbug in two or more rooms in a Unit during a daytime surface visual assessment.</p>
<b>Health and Safety Determination</b>	Severe
<b>Correction Timeframe</b>	24 hours
<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If there is extensive bedbug infestation, then the resident may be subjected to skin irritants.</p> <p>If there is extensive bedbug infestation, then the resident may be unable to maintain a sanitary environment.</p>

If there is extensive bedbug infestation, then the resident will likely report this, and the presence of this deficiency may indicate that complaint-based work orders are not being addressed.

#### **Deficiency 4 – Infestation: Inside**

<b>Deficiency</b>	Extensive bedbug infestation.
<b>Deficiency Criteria</b>	Sighting of at least one live bedbug in two or more separate locations in the building is a sign of extensive infestation.
<b>Health and Safety Determination</b>	Moderate
<b>Correction Timeframe</b>	30 days
<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If there is extensive bedbug infestation, then the resident may be subjected to skin irritants. Residents, if they are not in the Unit but within the Inside inspectable area, can avoid lengthy exposure in areas with extensive bedbug infestation.</p> <p>If there is extensive bedbug infestation, then the resident may be unable to maintain a sanitary environment.</p> <p>If there is extensive bedbug infestation, then it should be identified through routine maintenance activities and their presence may indicate that self-generated work orders are not being addressed.</p>

#### **Deficiency 5 – Infestation: Unit**

<b>Deficiency</b>	Evidence of mice.
<b>Deficiency Criteria</b>	Evidence of mice is found (i.e., a live or dead mouse or mice, droppings, chewed holes, or urine trails).
<b>Health and Safety Determination</b>	Moderate
<b>Correction Timeframe</b>	30 days
<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	If there is evidence of mice, then the resident may be exposed to infectious diseases.

If there is evidence of mice, then the resident may be unable to maintain a sanitary environment.

If there is evidence of mice, then the resident will likely report this, and the presence of this deficiency may indicate that complaint-based work orders are not being addressed.

If there is evidence of mice, then it should be identified through routine maintenance activities and their presence may indicate that self-generated work orders are not being addressed.

#### **Deficiency 5 – Infestation: Inside**

<b>Deficiency</b>	Evidence of mice.
<b>Deficiency Criteria</b>	Evidence of mice is found (i.e., a live or dead mouse or mice, droppings, chewed holes, or urine trails).
<b>Health and Safety Determination</b>	Moderate
<b>Correction Timeframe</b>	30 days
<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If there is evidence of mice, then the resident may be exposed to infectious diseases.</p> <p>If there is evidence of mice, then the resident may be unable to maintain a sanitary environment.</p> <p>If there is evidence of mice, then the resident will likely report this, and the presence of this deficiency may indicate that complaint-based work orders are not being addressed.</p> <p>If there is evidence of mice, then it should be identified through routine maintenance activities and their presence may indicate that self-generated work orders are not being addressed.</p>

#### **Deficiency 6 – Infestation: Unit**

<b>Deficiency</b>	Extensive mouse infestation.
<b>Deficiency Criteria</b>	<p>Sighting of at least one live mouse in two or more Units during a daytime surface visual assessment.</p> <p>OR</p>

	Sighting of at least one live mouse in two or more rooms in a Unit during a daytime surface visual assessment.
<b>Health and Safety Determination</b>	Severe
<b>Correction Timeframe</b>	24 hours
<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If there is extensive mouse infestation, then the resident may be exposed to infectious diseases.</p> <p>If there is extensive mouse infestation, then the resident may be unable to maintain a sanitary environment.</p> <p>If there is extensive mouse infestation, then the resident will likely report this, and the presence of this deficiency may indicate that complaint-based work orders are not being addressed.</p> <p>If there is extensive mouse infestation, then it should be identified through routine maintenance activities and their presence may indicate that self-generated work orders are not being addressed.</p>

#### **Deficiency 6 – Infestation: Inside**

<b>Deficiency</b>	Extensive mouse infestation.
<b>Deficiency Criteria</b>	Sighting of at least one live mouse in two or more separate locations in the building during a daytime surface visual assessment.
<b>Health and Safety Determination</b>	Moderate
<b>Correction Timeframe</b>	30 days
<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If there is extensive mouse infestation, then the resident may be exposed to infectious diseases. Residents, if they are not in the Unit but within the Inside inspectable area, can avoid lengthy exposure in areas with extensive mouse infestation.</p> <p>If there is extensive mouse infestation, then the resident may be unable to maintain a sanitary environment.</p>

If there is extensive mouse infestation, then the resident will likely report this, and the presence of this deficiency may indicate that complaint-based work orders are not being addressed.

If there is extensive mouse infestation, then it should be identified through routine maintenance activities and their presence may indicate that self-generated work orders are not being addressed.

#### Deficiency 7 – Infestation: Unit

<b>Deficiency</b>	Evidence of rats.
<b>Deficiency Criteria</b>	Evidence of rats is found (i.e., dead rat or rats, droppings, or chewed holes).
<b>Health and Safety Determination</b>	Moderate
<b>Correction Timeframe</b>	30 days
<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If there is evidence of rats, then the resident may be exposed to infectious diseases.</p> <p>If there is evidence of rats, then the resident may be unable to maintain a sanitary environment.</p> <p>If there is evidence of rats, then the resident will likely report this, and the presence of this deficiency may indicate that complaint-based work orders are not being addressed.</p> <p>If there is evidence of rats, then it should be identified through routine maintenance activities and their presence may indicate that self-generated work orders are not being addressed.</p>

#### Deficiency 7 – Infestation: Inside

<b>Deficiency</b>	Evidence of rats.
<b>Deficiency Criteria</b>	Evidence of rats is found (i.e., dead rat or rats, droppings, or chewed holes).
<b>Health and Safety Determination</b>	Moderate
<b>Correction Timeframe</b>	30 days
<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail

<b>Rationale</b>	<p>If there is evidence of rats, then the resident may be exposed to infectious diseases.</p> <p>If there is evidence of rats, then the resident may be unable to maintain a sanitary environment.</p> <p>If there is evidence of rats, then the resident will likely report this, and the presence of this deficiency may indicate that complaint-based work orders are not being addressed.</p> <p>If there is evidence of rats, then it should be identified through routine maintenance activities and their presence may indicate that self-generated work orders are not being addressed.</p>
<b>Deficiency 7 – Infestation: Outside</b>	
<b>Deficiency</b>	Evidence of rats.
<b>Deficiency Criteria</b>	Evidence of rats is found (i.e., a live or dead rat or rats, droppings, or chewed holes).
<b>Health and Safety Determination</b>	Moderate
<b>Correction Timeframe</b>	30 days
<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If there is evidence of rats, then the resident may be exposed to infectious diseases.</p> <p>If there is evidence of rats, then the resident may be unable to maintain a sanitary environment.</p> <p>If there is evidence of rats, then the resident will likely report this, and the presence of this deficiency may indicate that complaint-based work orders are not being addressed.</p> <p>If there is evidence of rats, then it should be identified through routine maintenance activities and their presence may indicate that self-generated work orders are not being addressed.</p>
<b>Deficiency 8 – Infestation: Unit</b>	
<b>Deficiency</b>	Extensive rat infestation.
<b>Deficiency Criteria</b>	Live rat is seen in the Unit.

<b>Health and Safety Determination</b>	Severe
<b>Correction Timeframe</b>	24 hours
<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If there is extensive rat infestation, then the resident may be exposed to infectious diseases.</p> <p>If there is extensive rat infestation, then the resident may be unable to maintain a sanitary environment.</p> <p>If there is extensive rat infestation, then the resident will likely report this, and the presence of this deficiency may indicate that complaint-based work orders are not being addressed.</p> <p>If there is extensive rat infestation, then it should be identified through routine maintenance activities and their presence may indicate that self-generated work orders are not being addressed.</p>

#### **Deficiency 8 – Infestation: Inside**

<b>Deficiency</b>	Extensive rat infestation.
<b>Deficiency Criteria</b>	Live rat is seen in the Inside.
<b>Health and Safety Determination</b>	Severe
<b>Correction Timeframe</b>	24 hours
<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If there is extensive rat infestation, then the resident may be exposed to infectious diseases. Residents, if they are not in the Unit but within the Inside inspectable area, can avoid lengthy exposure in areas with extensive rat infestation.</p> <p>If there is extensive rat infestation, then the resident may be unable to maintain a sanitary environment.</p> <p>If there is extensive rat infestation, then the resident will likely report this, and the presence of this deficiency may indicate that complaint-based work orders are not being addressed.</p>

If there is extensive rat infestation, then it should be identified through routine maintenance activities and their presence may indicate that self-generated work orders are not being addressed.

#### Deficiency 9 – Infestation: Unit

<b>Deficiency</b>	Evidence of other pests.
<b>Deficiency Criteria</b>	Evidence is present of pest infestation other than cockroaches, bed bugs, mice, or rats. This may include, but is not limited to, wasps/wasp nests or bees/bee-hives, squirrels or squirrel nests, birds, or bats. Pests are animals with potential impacts on resident health and safety.
<b>Health and Safety Determination</b>	Moderate
<b>Correction Timeframe</b>	30 days
<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If there is evidence of infestation, then the resident may be exposed to infectious diseases.</p> <p>If there is evidence of infestation, then the resident may be unable to maintain a sanitary environment.</p> <p>If there is evidence of infestation, then the resident will likely report this, and the presence of this deficiency may indicate that complaint-based work orders are not being addressed.</p> <p>If there is evidence of infestation, then it should be identified through routine maintenance activities and their presence may indicate that self-generated work orders are not being addressed.</p>

#### Deficiency 9 – Infestation: Inside

<b>Deficiency</b>	Evidence of other pests.
<b>Deficiency Criteria</b>	Evidence is present of pest infestation other than cockroaches, bed bugs, mice, or rats. This may include, but is not limited to, wasps/wasp nests or bees/bee-hives, squirrels or squirrel nests, birds, or bats. Pests are animals with potential impacts on resident health and safety.
<b>Health and Safety Determination</b>	Moderate
<b>Correction Timeframe</b>	30 days

<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If there is evidence of infestation, then the resident may be exposed to infectious diseases.</p> <p>If there is evidence of infestation, then the resident may be unable to maintain a sanitary environment.</p> <p>If there is evidence of infestation, then the resident will likely report this, and the presence of this deficiency may indicate that complaint-based work orders are not being addressed.</p> <p>If there is evidence of infestation, then it should be identified through routine maintenance activities and their presence may indicate that self-generated work orders are not being addressed.</p>

**TABLE 33—LEAK – GAS OR OIL STANDARD**

<b>Definition and Location</b>	
<b>Definition</b>	A fuel or gas leak refers to an unintended leak of natural gas or another gaseous product from a pipeline or other containment into any area where the gas or fuel should not be present. Gas leaks can be hazardous to health and the environment.
<b>Location</b>	<p>Unit: Near fuel-burning appliance, piping that supplies fuel-burning appliance</p> <p>Inside: Near fuel-burning appliance, piping that supplies fuel-burning appliance</p> <p>Outside: Near fuel-burning appliance, piping that supplies fuel-burning appliance</p>
<b>Deficiency 1 – Leak – Gas or Oil: Unit</b>	
<b>Deficiency</b>	Natural gas, propane, or oil leak.
<b>Deficiency Criteria</b>	<p>There is evidence of a gas, propane, or oil leak.</p> <p>OR</p> <p>There is an uncapped gas or fuel supply line.</p>
<b>Health and Safety Determination</b>	Life-Threatening
<b>Correction Timeframe</b>	24 hours

<b>HCV Correction Timeframe</b>	24 hours
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If there is evidence of a gas, propane, or oil leak, or there is an uncapped gas or fuel supply line, then the resident may be exposed to harmful gases and be at an increased risk of asphyxiation, which may result in death.</p> <p>If there is evidence of a gas, propane, or oil leak, or there is an uncapped gas or fuel supply line, then there may be an increased safety risk to the resident of fire or explosion, which may result in injury or death.</p> <p>If there is evidence of a gas, propane or oil leak, or there is an uncapped gas or fuel supply line, then the resident may not be able to operate the affected appliances, which are expected to be provided and maintained as part of their rent.</p> <p>A resident is likely to notice evidence of a gas, propane, or oil leak, or that there is an uncapped gas or fuel supply line within the unit, and to recognize it is important enough to report to property management because it may present health or safety hazards. Property management should be expected to prioritize a work order for evidence of a gas, propane, or oil leak because it may result in health or safety hazards.</p>

#### **Deficiency 1 – Leak – Gas or Oil: Inside**

<b>Deficiency</b>	Natural gas, propane, or oil leak.
<b>Deficiency Criteria</b>	<p>There is evidence of a gas, propane, or oil leak.</p> <p>OR</p> <p>There is an uncapped gas or fuel supply line.</p>
<b>Health and Safety Determination</b>	Life-Threatening
<b>Correction Timeframe</b>	24 hours
<b>HCV Correction Timeframe</b>	24 hours
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If there is evidence of a gas, propane, or oil leak, or there is an uncapped gas or fuel supply line, then the resident may be exposed to harmful gases and be at an increased risk of asphyxiation, which may result in death.</p>

If there is evidence of a gas, propane, or oil leak, or there is an uncapped gas or fuel supply line, then there may be an increased safety risk to the resident of fire or explosion, which may result in injury or death.

If there is evidence of a gas, propane or oil leak, or there is an uncapped gas or fuel supply line, then the resident may not be able to operate the affected appliances, which are expected to be provided and maintained as part of their rent.

Property management would be expected to ensure that staff members understand how to identify evidence of a gas, propane, or oil leak or there is an uncapped gas or fuel supply line. Management practices would be expected to assure prompt creation and prioritization of a work order to remedy the leak, because it may result in health and safety hazards.

#### **Deficiency 1 – Leak – Gas or Oil: Outside**

<b>Deficiency</b>	Natural gas, propane, or oil leak.
<b>Deficiency Criteria</b>	There is evidence of a gas, propane, or oil leak.  OR  There is an uncapped gas or fuel supply line.
<b>Health and Safety Determination</b>	Life-Threatening
<b>Correction Timeframe</b>	24 hours
<b>HCV Correction Timeframe</b>	24 hours
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If there is evidence of a gas, propane, or oil leak, or there is an uncapped gas or fuel supply line, then the resident may be exposed to harmful gases and be at an increased risk of illness.</p> <p>If there is evidence of a gas, propane, or oil leak, or there is an uncapped gas or fuel supply line, then there may be an increased safety risk to the resident of fire or explosion, which may result in injury or death.</p> <p>If there is evidence of a gas, propane or oil leak, or there is an uncapped gas or fuel supply line, then the resident may not be able to operate the affected appliances, which are expected to be provided and maintained as part of their rent.</p> <p>Property management would be expected to ensure that staff members understand how to identify evidence of a gas, propane, or oil leak or there is an uncapped gas or fuel supply line. Management practices would be</p>

---

expected to assure prompt creation and prioritization of a work order to remedy the leak, because it may result in health and safety hazards.

---

**TABLE 34—LEAK – SEWAGE SYSTEM STANDARD**

<b>Definition and Location</b>	
<b>Definition</b>	A sewage system leak refers to the leakage of wastewater out of a sanitary sewer system.
<b>Location</b>	Unit: Drains, toilets, vents, sewer cleanout, cap Inside: Drains, toilets, vents, sewer cleanout, cap Outside: Sewer cleanout, cap
<b>Deficiency 1 – Leak – Sewage System: Unit</b>	
<b>Deficiency</b>	Blocked sewage system.
<b>Deficiency Criteria</b>	Wastewater is unable to drain resulting in sewer backup.
<b>Health and Safety Determination</b>	Severe
<b>Correction Timeframe</b>	24 hours
<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If wastewater is unable to drain resulting in sewer backup, then the resident may be exposed to raw sewage. If wastewater is unable to drain resulting in sewer backup, then the resident may not have access to the use of a toilet or shower.</p> <p>If wastewater is unable to drain resulting in sewer backup, then the resident will likely report this, and the presence of this deficiency may indicate that complaint-based work orders are not being addressed.</p> <p>It is reasonable to expect this deficiency will be observed through routine maintenance, and the presence of this deficiency may indicate that routine work orders are not being addressed.</p> <p>Sewage systems should be checked during periodic property inspections, and according to industry best practices, should be included in a preventative maintenance plan. If wastewater is unable to drain resulting in sewer backup, then it may indicate preventative maintenance activities could be improved.</p> <p>If wastewater is unable to drain resulting in sewer backup, then the repair may be costly depending on the scope of the deficiency.</p>

---

**Deficiency 1 – Leak – Sewage System: Inside**

<b>Deficiency</b>	Blocked sewage system.
<b>Deficiency Criteria</b>	Wastewater is unable to drain resulting in sewer backup.
<b>Health and Safety Determination</b>	Severe
<b>Correction Timeframe</b>	24 hours
<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If wastewater is unable to drain resulting in sewer backup, then the resident may be exposed to raw sewage. If wastewater is unable to drain resulting in sewer backup, then the resident may not have access to the use of a toilet or shower.</p> <p>If wastewater is unable to drain resulting in sewer backup, then the resident will likely report this, and the presence of this deficiency may indicate that complaint-based work orders are not being addressed.</p> <p>It is reasonable to expect this deficiency will be observed through routine maintenance, and the presence of this deficiency may indicate that routine work orders are not being addressed.</p> <p>Sewage systems should be checked during periodic property inspections, and according to industry best practices, should be included in a preventative maintenance plan. If wastewater is unable to drain resulting in sewer backup, then it may indicate preventative maintenance activities could be improved.</p> <p>If wastewater is unable to drain resulting in sewer backup, then the repair may be costly depending on the scope of the deficiency.</p>

**Deficiency 1 – Leak – Sewage System: Outside**

<b>Deficiency</b>	Blocked sewage system.
<b>Deficiency Criteria</b>	Wastewater is unable to drain resulting in sewer backup.
<b>Health and Safety Determination</b>	Severe
<b>Correction Timeframe</b>	24 hours
<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If wastewater is unable to drain resulting in sewer backup, then the resident may be exposed to raw sewage. If wastewater is unable to drain resulting in</p>

sewer backup, then the resident may not have access to the use of a toilet or shower.

If wastewater is unable to drain resulting in sewer backup, then the resident will likely report this, and the presence of this deficiency may indicate that complaint-based work orders are not being addressed.

It is reasonable to expect this deficiency will be observed through routine maintenance, and the presence of this deficiency may indicate that routine work orders are not being addressed.

Sewage systems should be checked during periodic property inspections, and according to industry best practices, should be included in a preventative maintenance plan. If wastewater is unable to drain resulting in sewer backup, then it may indicate preventative maintenance activities could be improved.

If wastewater is unable to drain resulting in sewer backup, then the repair may be costly depending on the scope of the deficiency.

#### **Deficiency 2 – Leak – Sewage System: Unit**

<b>Deficiency</b>	Leak in sewage system.
<b>Deficiency Criteria</b>	There is evidence of a sewer line or fitting leaking.
<b>Health and Safety Determination</b>	Severe
<b>Correction Timeframe</b>	24 hours
<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If there is evidence of a sewer line or fitting leaking, then the resident may be exposed to raw sewage.</p> <p>If sewer has a leak, then the resident may be exposed to raw sewage.</p> <p>If there is evidence of a sewer line or fitting leaking, then the resident may not have access to the use of a toilet or shower.</p> <p>If there is evidence of a sewer line or fitting leaking, then the resident will likely report this, and the presence of this deficiency may indicate that complaint-based work orders are not being addressed.</p> <p>It is reasonable to expect this deficiency will be observed through routine maintenance, and the presence of this deficiency may indicate that routine work orders are not being addressed.</p> <p>Sewage systems should be checked during periodic property inspections, and according to industry best practices, should be included in a preventative maintenance plan. If there is evidence of a sewer line or fitting</p>

leaking, then it may indicate preventative maintenance activities could be improved.

If there is evidence of a sewer line or fitting leaking, then the repair may be costly depending on the scope of the deficiency.

#### **Deficiency 2 – Leak – Sewage System: Inside**

<b>Deficiency</b>	Leak in sewage system.
<b>Deficiency Criteria</b>	There is evidence of a sewer line or fitting leaking.
<b>Health and Safety Determination</b>	Severe
<b>Correction Timeframe</b>	24 hours
<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If there is evidence of a sewer line or fitting leaking, then the resident may be exposed to raw sewage.</p> <p>If sewer has a leak, then the resident may be exposed to raw sewage.</p> <p>If there is evidence of a sewer line or fitting leaking, then the resident may not have access to the use of a toilet or shower.</p> <p>If there is evidence of a sewer line or fitting leaking, then the resident will likely report this, and the presence of this deficiency may indicate that complaint-based work orders are not being addressed.</p> <p>It is reasonable to expect this deficiency will be observed through routine maintenance, and the presence of this deficiency may indicate that routine work orders are not being addressed.</p> <p>Sewage systems should be checked during periodic property inspections, and according to industry best practices, should be included in a preventative maintenance plan. If there is evidence of a sewer line or fitting leaking, then it may indicate preventative maintenance activities could be improved.</p> <p>If there is evidence of a sewer line or fitting leaking, then the repair may be costly depending on the scope of the deficiency.</p>

#### **Deficiency 2 – Leak – Sewage System: Outside**

<b>Deficiency</b>	Leak in sewage system.
<b>Deficiency Criteria</b>	There is evidence of a sewer line or fitting leaking.
<b>Health and Safety Determination</b>	Severe

<b>Correction Timeframe</b>	24 hours
<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If there is evidence of a sewer line or fitting leaking, then the resident may be exposed to raw sewage.</p> <p>If sewer has a leak, then the resident may be exposed to raw sewage.</p> <p>If there is evidence of a sewer line or fitting leaking, then the resident may not have access to the use of a toilet or shower.</p> <p>If there is evidence of a sewer line or fitting leaking, then the resident will likely report this, and the presence of this deficiency may indicate that complaint-based work orders are not being addressed.</p> <p>It is reasonable to expect this deficiency will be observed through routine maintenance, and the presence of this deficiency may indicate that routine work orders are not being addressed.</p> <p>Sewage systems should be checked during periodic property inspections, and according to industry best practices, should be included in a preventative maintenance plan. If there is evidence of a sewer line or fitting leaking, then it may indicate preventative maintenance activities could be improved.</p> <p>If there is evidence of a sewer line or fitting leaking, then the repair may be costly depending on the scope of the deficiency.</p>

### **Deficiency 3 – Leak – Sewage System: Unit**

<b>Deficiency</b>	Cap to the cleanout or pump cover is detached or missing.
<b>Deficiency Criteria</b>	Cap to the cleanout or pump cover is detached or missing (i.e., evidence of prior installation, but now not present or is incomplete).
<b>Health and Safety Determination</b>	Moderate
<b>Correction Timeframe</b>	30 days
<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If the cap to the cleanout or pump cover is detached or missing, then the resident may be exposed to raw sewage or sewage gases, which may result in illness.</p> <p>Property management would be expected to ensure that staff members understand how to identify if a cap to the cleanout or pump cover is</p>

detached or missing. Management practices would be expected to assure prompt creation and prioritization of a work order to remedy this defect because it may result in health hazards.

### Deficiency 3 – Leak – Sewage System: Inside

<b>Deficiency</b>	Cap to the cleanout or pump cover is detached or missing.
<b>Deficiency Criteria</b>	Cap to the cleanout or pump cover is detached or missing (i.e., evidence of prior installation, but now not present or is incomplete).
<b>Health and Safety Determination</b>	Moderate
<b>Correction Timeframe</b>	30 days
<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If the cap to the cleanout or pump cover is detached or missing, then the resident may be exposed to raw sewage or sewage gases, which may result in illness.</p> <p>Property management would be expected to ensure that staff members understand how to identify if a cap to the cleanout or pump cover is detached or missing. Management practices would be expected to assure prompt creation and prioritization of a work order to remedy this defect because it may result in health hazards.</p>

### Deficiency 3 – Leak – Sewage System: Outside

<b>Deficiency</b>	Cap to the cleanout or pump cover is detached or missing.
<b>Deficiency Criteria</b>	Cap to the cleanout or pump cover is detached or missing (i.e., evidence of prior installation, but now not present or is incomplete).
<b>Health and Safety Determination</b>	Moderate
<b>Correction Timeframe</b>	30 days
<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If the cap to the cleanout or pump cover is detached or missing, then the resident may be exposed to raw sewage or sewage gases, which may result in illness.</p> <p>Property management would be expected to ensure that staff members understand how to identify if a cap to the cleanout or pump cover is detached or missing. Management practices would be expected to assure</p>

prompt creation and prioritization of a work order to remedy this defect because it may result in health hazards.

#### Deficiency 4 – Leak – Sewage System: Unit

<b>Deficiency</b>	Cleanout cap or riser is damaged.
<b>Deficiency Criteria</b>	Cleanout cap or riser is damaged (i.e., visibly defective; impacts functionality).
<b>Health and Safety Determination</b>	Moderate
<b>Correction Timeframe</b>	30 days
<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If the cleanout cap or riser is damaged, then the resident may be exposed to raw sewage or sewage gases, which may result in illness.</p> <p>Property management would be expected to ensure that staff members understand how to identify if a cleanout cap or riser is damaged. Management practices would be expected to assure prompt creation and prioritization of a work order to remedy this defect, because it may result in health hazards.</p>

#### Deficiency 4 – Leak – Sewage System: Inside

<b>Deficiency</b>	Cleanout cap or riser is damaged.
<b>Deficiency Criteria</b>	Cleanout cap or riser is damaged (i.e., visibly defective; impacts functionality).
<b>Health and Safety Determination</b>	Moderate
<b>Correction Timeframe</b>	30 days
<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If the cleanout cap or riser is damaged, then the resident may be exposed to raw sewage or sewage gases, which may result in illness.</p> <p>Property management would be expected to ensure that staff members understand how to identify if a cleanout cap or riser is damaged. Management practices would be expected to assure prompt creation and prioritization of a work order to remedy this defect, because it may result in health hazards.</p>

#### Deficiency 4 – Leak – Sewage System: Outside

<b>Deficiency</b>	Cleanout cap or riser is damaged.
<b>Deficiency Criteria</b>	Cleanout cap or riser is damaged (i.e., visibly defective; impacts functionality).
<b>Health and Safety Determination</b>	Moderate
<b>Correction Timeframe</b>	30 days
<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If the cleanout cap or riser is damaged, then the resident may be exposed to raw sewage or sewage gases, which may result in illness.</p> <p>Property management would be expected to ensure that staff members understand how to identify if a cleanout cap or riser is damaged. Management practices would be expected to assure prompt creation and prioritization of a work order to remedy this defect, because it may result in health hazards.</p>

**TABLE 35—LEAK – WATER STANDARD**

<b>Definition and Location</b>	
<b>Definition</b>	A water leak can be caused by damage; including a puncture, gash, rust or other corrosion hole, very tiny pinhole leak (possibly in imperfect welds), crack or microcrack, or inadequate sealing between components or parts joined together.
<b>Location</b>	<p>Unit: Ceilings, floors, walls, sinks, dishwashers, washer, water heaters, central water supply lines, drainpipes, sprinkler assembly, plumbing system</p> <p>Inside: Ceilings, floors, walls, sinks, dishwashers, washer, water heaters, central water supply lines, drainpipes, sprinkler assembly, plumbing system</p> <p>Outside: Central water supply lines, sprinkler assembly, plumbing system</p>
<b>Deficiency 1 – Leak – Water: Unit</b>	
<b>Deficiency</b>	Environmental water intrusion.
<b>Deficiency Criteria</b>	Water from the exterior environment is leaking into the interior.
<b>Health and Safety Determination</b>	Moderate
<b>Correction Timeframe</b>	30 days

<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If water from the exterior environment is leaking into the interior, then this may increase interior moisture levels, which provides an environment favorable for mold growth and may trigger respiratory issues.</p> <p>A resident is likely to notice if water from the exterior environment is leaking into the interior and to recognize it is important enough to report it to property management because it may result in potential health hazards. Property management should be expected to prioritize a work order to remedy this defect because it may result in health hazards.</p>

#### **Deficiency 1 – Leak – Water: Inside**

<b>Deficiency</b>	Environmental water intrusion.
<b>Deficiency Criteria</b>	Water from the exterior environment is leaking into the interior.
<b>Health and Safety Determination</b>	Moderate
<b>Correction Timeframe</b>	30 days
<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If water from the exterior environment is leaking into the interior, then this may increase interior moisture levels, which provides an environment favorable for mold growth and may trigger respiratory issues.</p> <p>Property management would be expected to ensure that staff members understand how to identify if water from the exterior environment is leaking into the interior. Management practices would be expected to assure prompt creation and prioritization of a work order to remedy this defect because it may result in potential health hazards.</p>

#### **Deficiency 2 – Leak – Water: Unit**

<b>Deficiency</b>	Plumbing leak.
<b>Deficiency Criteria</b>	Failure of a plumbing system that allows for water intrusion in unintended areas.
<b>Health and Safety Determination</b>	Moderate
<b>Correction Timeframe</b>	30 days
<b>HCV Correction Timeframe</b>	30 days

<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If there is a plumbing leak, then this may increase interior moisture levels, which provides an environment favorable for mold growth and may trigger respiratory issues.</p> <p>If there is a plumbing leak, then the resident may be unable to use a fixture or appliance that is expected to be provided and maintained as part of their rent.</p> <p>A resident is likely to notice if there is a plumbing leak and to recognize it is important enough to report it to property management because it may result in potential health hazards or usability barriers. Property management should be expected to prioritize a work order to remedy this defect because it may result in health hazards.</p>

#### **Deficiency 2 – Leak – Water: Inside**

<b>Deficiency</b>	Plumbing leak.
<b>Deficiency Criteria</b>	Failure of a plumbing system that allows for water intrusion in unintended areas.
<b>Health and Safety Determination</b>	Moderate
<b>Correction Timeframe</b>	30 days
<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If there is a plumbing leak, then this may increase interior moisture levels, which provides an environment favorable for mold growth and may trigger respiratory issues.</p> <p>If there is a plumbing leak, then the resident may be unable to use a fixture or appliance that is expected to be provided and maintained as part of their rent.</p> <p>Property management would be expected to ensure that staff members understand how to identify a plumbing leak. Management practices would be expected to assure prompt creation and prioritization of a work order to remedy this defect because it may result in potential health hazards.</p>

#### **Deficiency 2 – Leak – Water: Outside**

<b>Deficiency</b>	Plumbing leak.
<b>Deficiency Criteria</b>	Failure of a plumbing system that allows for water intrusion in unintended areas.
<b>Health and Safety Determination</b>	Low

<b>Correction Timeframe</b>	60 Days
<b>HCV Correction Timeframe</b>	N/A
<b>HCV Pass/Fail</b>	Pass
<b>Rationale</b>	<p>If there is a plumbing leak, then the resident may be unable to use a fixture or appliance that is expected to be provided and maintained as part of their rent.</p> <p>Property management would be expected to ensure that staff members understand how to identify a plumbing leak. Management practices would be expected to assure prompt creation and prioritization of a work order to remedy this defect because it may result in usability barriers.</p>

#### Deficiency 3 – Leak – Water: Unit

<b>Deficiency</b>	Fluid is leaking from the sprinkler assembly.
<b>Deficiency Criteria</b>	Fluid is leaking from the sprinkler assembly.
<b>Health and Safety Determination</b>	Moderate
<b>Correction Timeframe</b>	30 days
<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If fluid is leaking from the sprinkler assembly, then this may increase interior moisture levels, which provides an environment favorable for mold growth and may trigger respiratory issues.</p> <p>A resident is likely to notice if fluid is leaking from the sprinkler assembly and to recognize it is important enough to report it to property management because it may result in potential health hazards. Property management should be expected to prioritize a work order to remedy this defect because it may result in health hazards.</p>

#### Deficiency 3 – Leak – Water: Inside

<b>Deficiency</b>	Fluid is leaking from the sprinkler assembly.
<b>Deficiency Criteria</b>	Fluid is leaking from the sprinkler assembly.
<b>Health and Safety Determination</b>	Moderate
<b>Correction Timeframe</b>	30 days
<b>HCV Correction Timeframe</b>	30 days

<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If fluid is leaking from the sprinkler assembly, then this may increase interior moisture levels, which provides an environment favorable for mold growth and may trigger respiratory issues.</p> <p>Property management would be expected to ensure that staff members understand how to identify if fluid is leaking from the sprinkler assembly. Management practices would be expected to assure prompt creation and prioritization of a work order to remedy this defect because it may result in potential health hazards.</p>
<b>Deficiency 3 – Leak – Water: Outside</b>	
<b>Deficiency</b>	Fluid is leaking from the sprinkler assembly.
<b>Deficiency Criteria</b>	Fluid is leaking from the sprinkler assembly.
<b>Health and Safety Determination</b>	Low
<b>Correction Timeframe</b>	60 Days
<b>HCV Correction Timeframe</b>	N/A
<b>HCV Pass/Fail</b>	Pass
<b>Rationale</b>	Property management would be expected to ensure that staff members understand how to identify if fluid is leaking from the sprinkler assembly. Management practices would be expected to assure prompt creation and prioritization of a work order to remedy this defect because it may cause property damage.

**TABLE 36—LIGHTING – AUXILIARY STANDARD**

<b>Definition and Location</b>	
<b>Definition</b>	Lighting that is essential to safety in the event of primary power supply failure.
<b>Location</b>	<p>Inside: Throughout the Inside.</p> <p>Outside: Throughout the Outside.</p>
<b>Deficiency 1 – Lighting – Auxiliary: Inside</b>	
<b>Deficiency</b>	Auxiliary lighting is damaged, missing, or fails to illuminate when tested.
<b>Deficiency Criteria</b>	Auxiliary lighting is damaged (i.e., visibly defective; impacts functionality), missing (i.e., evidence of prior installation, but is now not present or is incomplete), or fails to illuminate when tested.

<b>Health and Safety Determination</b>	Severe
<b>Correction Timeframe</b>	24 hours
<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If the auxiliary lighting is damaged, missing, or fails to illuminate when tested, and there is an emergency, then the resident may be unable to safely exit the building due to inability to see the egress.</p> <p>If the auxiliary lighting is damaged, missing, or fails to illuminate when tested, then the resident may be unable to use a feature that is expected to be provided and maintained as part of their rent.</p> <p>Property management would be expected to ensure that staff members understand how to identify an auxiliary light that is damaged, missing, or fails to illuminate when tested. Management practices would be expected to ensure prompt creation and prioritization of a work order to remedy this deficiency because it may result in safety hazards or usability barriers.</p>

#### **Deficiency 1 – Lighting – Auxiliary: Outside**

<b>Deficiency</b>	Auxiliary lighting is damaged, missing, or fails to illuminate when tested.
<b>Deficiency Criteria</b>	Auxiliary lighting is damaged (i.e., visibly defective; impacts functionality), missing (i.e., evidence of prior installation, but is now not present or is incomplete), or fails to illuminate when tested.
<b>Health and Safety Determination</b>	Severe
<b>Correction Timeframe</b>	24 hours
<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If the auxiliary lighting is damaged, missing, or fails to illuminate when tested, and there is an emergency, then the resident may be unable to safely exit the building due to inability to see the egress.</p> <p>If the auxiliary lighting is damaged, missing, or fails to illuminate when tested, then the resident may be unable to use a feature that is expected to be provided and maintained as part of their rent.</p>

Property management would be expected to ensure that staff members understand how to identify an auxiliary light that is damaged, missing, or fails to illuminate when tested. Management practices would be expected to ensure prompt creation and prioritization of a work order to remedy this deficiency because it may result in safety hazards or usability barriers.

**TABLE 37—LIGHTING – EXTERIOR STANDARD**

<b>Definition and Location</b>	
<b>Definition</b>	Fixed artificial lighting (e.g., walkway lighting, pole lighting, wall packs, and canopy lights) that is used to illuminate exterior areas (e.g., entryways, parking lots, and exterior stairwells).
<b>Location</b>	Outside: Throughout the Outside.
<b>Deficiency 1 – Lighting – Exterior: Outside</b>	
<b>Deficiency</b>	A permanently installed light fixture is damaged, inoperable, missing, or not secure.
<b>Deficiency Criteria</b>	<p>A permanently installed light fixture is damaged (i.e., visibly defective; impacts functionality).</p> <p>OR</p> <p>A permanently installed light fixture is inoperable (i.e., overall system or component thereof is not meeting function or purpose; with or without visible damage).</p> <p>OR</p> <p>A permanently installed light fixture is missing (i.e., evidence of prior installation, but now not present or is incomplete).</p> <p>OR</p> <p>A permanently installed light fixture is not secure to the designed attachment point or the attachment point is not stable.</p>
<b>Health and Safety Determination</b>	Moderate
<b>Correction Timeframe</b>	30 days
<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail

<b>Rationale</b>	<p>If a permanently installed light fixture is damaged, inoperable, missing, or not secure, then conditions may be present that may result in a short or arc, which may lead to an increased fire risk that could cause injury.</p> <p>Property management would be expected to ensure that staff members understand how to identify a permanently installed light fixture that is damaged, inoperable, missing, or not secure. Management practices would be expected to assure prompt creation and prioritization of a work order to remedy this deficiency because it may result in safety hazards.</p>
------------------	--

**TABLE 38—LIGHTING – INTERIOR STANDARD**

<b>Definition and Location</b>	
<b>Definition</b>	Permanently installed light fixture.
<b>Location</b>	Unit: Throughout the Unit.  Inside: Throughout the Inside.
<b>Deficiency 1 – Lighting – Interior: Unit</b>	
<b>Deficiency</b>	A permanently installed light fixture is inoperable.
<b>Deficiency Criteria</b>	A permanently installed light fixture is inoperable (i.e., the overall system or component thereof is not meeting function or purpose; with or without visible damage).
<b>Health and Safety Determination</b>	Moderate
<b>Correction Timeframe</b>	30 days
<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If a permanently installed light fixture is inoperable, then it may indicate conditions are present that may result in a short or arc, which may lead to an increased fire risk that could cause injury.</p> <p>If a permanently installed light fixture is inoperable, then the resident may not be able to fully use a fixture that is expected to be provided and maintained as part of their rent.</p> <p>A resident is likely to notice if a permanently installed light fixture is inoperable and to recognize it is important enough to report it to property management because it may present safety hazards or usability barriers.</p>

Property management should be expected to prioritize a work order to remedy this deficiency because it may result in safety hazards.

#### **Deficiency 1 – Lighting – Interior: Inside**

<b>Deficiency</b>	A permanently installed light fixture is inoperable.
<b>Deficiency Criteria</b>	A permanently installed light fixture is inoperable (i.e., the overall system or component thereof is not meeting function or purpose; with or without visible damage).
<b>Health and Safety Determination</b>	Moderate
<b>Correction Timeframe</b>	30 days
<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If a permanently installed light fixture is inoperable, then it may indicate conditions are present that may result in a short or arc, which may lead to an increased fire risk that could cause injury.</p> <p>If a permanently installed light fixture is inoperable, then the resident may not be able to fully use a fixture that is expected to be provided and maintained as part of their rent.</p> <p>Property management would be expected to ensure that staff members understand how to identify a permanently installed light fixture that is inoperable. Management practices would be expected to assure prompt creation and prioritization of a work order to remedy this deficiency because it may result in safety hazards or usability barriers.</p>

#### **Deficiency 2 – Lighting – Interior: Unit**

<b>Deficiency</b>	A permanently installed light fixture is not secure.
<b>Deficiency Criteria</b>	A permanently installed light fixture is not secure to the designed attachment point or the attachment point is not stable.
<b>Health and Safety Determination</b>	Moderate
<b>Correction Timeframe</b>	30 days
<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail

<b>Rationale</b>	<p>If a permanently installed light fixture is not secure to the designed attachment point or the attachment point is not stable, then it may indicate conditions are present that may result in a short or arc, which may lead to an increased fire risk that could cause injury.</p> <p>A resident is likely to notice if a permanently installed light fixture is not secure to the designed attachment point or the attachment point is not stable and to recognize it is important enough to report it to property management because it may present safety hazards. Property management should be expected to prioritize a work order to remedy this deficiency because it may result in safety hazards.</p>
<b>Deficiency 2 – Lighting – Interior: Inside</b>	
<b>Deficiency</b>	A permanently installed light fixture is not secure.
<b>Deficiency Criteria</b>	A permanently installed light fixture is not secure to the designed attachment point or the attachment point is not stable.
<b>Health and Safety Determination</b>	Moderate
<b>Correction Timeframe</b>	30 days
<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If a permanently installed light fixture is not secure to the designed attachment point or the attachment point is not stable, then it may indicate conditions are present that may result in a short or arc, which may lead to an increased fire risk that could cause injury.</p> <p>Property management would be expected to ensure that staff members understand how to identify if a permanently installed light fixture is not secure to the designed attachment point or the attachment point is not stable. Management practices would be expected to assure prompt creation and prioritization of a work order to remedy this deficiency because it may result in safety hazards.</p>
<b>Deficiency 3 – Lighting – Interior: Unit</b>	
<b>Affirmative Habitability Requirement: Yes</b>	
<b>Deficiency</b>	At least one (1) permanently installed light fixture is not present in the kitchen and bathroom.
<b>Deficiency Criteria</b>	At least one (1) permanently installed light fixture is not present in the kitchen and bathroom.
<b>Health and Safety Determination</b>	Moderate

<b>Correction Timeframe</b>	30 days
<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If at least one (1) permanently installed light fixture is not present in the kitchen and bathroom, then there may be an increased safety risk to the resident due to their inability to visually navigate these spaces, which may result in injury.</p> <p>A resident is likely to notice if at least one (1) permanently installed light fixture is not present in the kitchen and bathroom and recognize it is important enough to report to property management because it may present safety hazards. Property management should be expected to prioritize a work order to remedy this deficiency because it may result in safety hazards or usability barriers.</p>
<b>Deficiency 3 – Lighting – Interior: Inside</b>	
<b>Affirmative Habitability Requirement: Yes</b>	
<b>Deficiency</b>	At least one (1) permanently installed light fixture is not present in the kitchen and bathroom.
<b>Deficiency Criteria</b>	At least one (1) permanently installed light fixture is not present in the kitchen and bathroom.
<b>Health and Safety Determination</b>	Moderate
<b>Correction Timeframe</b>	30 days
<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If at least one (1) permanently installed light fixture is not present in the kitchen and bathroom, then there may be an increased safety risk to the resident due to their inability to visually navigate these spaces, which may result in injury.</p> <p>Property management would be expected to ensure that staff members understand how to identify if at least one (1) permanently installed light fixture is not present in the kitchen and bathroom. Management practices would be expected to assure prompt creation and prioritization of a work order to illuminate these spaces, because it may result in safety hazards.</p>

TABLE 39—LITTER STANDARD

<b>Definition and Location</b>	
<b>Definition</b>	Waste discarded or disposed of in a location that is not designated for waste.
<b>Location</b>	Inside: Throughout the Inside.  Outside: Throughout the Outside.
<b>Deficiency 1 – Litter: Inside</b>	
<b>Deficiency</b>	Litter is accumulated in an undesignated area.
<b>Deficiency Criteria</b>	10 or more small items of litter (e.g., food wrappers, pieces of food, newspapers) are present within a 10-foot by 10-foot area not designated for garbage.  OR  Any number of large items (e.g., furniture or appliances) have been clearly discarded in an area not designated for garbage.
<b>Health and Safety Determination</b>	Moderate
<b>Correction Timeframe</b>	30 days
<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	If litter is accumulated, then it may lead to infestation, which may negatively impact the resident’s health.  If litter is accumulated, then the resident may be exposed to unsanitary conditions.  If litter is accumulated, then it will likely be identified during routine maintenance activities and the presence of this deficiency may indicate that self-generated work orders are not being addressed.  If litter is accumulated and it is visible to a visitor, then the property may suffer reputational harm.
<b>Deficiency 1 – Litter: Outside</b>	
<b>Deficiency</b>	Litter is accumulated in an undesignated area.
<b>Deficiency Criteria</b>	10 or more small items of litter (e.g., food wrappers, pieces of food, newspapers) are present within a 10-foot by 10-foot area not designated for garbage.

	OR
	Any number of large items (e.g., furniture or appliances) have been clearly discarded in an area not designated for garbage.
<b>Health and Safety Determination</b>	Low
<b>Correction Timeframe</b>	60 Days
<b>HCV Correction Timeframe</b>	N/A
<b>HCV Pass/Fail</b>	Pass
<b>Rationale</b>	<p>If litter is accumulated, then it will likely be identified during routine maintenance activities and the presence of this deficiency may indicate that self-generated work orders are not being addressed.</p> <p>If litter is accumulated and it is visible to a visitor, then the property may suffer reputational harm.</p>

**TABLE 40—MINIMUM ELECTRICAL AND LIGHTING STANDARD**

<b>Definition and Location</b>	
<b>Definition</b>	<p>Lighting: Permanently installed light fixture.</p> <p>Outlet: Installations that connect to an electrical supply.</p>
<b>Location</b>	Unit: Habitable rooms throughout the Unit
<b>Deficiency 1 – Minimum Electrical and Lighting: Unit      Affirmative Habitability Requirement: Yes</b>	
<b>Deficiency</b>	<p>At least two (2) working outlets are not present within each habitable room.</p> <p>OR</p> <p>At least one (1) working outlet and one (1) permanently installed light fixture is not present within each habitable room.</p>
<b>Deficiency Criteria</b>	<p>At least two (2) working outlets are not present within each habitable room.</p> <p>OR</p> <p>At least one (1) working outlet and one (1) permanently installed light fixture is not present within each habitable room.</p>
<b>Health and Safety Determination</b>	Moderate
<b>Correction Timeframe</b>	30 days

<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If at least two (2) working outlets or one (1) working outlet and one (1) permanently installed light fixture is not present within each habitable room, then there may be an increased safety risk to the resident due to their inability to visually navigate these spaces, which may result in injury.</p> <p>A resident is likely to notice if at least two (2) working outlets or one (1) working outlet and one (1) permanently installed light fixture is not present within each habitable room. Property management should be expected to prioritize a work order to remedy this deficiency because it may result in safety hazards.</p>

**TABLE 41—MOLD-LIKE SUBSTANCE STANDARD**

<b>Definition and Location</b>	
<b>Definition</b>	<p>A “Mold-like substance” can include regular or irregular patches or spots on surfaces that can be colored differently than the surface (coloration can be white, green, yellow, gray, brown, or black), and can be raised from the surface, and are generally composed of minute filaments. A “Mold-like substance” can appear “fuzzy” or “cottony” and a musty or earthy odor can be associated with it.</p> <p>“Mold-like substance” would also include what is often identified as “mildew,” i.e., small patches, generally on non-porous surfaces, and dusty (friable) when dry; mildew is generally a thin surface growth that can be wiped off easily. Note that algae are not mold-like substances (algae are grass-green).</p>
<b>Location</b>	<p>Unit: Includes areas where there could be potential water intrusion or captive moisture: e.g., walls, floors, ceilings, bathrooms, kitchens, bedrooms, closets, basements, laundry rooms, any other area that wood, drywall, and moisture are present. This list is not exhaustive for all areas to be inspected for mold-like substance.</p> <p>Inside: Includes areas where there could be potential water intrusion or captive moisture: e.g., walls, floors, ceilings, bathrooms, kitchens, mechanical rooms, basements, laundry rooms, any other area that wood, drywall, and moisture are present. This list is not exhaustive for all areas to be inspected for mold-like substance.</p>
<b>Deficiency 1 – Mold-Like Substance: Unit</b>	
<b>Deficiency</b>	Presence of mold-like substance at moderate levels is observed visually.

<b>Deficiency Criteria</b>	Cumulative area of patches is more than 4 square inches and less than 1 square foot in a room.
<b>Health and Safety Determination</b>	Moderate
<b>Correction Timeframe</b>	30 days
<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>A mold-like substance may be indicative of conditions that affect indoor air quality that may negatively impact respiratory health, including triggering asthma events.</p> <p>A resident is likely to notice a mold-like substance and recognize it is important enough to report it to property management. Property management should be expected to prioritize a work order for this condition and its presence may imply there are areas of opportunity to improve corrective maintenance practices.</p> <p>A mold-like substance may be indicative of conditions that may negatively impact structural conditions of the building, such as leaks or ventilation, that would require repair in order to appropriately remediate the mold-like substance.</p> <p>A mold-like substance may be indicative of conditions that affect indoor air quality that may negatively impact respiratory health, including triggering asthma events; HUD may be financially liable for subsequent health impacts.</p>

#### **Deficiency 1 – Mold-Like Substance: Inside**

<b>Deficiency</b>	Presence of mold-like substance at moderate levels is observed visually.
<b>Deficiency Criteria</b>	Cumulative area of patches is more than 4 square inches and less than 1 square foot in a room.
<b>Health and Safety Determination</b>	Low
<b>Correction Timeframe</b>	60 Days
<b>HCV Correction Timeframe</b>	N/A
<b>HCV Pass/Fail</b>	Pass
<b>Rationale</b>	Outside of the Unit, residents may avoid lengthy exposure in areas with moderate levels of a mold-like substance. However, a mold-like substance in the Inside may lead to conditions that affect indoor air quality within the

Unit. These conditions may negatively impact respiratory health, including triggering asthma events. A resident is likely to notice a mold-like substance and recognize it is important enough to report it to property management. Property management should be expected to prioritize a work order for this condition and its presence may imply there are areas of opportunity to improve corrective maintenance practices.

Facilities management and staff are likely to notice a mold-like substance during their regular, routine activities and its importance is likely to be recognized by facilities management and staff. Property management should be expected to prioritize a work order for this condition and its presence may imply there are areas of opportunity to improve routine maintenance practices.

A mold-like substance may be indicative of conditions that may negatively impact structural conditions of the building, such as leaks or ventilation, that would require repair in order to appropriately remediate the mold-like substance.

A mold-like substance may be indicative of conditions that affect indoor air quality that may negatively impact respiratory health, including triggering asthma events; HUD may be financially liable for subsequent health impacts.

#### **Deficiency 2 – Mold-Like Substance: Unit**

<b>Deficiency</b>	Presence of mold-like substance at high levels is observed visually.
<b>Deficiency Criteria</b>	Cumulative area of patches is more than 1 square foot and less than 9 square feet in a room.
<b>Health and Safety Determination</b>	Severe
<b>Correction Timeframe</b>	24 hours
<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>A mold-like substance may be indicative of conditions that affect indoor air quality that may negatively impact respiratory health, including triggering asthma events.</p> <p>A resident is likely to notice a mold-like substance and recognize it is important enough to report it to property management. Property management should be expected to prioritize a work order for this condition and its presence may imply there are areas of opportunity to improve corrective maintenance practices.</p>

A mold-like substance may be indicative of conditions that may negatively impact structural conditions of the building, such as leaks or ventilation, that would require repair in order to appropriately remediate the mold-like substance.

A mold-like substance may be indicative of conditions that affect indoor air quality that may negatively impact respiratory health, including triggering asthma events; HUD may be financially liable for subsequent health impacts.

#### **Deficiency 2 – Mold-Like Substance: Inside**

<b>Deficiency</b>	Presence of mold-like substance at high levels is observed visually.
<b>Deficiency Criteria</b>	Cumulative area of patches is more than 1 square foot and less than 9 square feet in a room.
<b>Health and Safety Determination</b>	Moderate
<b>Correction Timeframe</b>	30 days
<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>A mold-like substance may be indicative of conditions that affect indoor air quality that may negatively impact respiratory health, including triggering asthma events. Outside of the Unit, residents may temporarily avoid lengthy exposure in areas with high levels of a mold-like substance.</p> <p>A resident is likely to notice a mold-like substance and recognize it is important enough to report it to property management. Property management should be expected to prioritize a work order for this condition and its presence may imply there are areas of opportunity to improve corrective maintenance practices.</p> <p>Facilities management and staff are likely to notice a mold-like substance during their regular, routine activities and its importance is likely to be recognized by facilities management and staff. Property management should be expected to prioritize a work order for this condition and its presence may imply there are areas of opportunity to improve routine maintenance practices.</p> <p>A mold-like substance may be indicative of conditions that may negatively impact structural conditions of the building, such as leaks or ventilation, that would require repair in order to appropriately remediate the mold-like substance.</p> <p>A mold-like substance may be indicative of conditions that affect indoor air quality that may negatively impact respiratory health, including triggering</p>

asthma events; HUD may be financially liable for subsequent health impacts.

### Deficiency 3 – Mold-Like Substance: Unit

<b>Deficiency</b>	Presence of mold-like substance at extremely high levels is observed visually.
<b>Deficiency Criteria</b>	Cumulative area of patches is more than 9 square foot in a room.
<b>Health and Safety Determination</b>	Life-Threatening
<b>Correction Timeframe</b>	24 hours
<b>HCV Correction Timeframe</b>	24 hours
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>A mold-like substance may be indicative of conditions that present a severe health risk due to indoor air quality that may negatively impact respiratory health, including triggering asthma events.</p> <p>A resident is likely to notice a mold-like substance and recognize it is important enough to report it to property management. Property management should be expected to prioritize a work order for this condition and its presence may imply there are areas of opportunity to improve corrective maintenance practices.</p> <p>Facilities management and staff are likely to notice a mold-like substance during their regular, routine activities and its importance is likely to be recognized by facilities management and staff. Property management should be expected to prioritize a work order for this condition and its presence may imply there are areas of opportunity to improve routine maintenance practices.</p> <p>A mold-like substance may be indicative of conditions that may negatively impact structural conditions of the building, such as leaks or ventilation, that would require repair in order to appropriately remediate the mold-like substance.</p>

### Deficiency 3 – Mold-Like Substance: Inside

<b>Deficiency</b>	Presence of mold-like substance at extremely high levels is observed visually.
<b>Deficiency Criteria</b>	Cumulative area of patches is more than 9 square foot in a room.
<b>Health and Safety Determination</b>	Severe
<b>Correction Timeframe</b>	24 hours

<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>A mold-like substance may be indicative of conditions that present a severe health risk due to indoor air quality that may negatively impact respiratory health, including triggering asthma events.</p> <p>A resident is likely to notice a mold-like substance and recognize it is important enough to report it to property management. Property management should be expected to prioritize a work order for this condition and its presence may imply there are areas of opportunity to improve corrective maintenance practices.</p> <p>Facilities management and staff are likely to notice a mold-like substance during their regular, routine activities and its importance is likely to be recognized by facilities management and staff. Property management should be expected to prioritize a work order for this condition and its presence may imply there are areas of opportunity to improve routine maintenance practices.</p> <p>A mold-like substance may be indicative of conditions that may negatively impact structural conditions of the building, such as leaks or ventilation, that would require repair in order to appropriately remediate the mold-like substance.</p>

#### Deficiency 4 – Mold-Like Substance: Unit

<b>Deficiency</b>	Elevated moisture level.
<b>Deficiency Criteria</b>	Elevated moisture level.
<b>Health and Safety Determination</b>	Moderate
<b>Correction Timeframe</b>	30 days
<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If interior moisture level is elevated, then there may be an environment favorable for mold growth, which may trigger respiratory issues.</p> <p>A resident is likely to notice if there is an elevated moisture level and to recognize it is important enough to report it to property management because it may result in potential health hazards. Property management should be expected to prioritize a work order to remedy this defect because it may result in health hazards.</p>

#### Deficiency 4 – Mold-Like Substance: Inside

<b>Deficiency</b>	Elevated moisture level.
<b>Deficiency Criteria</b>	Elevated moisture level.
<b>Health and Safety Determination</b>	Low
<b>Correction Timeframe</b>	60 Days
<b>HCV Correction Timeframe</b>	N/A
<b>HCV Pass/Fail</b>	Pass
<b>Rationale</b>	Property management would be expected to ensure that staff members understand how to identify elevated moisture level. Management practices would be expected to assure prompt creation and prioritization of a work order to remedy this defect because it may result in potential health hazards.

**TABLE 42—PARKING LOT STANDARD**

<b>Definition and Location</b>	
<b>Definition</b>	A designated outdoor area for parking motorized vehicles.
<b>Location</b>	Outside: Near or adjacent to buildings
<b>Deficiency 1 – Parking Lot: Outside</b>	
<b>Deficiency</b>	Parking lot has any one pothole that is 4 inches deep and 1 square foot or greater.
<b>Deficiency Criteria</b>	Parking lot has any one pothole that is 4 inches deep and 1 square foot or greater.
<b>Health and Safety Determination</b>	Moderate
<b>Correction Timeframe</b>	30 days
<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail

<b>Rationale</b>	<p>If a parking lot has any one pothole that is 4 inches deep and 1 square foot or greater, then there is potential for increased risk of injury from tripping or falling.</p> <p>If a parking lot has any one pothole that is 4 inches deep and 1 square foot or greater, then the resident may not be able to fully use a feature that is expected to be provided and maintained as part of their rent.</p> <p>Property management would be expected to ensure that staff members understand how to identify if a parking lot has any one pothole that is 4 inches deep and 1 square foot or greater. Management practices would be expected to assure prompt creation and prioritization of a work order to remedy this deficiency because it may result in safety hazards.</p> <p>If a parking lot has any one pothole that is 4 inches deep and 1 square foot or greater, then there is an increased risk of damage to the resident's vehicle.</p> <p>If a parking lot has any one pothole that is 4 inches deep and 1 square foot or greater, then this deficiency may be seen by the public and may result in reputational harm.</p>
<b>Deficiency 2 – Parking Lot: Outside</b>	
<b>Deficiency</b>	Parking lot has ponding.
<b>Deficiency Criteria</b>	More than 3 inches of water has accumulated in a parking lot and 5% or more of the parking lot is unusable.
<b>Health and Safety Determination</b>	Moderate
<b>Correction Timeframe</b>	30 days
<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If more than 3 inches of water has accumulated in a parking lot and 5% or more of the parking lot is unusable, and it obscures other hazards, then the resident's risk of injury may increase.</p> <p>If more than 3 inches of water has accumulated in a parking lot and 5% or more of the parking lot is unusable, then the resident may not be able to fully use a feature that is expected to be provided and maintained as part of their rent.</p> <p>Property management would be expected to ensure that staff members understand how to identify if more than 3 inches of water has accumulated in a parking lot and 5% or more of the parking lot is unusable. Management practices would be expected to assure prompt creation and prioritization of</p>

---

a work order to remedy this deficiency because it may result in safety hazards.

---

**TABLE 43—POTENTIAL LEAD-BASED PAINT HAZARDS – VISUAL ASSESSMENT STANDARD**

<b>Definition and Location</b>	
<b>Definition</b>	Lead-based paint (LBP) is paint or other surface coatings that contain lead equal to or exceeding federal regulatory levels, currently 1.0 milligram per square centimeter or 0.5 percent by weight. Deteriorated paint or surface coatings found in homes built before 1978 are LBP hazards if the paint is LBP. Visual Assessment is surface by surface determination of paint condition.
<b>Location</b>	Unit: Anywhere paint is present  Inside: Anywhere paint is present  Outside: Anywhere paint is present
<b>Deficiency 1 – Potential Lead-Based Paint Hazards – Visual Assessment: Unit</b>	
<b>Deficiency</b>	Paint in a Unit or Inside the target property is deteriorated – below the level required for lead-safe work practices by a lead-certified firm or for passing clearance.
<b>Deficiency Criteria</b>	Paint is deteriorated (e.g., peeling, chipping, chalking, cracking, or detached from the substrate). For large surface areas in the Unit, deteriorated paint is less than or equal to 2 square feet per room; for small surface areas, less than or equal to 10% per component (“de minimis”).
<b>Health and Safety Determination</b>	Moderate
<b>Correction Timeframe</b>	30 days
<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If deteriorated lead-based paint is present, then it may be ingested by young children and cause damage to the brain, the nervous system, other vital organs, and blood, and may also cause behavioral problems, learning disabilities, seizures, etc.</p> <p>If deteriorated lead-based paint is present, then significant costs may be incurred associated with control.</p>

---

If deteriorated lead-based paint is present, and a resident becomes ill as a result of exposure, then HUD may be financially liable.

#### **Deficiency 1 – Potential Lead-Based Paint Hazards – Visual Assessment: Inside**

<b>Deficiency</b>	Paint in a Unit or Inside the target property is deteriorated – below the level required for lead-safe work practices by a lead-certified firm or for passing clearance.
<b>Deficiency Criteria</b>	Paint is deteriorated (e.g., peeling, chipping, chalking, cracking, or detached from the substrate). For large surface areas inside the target property, deteriorated paint is less than or equal to 2 square feet per room; for small surface areas, less than or equal to 10% per component (“de minimis”).
<b>Health and Safety Determination</b>	Moderate
<b>Correction Timeframe</b>	30 days
<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If deteriorated lead-based paint is present, then it may be ingested by young children and cause damage to the brain, the nervous system, other vital organs, and blood, and may also cause behavioral problems, learning disabilities, seizures, etc.</p> <p>If deteriorated lead-based paint is present, then significant costs may be incurred associated with control.</p> <p>If deteriorated lead-based paint is present, and a resident becomes ill as a result of exposure, then HUD may be financially liable.</p>

#### **Deficiency 2 – Potential Lead-Based Paint Hazards – Visual Assessment: Unit**

<b>Deficiency</b>	Paint in a Unit or Inside the target property is deteriorated – above the level required for lead-safe work practices by a lead-certified firm and passing clearance.
<b>Deficiency Criteria</b>	Paint is deteriorated (e.g., peeling, chipping, chalking, cracking, or detached from the substrate). For large surface areas in the Unit, deteriorated paint is more than 2 square feet per room; for small surface areas, greater than 10% per component (“significant”).
<b>Health and Safety Determination</b>	Severe
<b>Correction Timeframe</b>	24 hours

<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If deteriorated lead-based paint is present, then it may be ingested by young children and cause damage to the brain, the nervous system, other vital organs, and blood, and may also cause behavioral problems, learning disabilities, seizures, etc.</p> <p>If deteriorated lead-based paint is present, then significant costs may be incurred associated with control.</p> <p>If deteriorated lead-based paint is present, and a resident becomes ill as a result of exposure, then HUD may be financially liable.</p>

#### **Deficiency 2 – Potential Lead-Based Paint Hazards – Visual Assessment: Inside**

<b>Deficiency</b>	Paint in a Unit or Inside the target property is deteriorated – above the level required for lead-safe work practices by a lead-certified firm and passing clearance.
<b>Deficiency Criteria</b>	Paint is deteriorated (e.g., peeling, chipping, chalking, cracking, or detached from the substrate). For large surface areas Inside the target property, deteriorated paint is more than 2 square feet per room; for small surface areas, greater than 10% per component (“significant”).
<b>Health and Safety Determination</b>	Severe
<b>Correction Timeframe</b>	24 hours
<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If deteriorated lead-based paint is present, then it may be ingested by young children and cause damage to the brain, the nervous system, other vital organs, and blood, and may also cause behavioral problems, learning disabilities, seizures, etc.</p> <p>If lead-based paint is present, then significant costs may be incurred associated with control.</p> <p>If lead-based paint is present, and a resident becomes ill as a result of exposure, then HUD may be financially liable.</p>

#### **Deficiency 3 – Potential Lead-Based Paint Hazards – Visual Assessment: Outside**

<b>Deficiency</b>	Paint Outside on a target property is deteriorated – below the level required for lead-safe work practices by a lead-certified firm or for passing clearance.
<b>Deficiency Criteria</b>	Paint is deteriorated (e.g., peeling, chipping, chalking, cracking, or detached from the substrate). Deteriorated paint is less than or equal to 20 square feet (“de minimis”).
<b>Health and Safety Determination</b>	Moderate
<b>Correction Timeframe</b>	30 days
<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If deteriorated lead-based paint is present, then it may be ingested by young children and cause damage to the brain, the nervous system, other vital organs, and blood, and may also cause behavioral problems, learning disabilities, seizures, etc.</p> <p>If deteriorated lead-based paint is present, then significant costs may be incurred associated with control.</p> <p>If deteriorated lead-based paint is present, and a resident becomes ill as a result of exposure, then HUD may be financially liable.</p>

#### **Deficiency 4 – Potential Lead-Based Paint Hazards – Visual Assessment: Outside**

<b>Deficiency</b>	Paint Outside on a target property is deteriorated – above the level required for lead-safe work practices by a lead-certified firm and passing clearance.
<b>Deficiency Criteria</b>	Paint is deteriorated (e.g., peeling, chipping, chalking, cracking, or detached from the substrate). Deteriorated paint is more than 20 square feet (“significant”).
<b>Health and Safety Determination</b>	Severe
<b>Correction Timeframe</b>	24 hours
<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail

<b>Rationale</b>	<p>If deteriorated lead-based paint is present, then it may be ingested by young children and cause damage to the brain, the nervous system, other vital organs, and blood, and may also cause behavioral problems, learning disabilities, seizures, etc.</p> <p>If deteriorated lead-based paint is present, then significant costs may be incurred associated with control.</p> <p>If deteriorated lead-based paint is present, and a resident becomes ill as a result of exposure, then HUD may be financially liable.</p>
------------------	---

**TABLE 44—PRIVATE ROADS AND DRIVEWAYS STANDARD**

<b>Definition and Location</b>	
<b>Definition</b>	Road leading from a public road to a dwelling or garage.
<b>Location</b>	Outside: Throughout the site
<b>Deficiency 1 – Private Roads and Driveways: Outside</b>	
<b>Deficiency</b>	Road or driveway access to the property is blocked or impassable for vehicles.
<b>Deficiency Criteria</b>	Road or driveway access to the property is blocked or impassable for vehicles.
<b>Health and Safety Determination</b>	Severe
<b>Correction Timeframe</b>	24 hours
<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If road or driveway access to the property is blocked or impassable for vehicles, then emergency vehicles would have trouble accessing the property.</p> <p>If road or driveway access to the property is blocked or impassable for vehicles, then the resident may not be able to fully use a feature that is expected to be provided and maintained as part of their rent.</p> <p>If road or driveway access to the property is blocked or impassable for vehicles, then it will likely be identified during routine maintenance activities and the presence of this deficiency may indicate that self-generated work orders are not being addressed.</p>
<b>Deficiency 2 – Private Roads and Driveways: Outside</b>	

<b>Deficiency</b>	Road or driveway has any one pothole that is 4 inches deep and 1 square foot or greater.
<b>Deficiency Criteria</b>	Any one pothole is 4 inches deep and 1 square foot or greater.
<b>Health and Safety Determination</b>	Moderate
<b>Correction Timeframe</b>	30 days
<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If a road or driveway has any one pothole that is 4 inches deep and 1 square foot or greater, then there is potential for increased risk of injury from tripping or falling.</p> <p>If a road or driveway has any one pothole that is 4 inches deep and 1 square foot or greater, then the resident may not be able to fully use a feature that is expected to be provided and maintained as part of their rent.</p> <p>Property management would be expected to ensure that staff members understand how to identify if a road or driveway has any one pothole that is 4 inches deep and 1 square foot or greater. Management practices would be expected to assure prompt creation and prioritization of a work order to remedy this deficiency because it may result in safety hazards.</p> <p>If a road or driveway has any one pothole that is 4 inches deep and 1 square foot or greater, then there is an increased risk of damage to the resident's vehicle.</p> <p>If a road or driveway has any one pothole that is 4 inches deep and 1 square foot or greater, then this deficiency may be seen by the public and may result in reputational harm.</p>

**TABLE 45—REFRIGERATOR STANDARD**

<b>Definition and Location</b>	
<b>Definition</b>	A device designed to keep food from spoiling by cooling and freezing.
<b>Location</b>	<p>Unit: Kitchen or any area or room the resident or property may choose to have a refrigerator.</p> <p>Inside: Kitchen, community room, or any area or room the property may choose to have a refrigerator.</p>
<b>Deficiency 1 – Refrigerator: Unit</b>	

<b>Deficiency</b>	Refrigerator is inoperable such that it may be unable to safely and adequately store food.
<b>Deficiency Criteria</b>	Refrigerator is inoperable (i.e., overall system is not meeting function or purpose; with or without visible damage) such that it may be unable to safely and adequately store food.
<b>Health and Safety Determination</b>	Moderate
<b>Correction Timeframe</b>	30 days
<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If a refrigerator is inoperable such that it may be unable to safely and adequately store food, then the resident may be exposed to pathogen growth on food that increases the risk of foodborne illness.</p> <p>If a refrigerator is inoperable such that it may be unable to safely and adequately store food, then the resident may not be able to fully use an appliance that is expected to be provided and maintained as part of their rent.</p> <p>A resident is likely to notice if a refrigerator is inoperable such that it may be unable to safely and adequately store food and to recognize it is important enough to report it to property management because it may present health hazards or usability barriers. Property management should be expected to prioritize a work order to remedy this deficiency because it may result in health hazards or usability barriers.</p>

#### **Deficiency 1 – Refrigerator: Inside**

<b>Deficiency</b>	Refrigerator is inoperable such that it may be unable to safely and adequately store food.
<b>Deficiency Criteria</b>	Refrigerator is inoperable (i.e., overall system is not meeting function or purpose; with or without visible damage) such that it may be unable to safely and adequately store food.
<b>Health and Safety Determination</b>	Moderate
<b>Correction Timeframe</b>	30 days
<b>HCV Correction Timeframe</b>	30 days

<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If a refrigerator is inoperable such that it may be unable to safely and adequately store food, then the resident may be exposed to pathogen growth on food that increases the risk of foodborne illness.</p> <p>If a refrigerator is inoperable such that it may be unable to safely and adequately store food, then the resident may not be able to fully use an appliance that is expected to be provided and maintained as part of their rent.</p> <p>Property management would be expected to ensure that staff members understand how to identify a refrigerator that is inoperable such that it may be unable to safely and adequately store food. Management practices would be expected to assure prompt creation and prioritization of a work order to remedy this deficiency because it may result in health hazards or usability barriers.</p>
<b>Deficiency 2 – Refrigerator: Unit</b>	
<b>Deficiency</b>	Refrigerator component is damaged such that it impacts functionality.
<b>Deficiency Criteria</b>	Refrigerator component is damaged (i.e., visibly defective) such that it impacts functionality.
<b>Health and Safety Determination</b>	Moderate
<b>Correction Timeframe</b>	30 days
<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If a refrigerator component is damaged such that it impacts functionality, then the resident may be exposed to pathogen growth on food that increases the risk of foodborne illness.</p> <p>If a refrigerator component is damaged such that it impacts functionality, then the resident may not be able to fully use an appliance that is expected to be provided and maintained as part of their rent.</p> <p>A resident is likely to notice if a refrigerator component is damaged such that it impacts functionality and to recognize it is important enough to report it to property management because it may present health hazards or usability barriers. Property management should be expected to prioritize a work order to remedy this deficiency because it may result in health hazards or usability barriers.</p>

**Deficiency 2 – Refrigerator: Inside**

<b>Deficiency</b>	Refrigerator component is damaged such that it impacts functionality.
<b>Deficiency Criteria</b>	Refrigerator component is damaged (i.e., visibly defective) such that it impacts functionality.
<b>Health and Safety Determination</b>	Moderate
<b>Correction Timeframe</b>	30 days
<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If a refrigerator component is damaged such that it impacts functionality, then the resident may be exposed to pathogen growth on food that increases the risk of foodborne illness.</p> <p>If a refrigerator component is damaged such that it impacts functionality, then the resident may not be able to fully use an appliance that is expected to be provided and maintained as part of their rent.</p> <p>Property management would be expected to ensure that staff members understand how to identify a refrigerator component that is damaged such that it impacts functionality. Management practices would be expected to assure prompt creation and prioritization of a work order to remedy this deficiency because it may result in usability barriers.</p>

<b>Deficiency 3 – Refrigerator: Unit</b>		<b>Affirmative Habitability Requirement: Yes</b>
<b>Deficiency</b>	Refrigerator is missing.	
<b>Deficiency Criteria</b>	Refrigerator is missing (i.e., evidence of prior installation, but is now not present).	
<b>Health and Safety Determination</b>	Moderate	
<b>Correction Timeframe</b>	30 days	
<b>HCV Correction Timeframe</b>	30 days	
<b>HCV Pass/Fail</b>	Fail	
<b>Rationale</b>	If a refrigerator is missing, then the resident may be exposed to pathogen growth on food that increases the risk of foodborne illness.	

If a refrigerator is missing, then the resident may not be able to fully use an appliance that is expected to be provided and maintained as part of their rent.

A resident is likely to notice if a refrigerator is missing and to recognize it is important enough to report it to property management because it may present health hazards or usability barriers. Property management should be expected to prioritize a work order to remedy this deficiency because it may result in health hazards or usability barriers.

**TABLE 46—RETAINING WALL STANDARD**

<b>Definition and Location</b>	
<b>Definition</b>	A vertical structure that retains soil or rock at various grades.
<b>Location</b>	Outside: Property grounds.
<b>Deficiency 1 – Retaining Wall: Outside</b>	
<b>Deficiency</b>	Retaining wall is leaning away from the fill side.
<b>Deficiency Criteria</b>	Retaining wall is leaning away from the fill side.
<b>Health and Safety Determination</b>	Moderate
<b>Correction Timeframe</b>	30 days
<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If a retaining wall is leaning away from the fill side, then the resident may be at risk of injury due to potential wall collapse.</p> <p>If a retaining wall is leaning away from the fill side, then it will likely be identified during routine maintenance activities and the presence of this deficiency may indicate that self-generated work orders are not being addressed.</p>
<b>Deficiency 2 – Retaining Wall: Outside</b>	
<b>Deficiency</b>	Retaining wall is partially or completely collapsed.
<b>Deficiency Criteria</b>	Retaining wall is partially or completely collapsed.
<b>Health and Safety Determination</b>	Moderate

<b>Correction Timeframe</b>	30 days
<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If a retaining wall is partially or completely collapsed, then the resident may be exposed to potential hazards.</p> <p>If a retaining wall is partially or completely collapsed, then it will likely be identified during routine maintenance activities and the presence of this deficiency may indicate that self-generated work orders are not being addressed.</p> <p>If a retaining wall is partially or completely collapsed, then this could be a substantial cost to correct.</p>

**TABLE 47—ROOF ASSEMBLY STANDARD**

<b>Definition and Location</b>	
<b>Definition</b>	The external upper covering of a house or other building.
<b>Location</b>	Outside: On top of building.
<b>Deficiency 1 – Roof Assembly: Outside</b>	
<b>Deficiency</b>	Restricted flow of water from a roof drain, gutter, or downspout.
<b>Deficiency Criteria</b>	<p>Debris is limiting the ability of water to drain; water may not be present.</p> <p>OR</p> <p>An area of approximately 25 square feet of ponding water is located above the drain.</p>
<b>Health and Safety Determination</b>	Moderate
<b>Correction Timeframe</b>	30 days
<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	If debris is limiting the ability of water to drain, then ponding water may occur and promote infestation.

If debris is limiting the ability of water to drain or approximately 25 square feet of ponding water is located above the drain, then it is likely routine work orders are not being addressed.

The roof assembly should be checked during periodic property inspections, and according to industry best practices, should be included in a preventative maintenance plan. If debris is limiting the ability of water to drain or approximately 25 square feet of ponding water is located above the drain, then it may indicate preventative maintenance activities could be improved.

If debris is limiting the ability of water to drain, and ponding water occurs, then it may indicate a level of structural failure in the roof assembly, which will likely result in significant costs to repair.

If debris is limiting the ability of water to drain, and ponding water occurs, then there will be increased weight on the roof resulting in possible collapse. Additionally, the presence of this deficiency may indicate a level of structural failure in the roof assembly.

#### **Deficiency 2 – Roof Assembly: Outside**

<b>Deficiency</b>	Gutter component is damaged, missing, or unfixed.
<b>Deficiency Criteria</b>	Gutter component is damaged (i.e., visibly defective; impacts functionality).  OR  Gutter component is missing (i.e., evidence of prior installation, but now not present or is incomplete).  OR  Gutter component is unfixed.
<b>Health and Safety Determination</b>	Moderate
<b>Correction Timeframe</b>	30 days
<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	If a gutter component is damaged, missing, or unfixed, then the resident may be injured by falling components.  If a gutter component is damaged, missing, or unfixed, and a stream of water is diverted off its intended course, then the resident cannot fully use

a feature that is expected to be provided and maintained as part of their rent.

If a gutter component is damaged, missing, or unfixed, then the resident would likely report this deficiency, and the presence of this deficiency may indicate that complaint-based work orders are not being addressed.

### Deficiency 3 – Roof Assembly: Outside

<b>Deficiency</b>	Roof surface has standing water.
<b>Deficiency Criteria</b>	Water ponding in an area approximately 25 square feet or greater on a flat roof surface not near a drain or scupper.
<b>Health and Safety Determination</b>	Moderate
<b>Correction Timeframe</b>	30 days
<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If there is water ponding in an area approximately 25 square feet or greater on a flat roof surface not near a drain or scupper, this may promote an environment conducive to infestation, which may jeopardize the resident's health.</p> <p>If there is water ponding in an area approximately 25 square feet or greater on a flat roof surface not near a drain or scupper, then the resident would likely report this deficiency, and the presence of this deficiency may indicate that complaint-based work orders are not being addressed.</p> <p>If there is water ponding in an area approximately 25 square feet or greater on a flat roof surface not near a drain or scupper, then it is likely that maintenance staff is not identifying deficiencies or responding to self-generated work orders.</p> <p>If there is water ponding in an area approximately 25 square feet or greater on a flat roof surface not near a drain or scupper, then it may be a sign of roof assembly failure, which has a significant cost to repair.</p> <p>If there is water ponding in an area approximately 25 square feet or greater on a flat roof surface not near a drain or scupper, then it may increase the weight on the roof assembly and indicate a level of structural failure.</p>

### Deficiency 4 – Roof Assembly: Outside

<b>Deficiency</b>	Substrate is exposed.
<b>Deficiency Criteria</b>	Any amount of substrate is exposed.

<b>Health and Safety Determination</b>	Moderate
<b>Correction Timeframe</b>	30 days
<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If the substrate is exposed, and it leads to water infiltration, then the resident may be exposed to mold.</p> <p>If the substrate is exposed, and there is a structural defect, then the resident could be injured as the result of collapse.</p> <p>If the substrate is exposed, then it is likely that maintenance staff is not identifying deficiencies or responding to self-generated work orders.</p> <p>If the substrate is exposed, then it is likely that preventative maintenance activities are not being addressed.</p> <p>If the substrate is exposed, the repair will likely be significant enough to incur capital costs.</p> <p>If the substrate is exposed, then the probability of water infiltration increases, which may compromise structural integrity.</p>

#### **Deficiency 5 – Roof Assembly: Outside**

<b>Deficiency</b>	Roof assembly has a hole.
<b>Deficiency Criteria</b>	<p>Unintentional hole of any size is found.</p> <p>OR</p> <p>Intentional hole of any size is found and is not covered by a vent or screen.</p>
<b>Health and Safety Determination</b>	Moderate
<b>Correction Timeframe</b>	30 days
<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	If the roof assembly has a hole, then water from the exterior environment may leak into the interior and increase moisture levels, which provides an environment favorable for mold growth and may trigger respiratory issues.

If the roof assembly has a hole, and there is a structural defect, then the resident may be injured.

Property management would be expected to ensure that staff members understand how to identify if the roof assembly has a hole. Management practices would be expected to assure prompt creation and prioritization of a work order to remedy this defect because it may result in potential health and safety hazards.

A roof assembly should be checked during periodic property inspections, and according to industry best practices, should be included in a preventative maintenance plan. If the roof assembly has a hole, this may indicate that preventative maintenance activities are not being addressed.

#### **Deficiency 6 – Roof Assembly: Outside**

<b>Deficiency</b>	Roof assembly is damaged.
<b>Deficiency Criteria</b>	Roof assembly is damaged (i.e., visibly defective; impacts functionality),
<b>Health and Safety Determination</b>	Moderate
<b>Correction Timeframe</b>	30 days
<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If the roof assembly is damaged, then the resident could be injured by falling debris.</p> <p>Property management would be expected to ensure that staff members understand how to identify if the roof assembly is damaged. Management practices would be expected to assure prompt creation and prioritization of a work order to remedy this deficiency because it may result in safety hazards.</p> <p>A roof assembly should be checked during periodic property inspections, and according to industry best practices, should be included in a preventative maintenance plan. If the roof assembly is damaged, this may indicate that preventative maintenance activities are not being addressed.</p>

**TABLE 48—SHARP EDGES STANDARD**

#### **Definition and Location**

<b>Definition</b>	Physical hazards within the built environment (i.e., human-made structures, features, and facilities) that can lacerate or puncture skin.
<b>Location</b>	Unit: Throughout the Unit.  Inside: Normal paths of travel throughout the built environment (e.g., hallways, shared living spaces, shared facilities).  Outside: Normal paths of travel throughout the built environment (e.g., sidewalks, walkways, playgrounds, courtyards).
<b>Deficiency 1 – Sharp Edges: Unit</b>	
<b>Deficiency</b>	A sharp edge that can result in a cut or puncture hazard is present.
<b>Deficiency Criteria</b>	A sharp edge that can result in a cut or puncture hazard that is likely to require emergency care (e.g., stitches) is present within the built environment (i.e., human-made structures, features, and facilities).
<b>Health and Safety Determination</b>	Severe
<b>Correction Timeframe</b>	24 hours
<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If a sharp edge that can result in a cut or puncture hazard that is likely to require emergency care is present within the unit, then there may be an increased safety risk to the resident, which may result in injury (e.g., laceration, puncture).</p> <p>A resident is likely to notice if a sharp edge that can result in a cut or puncture hazard that is likely to require emergency care is present within the unit and to recognize it is important enough to report it to property management because it may present safety hazards. Property management should be expected to prioritize a work order to remedy this deficiency because it may result safety hazards.</p>
<b>Deficiency 1 – Sharp Edges: Inside</b>	
<b>Deficiency</b>	A sharp edge that can result in a cut or puncture hazard is present.
<b>Deficiency Criteria</b>	A sharp edge that can result in a cut or puncture hazard that is likely to require emergency care (e.g., stitches) is present within the built environment (i.e., human-made structures, features, and facilities).
<b>Health and Safety Determination</b>	Severe

<b>Correction Timeframe</b>	24 hours
<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If a sharp edge that can result in a cut or puncture hazard that is likely to require emergency care is present within the Inside area, then there may be an increased safety risk to the resident, which may result in injury (e.g., laceration, puncture).</p> <p>Property management would be expected to ensure that staff members understand how to identify the presence of a sharp edge that can result in a cut or puncture hazard that is likely to require emergency care within the Inside area. Management practices would be expected to assure prompt creation and prioritization of a work order to remedy this deficiency because it may result in safety hazards.</p>
<b>Deficiency 1 – Sharp Edges: Outside</b>	
<b>Deficiency</b>	A sharp edge that can result in a cut or puncture hazard is present.
<b>Deficiency Criteria</b>	A sharp edge that can result in a cut or puncture hazard that is likely to require emergency care (e.g., stitches) is present on or adjacent to the built environment (i.e., human-made structures, features, and facilities).
<b>Health and Safety Determination</b>	Severe
<b>Correction Timeframe</b>	24 hours
<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If a sharp edge that can result in a cut or puncture hazard that is likely to require emergency care is present in the Outside area, then there may be an increased safety risk to the resident, which may result in injury (e.g., laceration, puncture).</p> <p>Property management would be expected to ensure that staff members understand how to identify the presence of a sharp edge that can result in a cut or puncture hazard that is likely to require emergency care in the Outside area. Management practices would be expected to assure prompt creation and prioritization of a work order to remedy this deficiency because it may result in safety hazards.</p>

**TABLE 49—SIDEWALK, WALKWAY, AND RAMP STANDARD**

<b>Definition and Location</b>	
<b>Definition</b>	A pathway for pedestrian travel.
<b>Location</b>	Outside: Ingress or egress locations to buildings, pools, parking lots, or any area that is considered a normal course of travel for pedestrians.
<b>Deficiency 1 – Sidewalk, Walkway, and Ramp: Outside</b>	
<b>Deficiency</b>	Sidewalk, walkway, or ramp is blocked or impassable.
<b>Deficiency Criteria</b>	Sidewalk, walkway, or ramp is blocked or impassable.
<b>Health and Safety Determination</b>	Moderate
<b>Correction Timeframe</b>	30 days
<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If a sidewalk, walkway, or ramp is blocked or impassable, then the resident's egress may be impeded.</p> <p>If a sidewalk, walkway, or ramp is blocked or impassable, then the resident will likely report this, and the presence of this deficiency may indicate that complaint-based work orders are not being addressed.</p> <p>If a sidewalk, walkway, or ramp is blocked or impassable, then this should be identified through daily maintenance activities and its presence may indicate that self-generated work orders are not being addressed.</p>
<b>Deficiency 2 – Sidewalk, Walkway, and Ramp: Outside</b>	
<b>Deficiency</b>	Sidewalk, walkway, or ramp is not functionally adequate.
<b>Deficiency Criteria</b>	Sidewalk, walkway, or ramp is not functionally adequate (i.e., does not provide a defined and safe path of exterior travel for pedestrians).
<b>Health and Safety Determination</b>	Moderate
<b>Correction Timeframe</b>	30 days
<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail

<b>Rationale</b>	<p>If a sidewalk, walkway, or ramp is not functionally adequate, then there may be an increased fall risk to the resident.</p> <p>If a sidewalk, walkway, or ramp is not functionally adequate, then the resident may be unable to use a feature that is expected to be provided and maintained as part of their rent.</p> <p>Property management would be expected to ensure that staff members understand how to identify if a sidewalk, walkway, or ramp is not functionally adequate. Management practices would be expected to assure prompt creation and prioritization of a work order to remedy this deficiency because it may lead to safety hazards and usability barriers.</p>
------------------	---

**TABLE 50—SINK STANDARD**

<b>Definition and Location</b>	
<b>Definition</b>	A basin with hardware designed to dispense and hold clean water (hot and cold) and discharge wastewater.
<b>Location</b>	<p>Unit: Kitchen, bathroom, laundry area, and other interior space.</p> <p>Inside: Kitchen, bathroom, laundry area, and other interior space.</p>
<b>Deficiency 1 – Sink: Unit</b>	
<b>Deficiency</b>	Sink or sink component is damaged or missing and the sink is not functionally adequate.
<b>Deficiency Criteria</b>	Sink or sink component is damaged (i.e., visibly defective; impacts functionality) or missing (i.e., evidence of prior installation, but now not present or is incomplete) and the sink is not functionally adequate.
<b>Health and Safety Determination</b>	Moderate
<b>Correction Timeframe</b>	30 days
<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If a sink or sink component is damaged or missing and the sink is not functionally adequate, then the resident may not be able to properly dispose of wastewater.</p> <p>If a sink or sink component is damaged or missing and the sink is not functionally adequate, then the resident may not be able to use a fixture that is expected to be provided and maintained as part of their rent.</p>

A resident is likely to notice if a sink or sink component is damaged or missing and the sink is not functionally adequate, and to recognize it is important enough to report it to property management because it may present health hazards or usability barriers. Property management should be expected to prioritize a work order to remedy this defect because it may result in sanitary hazards.

#### Deficiency 1 – Sink: Inside

<b>Deficiency</b>	Sink or sink component is damaged or missing and the sink is not functionally adequate.
<b>Deficiency Criteria</b>	Sink or sink component is damaged (i.e., visibly defective; impacts functionality) or missing (i.e., evidence of prior installation, but now not present or is incomplete) and the sink is not functionally adequate.
<b>Health and Safety Determination</b>	Low
<b>Correction Timeframe</b>	60 Days
<b>HCV Correction Timeframe</b>	N/A
<b>HCV Pass/Fail</b>	Pass
<b>Rationale</b>	<p>If a sink or sink component is damaged or missing and the sink is not functionally adequate, then the resident may not be able to use a fixture that is expected to be provided and maintained as part of their rent.</p> <p>Property management would be expected to ensure that staff understand how to identify if a sink or sink component is damaged or missing and the sink is not functionally adequate. Management practices would be expected to assure prompt creation and prioritization of a work order to remedy this defect, because it may result in sanitary hazards.</p>

#### Deficiency 2 – Sink: Unit

<b>Deficiency</b>	Water is directed outside of the basin.
<b>Deficiency Criteria</b>	Water is directed outside of the basin.
<b>Health and Safety Determination</b>	Low
<b>Correction Timeframe</b>	60 Days
<b>HCV Correction Timeframe</b>	N/A
<b>HCV Pass/Fail</b>	Pass

<b>Rationale</b>	<p>If water is directed outside of the basin, then the resident may be unable to use a fixture that is expected to be provided and maintained as part of their rent.</p> <p>A resident is likely to notice if water is directed outside of the basin and to recognize it is important enough to report it to property management because it may present usability barriers. Property management should be expected to prioritize a work order to remedy this defect because it may result in usability barriers.</p>
<b>Deficiency 2 – Sink: Inside</b>	
<b>Deficiency</b>	Water is directed outside of the basin.
<b>Deficiency Criteria</b>	Water is directed outside of the basin.
<b>Health and Safety Determination</b>	Low
<b>Correction Timeframe</b>	60 Days
<b>HCV Correction Timeframe</b>	N/A
<b>HCV Pass/Fail</b>	Pass
<b>Rationale</b>	<p>If water is directed outside of the basin, then the resident may be unable to use a fixture that is expected to be provided and maintained as part of their rent.</p> <p>Property management would be expected to ensure that staff understand how to identify if water is directed outside of the basin. Management practices would be expected to assure prompt creation and prioritization of a work order to remedy this defect, because it may result in usability barriers.</p>
<b>Deficiency 3 – Sink: Unit</b>	
<b>Deficiency</b>	Sink is not draining.
<b>Deficiency Criteria</b>	Water is not draining from the basin of the sink.
<b>Health and Safety Determination</b>	Moderate
<b>Correction Timeframe</b>	30 days
<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail

<b>Rationale</b>	<p>If water is not draining from the basin of the sink, then the resident may not be able to dispose of waste.</p> <p>If water is not draining from the basin of the sink, then the resident may be unable to use a fixture that is expected to be provided and maintained as part of their rent.</p> <p>If water is not draining from the basin of the sink, then the resident will likely report the deficiency, and the presence of this deficiency may indicate complaint-based work orders are not being addressed.</p>
------------------	--

### Deficiency 3 – Sink: Inside

<b>Deficiency</b>	Sink is not draining.
<b>Deficiency Criteria</b>	Water is not draining from the basin of the sink.
<b>Health and Safety Determination</b>	Moderate
<b>Correction Timeframe</b>	30 days
<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If water is not draining from the basin of the sink, then the resident may not be able to dispose of waste.</p> <p>If water is not draining from the basin of the sink, then the resident may be unable to use a fixture that is expected to be provided and maintained as part of their rent.</p> <p>If water is not draining from the basin of the sink, then this will likely be observed during routine maintenance activities, and the presence of this deficiency may indicate self-generated work orders are not being addressed.</p>

### Deficiency 4 – Sink: Unit

<b>Deficiency</b>	Sink is improperly installed, pulling away from the wall, leaning, or there are gaps between the sink and wall.
<b>Deficiency Criteria</b>	Sink is improperly installed, pulling away from the wall, leaning, or there are gaps between the sink and wall.
<b>Health and Safety Determination</b>	Moderate
<b>Correction Timeframe</b>	30 days

<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If the sink is improperly installed, pulling away from the wall, leaning, or there are gaps between the sink and wall, then the resident may be injured if the sink were to fall.</p> <p>If the sink is improperly installed, pulling away from the wall, leaning, or there are gaps between the sink and wall, then the resident will likely report this deficiency, and the presence of this deficiency may indicate complaint-based work orders are not being addressed.</p> <p>If the sink is improperly installed, pulling away from the wall, leaning, or there are gaps between the sink and wall, then this should be observed during daily maintenance activities, and the presence of this deficiency may indicate self-generated work orders are not being addressed.</p>
<b>Deficiency 4 – Sink: Inside</b>	
<b>Deficiency</b>	Sink is improperly installed, pulling away from wall, leaning, or there are gaps between the sink and wall.
<b>Deficiency Criteria</b>	Sink is improperly installed, pulling away from the wall, leaning, or there are gaps between the sink and wall.
<b>Health and Safety Determination</b>	Moderate
<b>Correction Timeframe</b>	30 days
<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If the sink is improperly installed, pulling away from the wall, leaning, or there are gaps between the sink and wall, then the resident may be injured if the sink were to fall.</p> <p>If the sink is improperly installed, pulling away from the wall, leaning, or there are gaps between the sink and wall, then the resident will likely report this deficiency, and the presence of this deficiency may indicate complaint-based work orders are not being addressed.</p> <p>If the sink is improperly installed, pulling away from the wall, leaning, or there are gaps between the sink and wall, then this should be observed during daily maintenance activities, and the presence of this deficiency may indicate self-generated work orders are not being addressed.</p>

**Deficiency 5 – Sink: Unit**

<b>Deficiency</b>	Sink component is damaged or missing and the sink is functionally adequate.
<b>Deficiency Criteria</b>	Sink component is damaged (i.e., visibly defective; impacts functionality) or missing (i.e., evidence of prior installation, but now not present or is incomplete) and the sink is functionally adequate.
<b>Health and Safety Determination</b>	Low
<b>Correction Timeframe</b>	60 Days
<b>HCV Correction Timeframe</b>	N/A
<b>HCV Pass/Fail</b>	Pass
<b>Rationale</b>	<p>If a sink component is damaged or missing and the sink is functionally adequate, then the resident may not be able to fully use a fixture that is expected to be provided and maintained as part of their rent.</p> <p>If a sink component is damaged or missing and the sink is functionally adequate, then the resident will likely report this deficiency, and the presence of this defect may indicate complaint-based work orders are not being addressed.</p>

**Deficiency 5 – Sink: Inside**

<b>Deficiency</b>	Sink component is damaged or missing and the sink is functionally adequate.
<b>Deficiency Criteria</b>	Sink component is damaged (i.e., visibly defective; impacts functionality) or missing (i.e., evidence of prior installation, but now not present or is incomplete) and the sink is functionally adequate.
<b>Health and Safety Determination</b>	Low
<b>Correction Timeframe</b>	60 Days
<b>HCV Correction Timeframe</b>	N/A
<b>HCV Pass/Fail</b>	Pass
<b>Rationale</b>	If a sink component is damaged or missing and the sink is functionally adequate, then the resident may not be able to fully use a fixture that is expected to be provided and maintained as part of their rent.

Property management would be expected to ensure that staff understand how to identify if a sink component is damaged or missing and the sink is functionally adequate. Management practices would be expected to assure prompt creation and prioritization of a work order to remedy this defect, because it may result in usability barriers.

<b>Deficiency 6 – Sink: Unit</b>	<b>Affirmative Habitability Requirement: Yes</b>
----------------------------------	--

<b>Deficiency</b>	Cannot activate or deactivate hot and cold water.
<b>Deficiency Criteria</b>	Control knobs do not activate or deactivate hot and cold water.
<b>Health and Safety Determination</b>	Moderate
<b>Correction Timeframe</b>	30 days
<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If the control knobs do not activate or deactivate hot and cold water, then the resident may not be able to maintain hygiene.</p> <p>If the control knobs do not activate or deactivate hot and cold water, then the resident may be unable to use a fixture that is expected to be provided and maintained as part of their rent.</p> <p>A resident is likely to notice if the control knobs do not activate or deactivate hot and cold water and to recognize it is important enough to report it to property management because it may present sanitary hazards or usability barriers. Property management should be expected to prioritize a work order to remedy this defect because it may result in sanitary hazards.</p>

<b>Deficiency 6 – Sink: Inside</b>
------------------------------------

<b>Deficiency</b>	Cannot activate or deactivate hot and cold water.
<b>Deficiency Criteria</b>	Control knobs do not activate or deactivate hot and cold water.
<b>Health and Safety Determination</b>	Moderate
<b>Correction Timeframe</b>	30 days
<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail

<b>Rationale</b>	<p>If the control knobs do not activate or deactivate hot and cold water, then the resident may not be able to maintain hygiene.</p> <p>If the control knobs do not activate or deactivate hot and cold water, then the resident may be unable to use a fixture that is expected to be provided and maintained as part of their rent.</p> <p>Property management would be expected to ensure that staff understand how to identify if the control knobs do not activate or deactivate hot and cold water. Management practices would be expected to assure prompt creation and prioritization of a work order to remedy this defect, because it may result in sanitary hazards.</p>
<b>Deficiency 7 – Sink: Unit</b>	<b>Affirmative Habitability Requirement: Yes</b>
<b>Deficiency</b>	Sink is missing or not installed within the primary kitchen.
<b>Deficiency Criteria</b>	Sink is missing (i.e., evidence of prior installation, but now not present or is incomplete) or not installed (i.e., never installed, but should have been) in the primary kitchen
<b>Health and Safety Determination</b>	Moderate
<b>Correction Timeframe</b>	30 days
<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If a sink is missing or not installed within the primary kitchen, then the resident may not be able to properly dispose of wastewater.</p> <p>If a sink is missing or not installed within the primary kitchen, then the resident may not be able to use a fixture that is expected to be provided and maintained as part of their rent.</p> <p>A resident is likely to notice if a sink is missing or not installed within the primary kitchen and to recognize it is important enough to report it to property management because it may present health hazards or usability barriers. Property management should be expected to prioritize a work order to remedy this defect because it may result in sanitary hazards.</p>

**TABLE 51—SITE DRAINAGE STANDARD**

<b>Definition and Location</b>	
<b>Definition</b>	An exterior system that directs the flow of surface water.

<b>Location</b>	Outside: Throughout the entire Outside area, especially adjacent to the built environment.
<b>Deficiency 1 – Site Drainage: Outside</b>	
<b>Deficiency</b>	Water runoff is unable to flow through the site drainage system.
<b>Deficiency Criteria</b>	Standing water is present above the outflow pipe entrance.  OR  Drainage is blocked such that the inspector believes water is unable to drain in the event of precipitation.
<b>Health and Safety Determination</b>	Low
<b>Correction Timeframe</b>	60 Days
<b>HCV Correction Timeframe</b>	N/A
<b>HCV Pass/Fail</b>	Pass
<b>Rationale</b>	<p>If standing water is present above the outflow pipe entrance or drainage is blocked, then it would likely be noticeable during a precipitation event and this should trigger a self-generated work order that would be prioritized and addressed.</p> <p>By design, site drainage systems require periodic monitoring for accumulation of debris, and according to industry best practices, to prevent water damage, should be included in a preventative maintenance plan. The presence of this deficiency may indicate preventative maintenance activities could be improved.</p>
<b>Deficiency 2 – Site Drainage: Outside</b>	
<b>Deficiency</b>	Erosion is present.
<b>Deficiency Criteria</b>	Erosion is present and the footer is exposed.  OR  Erosion is more than 2 feet away from the built environment and its depth is equal to or greater than its measured distance from the built environment, and the inspector believes it may undermine the supporting soil.
<b>Health and Safety Determination</b>	Low
<b>Correction Timeframe</b>	60 Days

<b>HCV Correction Timeframe</b>	N/A
<b>HCV Pass/Fail</b>	Pass
<b>Rationale</b>	According to industry best practices, maintaining the site to prevent erosion of soil should be included in a preventative maintenance plan as it is likely to occur over time, and the presence of this deficiency may indicate preventative maintenance activities could be improved.
<b>Deficiency 3 – Site Drainage: Outside</b>	
<b>Deficiency</b>	Grate is not secure or does not cover the site drainage system’s collection point.
<b>Deficiency Criteria</b>	Grate is not secure or does not cover the site drainage system’s collection point.
<b>Health and Safety Determination</b>	Moderate
<b>Correction Timeframe</b>	30 days
<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If the grate is not secure or does not cover the drainage system’s collection point, then it may result in an opening that increases the resident’s risk of injury.</p> <p>The site drainage system should be checked during routine site walkthroughs and if the grate is not secure or does not cover the drainage system’s collection point, then it would likely be observed and should trigger a self-generated work order that would be prioritized and addressed.</p> <p>By design, site drainage systems require periodic monitoring, including inspecting for safety hazards, and according to industry best practices, should be included in a preventative maintenance plan. The presence of this deficiency may indicate preventative maintenance activities could be improved.</p>

**TABLE 52—SMOKE ALARM STANDARD**

<b>Definition and Location</b>	
<b>Definition</b>	A self-contained device that detects the presence of smoke, typically as an indicator of fire, and provides a visual or audio signal as an alert.

<b>Location</b>	Unit: Bedrooms, hallways, kitchens, stairwells.  Inside: Hallways, kitchens, stairwells, common areas.
<b>Deficiency 1 – Smoke Alarm: Unit</b> <span style="float: right;"><b>Affirmative Habitability Requirement: Yes</b></span>	
<b>Deficiency</b>	Smoke alarm is not installed where required.
<b>Deficiency Criteria</b>	Smoke alarm is not installed inside each bedroom.  AND  Smoke alarm is not installed outside the bedroom(s).  AND  Smoke alarm is not installed on each level.
<b>Health and Safety Determination</b>	Life-Threatening
<b>Correction Timeframe</b>	24 hours
<b>HCV Correction Timeframe</b>	24 hours
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If a smoke alarm is not installed inside each bedroom, outside the bedroom(s), and on each level, and there is a fire, then there may be an increased safety risk to the resident due to fire-related hazards, such as smoke inhalation and burns, which may result in injury or death.</p> <p>Property management would be expected to ensure that staff members understand how to identify if a smoke alarm is not installed inside each bedroom, outside the bedroom(s), and on each level. Management practices would be expected to assure prompt creation and prioritization of a work order to replace or install a smoke alarm, because it may result in safety hazards.</p>
<b>Deficiency 1 – Smoke Alarm: Inside</b> <span style="float: right;"><b>Affirmative Habitability Requirement: Yes</b></span>	
<b>Deficiency</b>	Smoke alarm is not installed where required.
<b>Deficiency Criteria</b>	Smoke alarm is not installed inside each classroom.  AND  Smoke alarm is not installed outside the classroom(s).  AND  Smoke alarm is not installed on each level.

<b>Health and Safety Determination</b>	Life-Threatening
<b>Correction Timeframe</b>	24 hours
<b>HCV Correction Timeframe</b>	24 hours
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If a smoke alarm is not installed inside each classroom, outside the classroom(s), and on each level, and there is a fire, then there may be an increased safety risk to the resident due to fire-related hazards, such as smoke inhalation and burns, which may result in injury or death.</p> <p>Property management would be expected to ensure that staff members understand how to identify a smoke alarm that is not installed inside each classroom, outside the classroom(s), and on each level. Management practices would be expected to assure prompt creation and prioritization of a work order to replace or install a smoke alarm because it may result in safety hazards.</p>

#### Deficiency 2 – Smoke Alarm: Unit

<b>Deficiency</b>	Smoke alarm is obstructed.
<b>Deficiency Criteria</b>	Smoke alarm is obstructed.
<b>Health and Safety Determination</b>	Life-Threatening
<b>Correction Timeframe</b>	24 hours
<b>HCV Correction Timeframe</b>	24 hours
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If a smoke alarm is obstructed, and there is a fire, then there may be an increased safety risk to the resident due to fire-related hazards, such as smoke inhalation and burns, which may result in injury or death.</p> <p>Property management would be expected to ensure that staff members understand how to identify if a smoke alarm is obstructed. Management practices would be expected to assure prompt creation and prioritization of a work order to remedy this deficiency because it may result in safety hazards.</p>

#### Deficiency 2 – Smoke Alarm: Inside

<b>Deficiency</b>	Smoke alarm is obstructed.
-------------------	----------------------------

<b>Deficiency Criteria</b>	Smoke alarm is obstructed.
<b>Health and Safety Determination</b>	Life-Threatening
<b>Correction Timeframe</b>	24 hours
<b>HCV Correction Timeframe</b>	24 hours
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If a smoke alarm is obstructed, and there is a fire, then there may be an increased safety risk to the resident due to fire-related hazards, such as smoke inhalation and burns, which may result in injury or death.</p> <p>Property management would be expected to ensure that staff members understand how to identify if a smoke alarm is obstructed. Management practices would be expected to assure prompt creation and prioritization of a work order to remedy this deficiency because it may result in safety hazards.</p>

#### **Deficiency 3 – Smoke Alarm: Unit**

<b>Deficiency</b>	Smoke alarm does not produce an audio or visual alarm when tested.
<b>Deficiency Criteria</b>	Smoke alarm does not produce an audio or visual alarm when tested.
<b>Health and Safety Determination</b>	Life-Threatening
<b>Correction Timeframe</b>	24 hours
<b>HCV Correction Timeframe</b>	24 hours
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If a smoke alarm does not produce an audio or visual alarm when tested, then the resident may not receive warning of fire, resulting in an increased safety risk to the resident due to fire-related hazards, such as smoke inhalation and burns, which may result in injury or death.</p> <p>Property management would be expected to ensure that staff members understand how to identify a smoke alarm that does not produce an audio or visual alarm when tested. Management practices would be expected to assure prompt creation and prioritization of a work order to remedy this deficiency because it may result in safety hazards.</p>

#### **Deficiency 3 – Smoke Alarm: Inside**

<b>Deficiency</b>	Smoke alarm does not produce an audio or visual alarm when tested.
-------------------	--

<b>Deficiency Criteria</b>	Smoke alarm does not produce an audio or visual alarm when tested.
<b>Health and Safety Determination</b>	Life-Threatening
<b>Correction Timeframe</b>	24 hours
<b>HCV Correction Timeframe</b>	24 hours
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If a smoke alarm does not produce an audio or visual alarm when tested, then the resident may not receive warning of fire, resulting in an increased safety risk to the resident due to fire-related hazards, such as smoke inhalation and burns, which may result in injury or death.</p> <p>Property management would be expected to ensure that staff members understand how to identify a smoke alarm that does not produce an audio or visual alarm when tested. Management practices would be expected to assure prompt creation and prioritization of a work order to remedy this deficiency because it may result in safety hazards.</p>

**TABLE 53—SPRINKLER ASSEMBLY STANDARD**

<b>Definition and Location</b>	
<b>Definition</b>	Part of the fire protection (sprinkler) system that discharges water when activated once reaching a certain (predetermined) temperature.
<b>Location</b>	<p>Unit: Bedrooms, living rooms, dining rooms, closets, kitchens, hallways, stairwells.</p> <p>Inside: Living rooms, dining rooms, closets, kitchens, hallways, stairwells, common areas.</p> <p>Outside: Covered decks, patios.</p>
<b>Deficiency 1 – Sprinkler Assembly: Unit</b>	
<b>Deficiency</b>	Sprinkler head assembly is encased or obstructed by an item or object that is within 18 inches of the sprinkler head.
<b>Deficiency Criteria</b>	Sprinkler head assembly is encased or obstructed by an item or object that is within 18 inches of the sprinkler head.
<b>Health and Safety Determination</b>	Life-Threatening
<b>Correction Timeframe</b>	24 hours

<b>HCV Correction Timeframe</b>	24 hours
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If a sprinkler head assembly is encased or obstructed by an item or object that is within 18 inches of the sprinkler head, then the coverage area of the sprinkler may be limited. If there is a fire, then the sprinkler head assembly may be unable to limit the fire spread and the resident may be at an increased risk of injury or death.</p> <p>Property management would be expected to ensure that staff understand how to identify a sprinkler head assembly that is encased or obstructed by an item or object that is within 18 inches of the sprinkler head.</p> <p>Management practices would be expected to assure prompt creation and prioritization of a work order to remedy this defect, because it may result in safety hazards.</p>

#### **Deficiency 1 – Sprinkler Assembly: Inside**

<b>Deficiency</b>	Sprinkler head assembly is encased or obstructed by an item or object that is within 18 inches of the sprinkler head.
<b>Deficiency Criteria</b>	Sprinkler head assembly is encased or obstructed by an item or object that is within 18 inches of the sprinkler head.
<b>Health and Safety Determination</b>	Life-Threatening
<b>Correction Timeframe</b>	24 hours
<b>HCV Correction Timeframe</b>	24 hours
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If a sprinkler head assembly is encased or obstructed by an item or object that is within 18 inches of the sprinkler head, then the coverage area of the sprinkler may be limited. If there is a fire, then the sprinkler head assembly may be unable to limit the fire spread and the resident may be at an increased risk of injury or death.</p> <p>Property management would be expected to ensure that staff understand how to identify a sprinkler head assembly that is encased or obstructed by an item or object that is within 18 inches of the sprinkler head.</p> <p>Management practices would be expected to assure prompt creation and prioritization of a work order to remedy this defect, because it may result in safety hazards.</p>

#### **Deficiency 1 – Sprinkler Assembly: Outside**

<b>Deficiency</b>	Sprinkler head assembly is encased or obstructed by an item or object that is within 18 inches of the sprinkler head.
<b>Deficiency Criteria</b>	Sprinkler head assembly is encased or obstructed by an item or object that is within 18 inches of the sprinkler head.
<b>Health and Safety Determination</b>	Life-Threatening
<b>Correction Timeframe</b>	24 hours
<b>HCV Correction Timeframe</b>	24 hours
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If a sprinkler head assembly is encased or obstructed by an item or object that is within 18 inches of the sprinkler head, then the coverage area of the sprinkler may be limited. If there is a fire, then the sprinkler head assembly may be unable to limit the fire spread and the resident may be at an increased risk of injury or death.</p> <p>Property management would be expected to ensure that staff understand how to identify a sprinkler head assembly that is encased or obstructed by an item or object that is within 18 inches of the sprinkler head.</p> <p>Management practices would be expected to assure prompt creation and prioritization of a work order to remedy this defect, because it may result in safety hazards.</p>

#### **Deficiency 2 – Sprinkler Assembly: Unit**

<b>Deficiency</b>	Sprinkler assembly component is damaged, inoperable, or missing and it is detrimental to performance.
<b>Deficiency Criteria</b>	Sprinkler assembly component is damaged (i.e., visibly defective; impacts functionality), inoperable (i.e., overall system or component thereof not meeting function or purpose; with or without visible damage), or missing (i.e., evidence of prior installation, but now not present or is incomplete) and it is detrimental to performance.
<b>Health and Safety Determination</b>	Life-Threatening
<b>Correction Timeframe</b>	24 hours
<b>HCV Correction Timeframe</b>	24 hours
<b>HCV Pass/Fail</b>	Fail

<b>Rationale</b>	<p>If a sprinkler assembly component is damaged, inoperable, or missing and it is detrimental to performance, and there is a fire, then the resident may be at an increased risk of injury or death.</p> <p>Property management would be expected to ensure that staff understand how to identify a sprinkler assembly component that is damaged, inoperable, or missing and it is detrimental to performance. Management practices would be expected to assure prompt creation and prioritization of a work order to remedy this defect, because it may result in safety hazards.</p>
<b>Deficiency 2 – Sprinkler Assembly: Inside</b>	
<b>Deficiency</b>	Sprinkler assembly component is damaged, inoperable, or missing and it is detrimental to performance.
<b>Deficiency Criteria</b>	Sprinkler assembly component is damaged (i.e., visibly defective; impacts functionality), inoperable (i.e., overall system or component thereof not meeting function or purpose; with or without visible damage), or missing (i.e., evidence of prior installation, but now not present or is incomplete) and it is detrimental to performance.
<b>Health and Safety Determination</b>	Life-Threatening
<b>Correction Timeframe</b>	24 hours
<b>HCV Correction Timeframe</b>	24 hours
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If a sprinkler assembly component is damaged, inoperable, or missing and it is detrimental to performance, and there is a fire, then the resident may be at an increased risk of injury or death.</p> <p>Property management would be expected to ensure that staff understand how to identify a sprinkler assembly component that is damaged, inoperable, or missing and it is detrimental to performance. Management practices would be expected to assure prompt creation and prioritization of a work order to remedy this defect, because it may result in safety hazards.</p>
<b>Deficiency 2 – Sprinkler Assembly: Outside</b>	
<b>Deficiency</b>	Sprinkler assembly component is damaged, inoperable, or missing and it is detrimental to performance.
<b>Deficiency Criteria</b>	Sprinkler assembly component is damaged (i.e., visibly defective; impacts functionality), inoperable (i.e., overall system or component thereof not meeting function or purpose; with or without visible damage), or missing

	(i.e., evidence of prior installation, but now not present or is incomplete) and it is detrimental to performance.
<b>Health and Safety Determination</b>	Life-Threatening
<b>Correction Timeframe</b>	24 hours
<b>HCV Correction Timeframe</b>	24 hours
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If a sprinkler assembly component is damaged, inoperable, or missing and it is detrimental to performance, and there is a fire, then the resident may be at an increased risk of injury or death.</p> <p>Property management would be expected to ensure that staff understand how to identify a sprinkler assembly component that is damaged, inoperable, or missing and it is detrimental to performance. Management practices would be expected to assure prompt creation and prioritization of a work order to remedy this defect, because it may result in safety hazards.</p>

#### **Deficiency 3 – Sprinkler Assembly: Unit**

<b>Deficiency</b>	Sprinkler assembly has evidence of corrosion.
<b>Deficiency Criteria</b>	Sprinkler assembly has evidence of corrosion.
<b>Health and Safety Determination</b>	Life-Threatening
<b>Correction Timeframe</b>	24 hours
<b>HCV Correction Timeframe</b>	24 hours
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If the sprinkler assembly has evidence of corrosion, and there is a fire, then the resident may be at an increased risk of injury or death.</p> <p>Property management would be expected to ensure that staff understand how to identify if a sprinkler assembly has evidence of corrosion. Management practices would be expected to assure prompt creation and prioritization of a work order to remedy this defect, because it may result in safety hazards.</p>

#### **Deficiency 3 – Sprinkler Assembly: Inside**

<b>Deficiency</b>	Sprinkler assembly has evidence of corrosion.
<b>Deficiency Criteria</b>	Sprinkler assembly has evidence of corrosion.

<b>Health and Safety Determination</b>	Life-Threatening
<b>Correction Timeframe</b>	24 hours
<b>HCV Correction Timeframe</b>	24 hours
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If the sprinkler assembly has evidence of corrosion, and there is a fire, then the resident may be at an increased risk of injury or death.</p> <p>Property management would be expected to ensure that staff understand how to identify if a sprinkler assembly has evidence of corrosion. Management practices would be expected to assure prompt creation and prioritization of a work order to remedy this defect, because it may result in safety hazards.</p>
<b>Deficiency 3 – Sprinkler Assembly: Outside</b>	
<b>Deficiency</b>	Sprinkler assembly has evidence of corrosion.
<b>Deficiency Criteria</b>	Sprinkler assembly has evidence of corrosion.
<b>Health and Safety Determination</b>	Life-Threatening
<b>Correction Timeframe</b>	24 hours
<b>HCV Correction Timeframe</b>	24 hours
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If the sprinkler assembly has evidence of corrosion, and there is a fire, then the resident may be at an increased risk of injury or death.</p> <p>Property management would be expected to ensure that staff understand how to identify if a sprinkler assembly has evidence of corrosion. Management practices would be expected to assure prompt creation and prioritization of a work order to remedy this defect, because it may result in safety hazards.</p>
<b>Deficiency 4 – Sprinkler Assembly: Unit</b>	
<b>Deficiency</b>	Sprinkler assembly has evidence of foreign material that is detrimental to performance.
<b>Deficiency Criteria</b>	<p>Foreign material covers 75% or more of the sprinkler assembly.</p> <p>OR</p> <p>Foreign material covers 75% or more of the glass bulb.</p>

<b>Health and Safety Determination</b>	Life-Threatening
<b>Correction Timeframe</b>	24 hours
<b>HCV Correction Timeframe</b>	24 hours
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If the sprinkler assembly has evidence of foreign material that is detrimental to performance, and there is a fire, then the resident may be at an increased risk of injury or death.</p> <p>Property management would be expected to ensure that staff understand how to identify if a sprinkler assembly has evidence of foreign material that is detrimental to performance. Management practices would be expected to assure prompt creation and prioritization of a work order to remedy this defect, because it may result in safety hazards.</p>

#### **Deficiency 4 – Sprinkler Assembly: Inside**

<b>Deficiency</b>	Sprinkler assembly has evidence of foreign material that is detrimental to performance.
<b>Deficiency Criteria</b>	<p>Foreign material covers 75% or more of the sprinkler assembly.</p> <p>OR</p> <p>Foreign material covers 75% or more of the glass bulb.</p>
<b>Health and Safety Determination</b>	Life-Threatening
<b>Correction Timeframe</b>	24 hours
<b>HCV Correction Timeframe</b>	24 hours
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If the sprinkler assembly has evidence of foreign material that is detrimental to performance, and there is a fire, then the resident may be at an increased risk of injury or death.</p> <p>Property management would be expected to ensure that staff understand how to identify if a sprinkler assembly has evidence of foreign material that is detrimental to performance. Management practices would be expected to assure prompt creation and prioritization of a work order to remedy this defect, because it may result in safety hazards.</p>

#### **Deficiency 4 – Sprinkler Assembly: Outside**

<b>Deficiency</b>	Sprinkler assembly has evidence of foreign material that is detrimental to performance.
<b>Deficiency Criteria</b>	Foreign material covers 75% or more of the sprinkler assembly. OR Foreign material covers 75% or more of the glass bulb.
<b>Health and Safety Determination</b>	Life-Threatening
<b>Correction Timeframe</b>	24 hours
<b>HCV Correction Timeframe</b>	24 hours
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If the sprinkler assembly has evidence of foreign material that is detrimental to performance, and there is a fire, then the resident may be at an increased risk of injury or death.</p> <p>Property management would be expected to ensure that staff understand how to identify if a sprinkler assembly has evidence of foreign material that is detrimental to performance. Management practices would be expected to assure prompt creation and prioritization of a work order to remedy this defect, because it may result in safety hazards.</p>

**TABLE 54—STEPS AND STAIRS STANDARD**

<b>Definition and Location</b>	
<b>Definition</b>	A single step, series of steps, or flights of steps that connect two levels.
<b>Location</b>	Unit: Hallway, stairwell.  Inside: Hallway, stairwell.  Outside: Along elevated walking paths.
<b>Deficiency 1 – Steps and Stairs: Unit</b>	
<b>Deficiency</b>	Tread is missing or damaged.
<b>Deficiency Criteria</b>	Tread on a set of stairs is missing (i.e., evidence of prior installation, but now not present or is incomplete).  OR  Tread on a set of stairs is loose or unlevel.

	OR
	A portion of the tread nosing that is greater than 1 inch in depth or 4 inches wide is damaged or broken.
<b>Health and Safety Determination</b>	Moderate
<b>Correction Timeframe</b>	30 days
<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If a tread is missing or damaged, then there is an increased probability of falls that may lead to injury.</p> <p>If a tread is missing or damaged, and there is an emergency, then the resident's ability to egress or ingress may be impeded.</p> <p>If a tread is missing or damaged, then the resident will likely report this, and the presence of this deficiency may indicate that complaint-based work orders are not being addressed.</p> <p>If a tread is missing or damaged, then it should be identified through regular maintenance activities and the presence of this deficiency may indicate that self-generated work orders are not being addressed.</p>

#### Deficiency 1 – Steps and Stairs: Inside

<b>Deficiency</b>	Tread is missing or damaged.
<b>Deficiency Criteria</b>	<p>Tread on a set of stairs is missing (i.e., evidence of prior installation, but now not present or is incomplete).</p> <p>OR</p> <p>Tread on a set of stairs is loose or unlevel.</p> <p>OR</p> <p>A portion of the tread nosing that is greater than 1 inch in depth or 4 inches wide is damaged or broken.</p>
<b>Health and Safety Determination</b>	Moderate
<b>Correction Timeframe</b>	30 days
<b>HCV Correction Timeframe</b>	30 days

<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If a tread is missing or damaged, then there is an increased probability of falls that may lead to injury.</p> <p>If a tread is missing or damaged, and there is an emergency, then the resident's ability to egress or ingress may be impeded.</p> <p>If a tread is missing or damaged, then the resident will likely report this, and the presence of this deficiency may indicate that complaint-based work orders are not being addressed.</p> <p>If a tread is missing or damaged, then it should be identified through regular maintenance activities and the presence of this deficiency may indicate that self-generated work orders are not being addressed.</p>
<b>Deficiency 1 – Steps and Stairs: Outside</b>	
<b>Deficiency</b>	Tread is missing or damaged
<b>Deficiency Criteria</b>	<p>Tread on a set of stairs is missing (i.e., evidence of prior installation, but now not present or is incomplete).</p> <p>OR</p> <p>Tread on a set of stairs is loose or unlevel.</p> <p>OR</p> <p>A portion of the tread nosing that is greater than 1 inch in depth or 4 inches wide is damaged or broken.</p>
<b>Health and Safety Determination</b>	Moderate
<b>Correction Timeframe</b>	30 days
<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If a tread is missing or damaged, then there is an increased probability of falls that may lead to injury.</p> <p>If a tread is missing or damaged, and there is an emergency, then the resident's ability to egress or ingress may be impeded.</p> <p>If a tread is missing or damaged, then the resident will likely report this, and the presence of this deficiency may indicate that complaint-based work orders are not being addressed.</p>

If a tread is missing or damaged, then it should be identified through regular maintenance activities and the presence of this deficiency may indicate that self-generated work orders are not being addressed.

#### Deficiency 2 – Steps and Stairs: Unit

<b>Deficiency</b>	Stringer is damaged.
<b>Deficiency Criteria</b>	Stringer is damaged (i.e., visibly defective; impacts functionality).
<b>Health and Safety Determination</b>	Moderate
<b>Correction Timeframe</b>	30 days
<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If a stringer is damaged, then there is an increased probability of falls that may lead to injury.</p> <p>If a stringer is damaged, and there is an emergency, then the resident's ability to egress or ingress may be impeded.</p> <p>If a stringer is damaged, then the resident will likely report this, and the presence of this deficiency may indicate that complaint-based work orders are not being addressed.</p> <p>If a stringer is damaged, then it should be identified through regular maintenance activities and the presence of this deficiency may indicate that self-generated work orders are not being addressed.</p>

#### Deficiency 2 – Steps and Stairs: Inside

<b>Deficiency</b>	Stringer is damaged.
<b>Deficiency Criteria</b>	Stringer is damaged (i.e., visibly defective; impacts functionality).
<b>Health and Safety Determination</b>	Moderate
<b>Correction Timeframe</b>	30 days
<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	If a stringer is damaged, then there is an increased probability of falls that may lead to injury.

If a stringer is damaged, and there is an emergency, then the resident's ability to egress or ingress may be impeded.

If a stringer is damaged, then the resident will likely report this, and the presence of this deficiency may indicate that complaint-based work orders are not being addressed.

If a stringer is damaged, then it should be identified through regular maintenance activities and the presence of this deficiency may indicate that self-generated work orders are not being addressed.

### Deficiency 2 – Steps and Stairs: Outside

<b>Deficiency</b>	Stringer is damaged.
<b>Deficiency Criteria</b>	Stringer is damaged (i.e., visibly defective; impacts functionality).
<b>Health and Safety Determination</b>	Moderate
<b>Correction Timeframe</b>	30 days
<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If a stringer is damaged, then there is an increased probability of falls that may lead to injury.</p> <p>If a stringer is damaged, and there is an emergency, then the resident's ability to egress or ingress may be impeded.</p> <p>If a stringer is damaged, then the resident will likely report this, and the presence of this deficiency may indicate that complaint-based work orders are not being addressed.</p> <p>If a stringer is damaged, then it should be identified through regular maintenance activities and the presence of this deficiency may indicate that self-generated work orders are not being addressed.</p>

### Deficiency 3 – Steps and Stairs: Outside

<b>Deficiency</b>	Step or stair is not functionally adequate.
<b>Deficiency Criteria</b>	Step or stair is not functionally adequate (i.e., may not allow for personal traffic from one level to the next).
<b>Health and Safety Determination</b>	Moderate
<b>Correction Timeframe</b>	30 days

<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If stairs are not functionally adequate, then there may be an increased fall risk to the resident.</p> <p>If stairs are not functionally adequate, then the resident may be unable to use a feature that is expected to be provided and maintained as part of their rent.</p> <p>Property management would be expected to ensure that staff members understand how to identify if stairs are not functionally adequate. Management practices would be expected to assure prompt creation and prioritization of a work order to remedy this deficiency because it may lead to safety hazards and usability barriers.</p>

**TABLE 55—STRUCTURAL SYSTEM STANDARD**

<b>Definition and Location</b>	
<b>Definition</b>	Load-bearing system within the built environment (i.e., structures, features, and facilities).
<b>Location</b>	<p>Unit: All accessible areas within the dwelling and those areas to which the resident has sole access (e.g., dwelling balconies, decks, patios, basements).</p> <p>Inside: All accessible areas within the interior common spaces.</p> <p>Outside: All accessible areas throughout the exterior built environment (e.g., rooftop decks, patios, playgrounds).</p>
<b>Deficiency 1 – Structural System: Unit</b>	
<b>Deficiency</b>	Structural system exhibits signs of serious failure.
<b>Deficiency Criteria</b>	Structural system exhibits signs of serious failure and may threaten the resident’s safety.
<b>Health and Safety Determination</b>	Life-Threatening
<b>Correction Timeframe</b>	24 hours
<b>HCV Correction Timeframe</b>	24 hours
<b>HCV Pass/Fail</b>	Fail

<b>Rationale</b>	<p>If the structural system exhibits signs of serious failure, there may be an increased safety risk to the resident due to structural instability or collapse, which may result in injury or death.</p> <p>A resident is likely to notice if a structural system exhibits signs of serious failure within the unit and to recognize it is important enough to report it to property management because it may present safety hazards. Property management should be expected to prioritize a work order to remedy this deficiency because it may result in safety hazards.</p> <p>If the structural system exhibits signs of serious failure, then it will likely require a capital expenditure to repair.</p> <p>If the structural system exhibits signs of serious failure, then a structural failure of the building or load-bearing component may occur.</p> <p>If the structural system exhibits signs of serious failure, and it is visible to visitors or the public, then it may convey a lack of adequate property management and impact the property's market appeal.</p>
<b>Deficiency 1 – Structural System: Inside</b>	
<b>Deficiency</b>	Structural system exhibits signs of serious failure.
<b>Deficiency Criteria</b>	Structural system exhibits signs of serious failure and may threaten the resident's safety.
<b>Health and Safety Determination</b>	Life-Threatening
<b>Correction Timeframe</b>	24 hours
<b>HCV Correction Timeframe</b>	24 hours
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If the structural system exhibits signs of serious failure, there may be an increased safety risk to the resident due to structural instability or collapse, which may result in injury or death.</p> <p>Property management would be expected to ensure that staff members understand how to identify if a structural system exhibits signs of serious failure. Management practices would be expected to assure prompt creation and prioritization of a work order to remedy this deficiency because it may result in safety hazards.</p> <p>If the structural system exhibits signs of serious failure, then it will likely require a capital expenditure to repair.</p>

If the structural system exhibits signs of serious failure, then a structural failure of the building or load-bearing component may occur.

If the structural system exhibits signs of serious failure, and it is visible to visitors or the public, then it may convey a lack of adequate property management and impact the property's market appeal.

#### **Deficiency 1 – Structural System: Outside**

<b>Deficiency</b>	Structural system exhibits signs of serious failure.
<b>Deficiency Criteria</b>	Structural system exhibits signs of serious failure and may threaten the resident's safety.
<b>Health and Safety Determination</b>	Life-Threatening
<b>Correction Timeframe</b>	24 hours
<b>HCV Correction Timeframe</b>	24 hours
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If the structural system exhibits signs of serious failure, there may be an increased safety risk to the resident due to structural instability or collapse, which may result in injury or death.</p> <p>Property management would be expected to ensure that staff members understand how to identify if a structural system exhibits signs of serious failure. Management practices would be expected to assure prompt creation and prioritization of a work order to remedy this deficiency because it may result in safety hazards.</p> <p>If the structural system exhibits signs of serious failure, then it will likely require a capital expenditure to repair.</p> <p>If the structural system exhibits signs of serious failure, then a structural failure of the building or load-bearing component may occur.</p> <p>If the structural system exhibits signs of serious failure, and it is visible to visitors or the public, then it may convey a lack of adequate property management and impact the property's market appeal.</p>

**TABLE 56—TOILET STANDARD**

<b>Definition and Location</b>	
<b>Definition</b>	A plumbing fixture used to receive human waste and to discharge it through a waste pipe, using water as a conveying method.

<b>Location</b>	Unit: Bathroom. Inside: Bathroom.
<b>Deficiency 1 – Toilet: Unit</b>	
<b>Deficiency</b>	Only 1 toilet was installed, and it is missing.
<b>Deficiency Criteria</b>	Only 1 toilet was installed, and it is missing (i.e., evidence of prior installation, but now not present or is incomplete).
<b>Health and Safety Determination</b>	Life-Threatening
<b>Correction Timeframe</b>	24 hours
<b>HCV Correction Timeframe</b>	24 hours
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If the toilet is missing, then the resident may inadvertently come into contact with sewage, which may result in illness.</p> <p>If the toilet is missing, then the resident’s ability to dispose of human waste is limited.</p> <p>If the toilet is missing, then the resident is unable to use a fixture that is expected to be provided and maintained as part of their rent.</p> <p>A resident is likely to notice if the toilet is missing and to recognize it is important enough to report to property management because it may present health or sanitary hazards. Property management should be expected to prioritize a work order to replace the toilet because it may result in health or sanitary hazards.</p>
<b>Deficiency 1 – Toilet: Inside</b>	
<b>Deficiency</b>	Only 1 toilet was installed, and it is missing.
<b>Deficiency Criteria</b>	Only 1 toilet was installed, and it is missing (i.e., evidence of prior installation, but now not present or is incomplete).
<b>Health and Safety Determination</b>	Moderate
<b>Correction Timeframe</b>	30 days
<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail

<b>Rationale</b>	If the toilet is missing, then the resident may inadvertently come into contact with sewage, which may result in illness.
	If the toilet is missing, then the resident’s ability to dispose of human waste is limited.
	If the toilet is missing, then the resident is unable to use a fixture that is expected to be provided and maintained as part of their rent.
	Property management would be expected to ensure that staff members understand how to identify if the toilet is missing. Management practices would be expected to assure prompt creation and prioritization of a work order to replace the toilet because it may result in safety or sanitary hazards.
<b>Deficiency 2 – Toilet: Unit</b>	
<b>Deficiency</b>	A toilet is missing and at least 1 toilet is installed elsewhere that is operational.
<b>Deficiency Criteria</b>	A toilet is missing (i.e., evidence of prior installation, but now not present or is incomplete) and at least 1 toilet is installed elsewhere within the Unit that is operational.
<b>Health and Safety Determination</b>	Moderate
<b>Correction Timeframe</b>	30 days
<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	If a toilet is missing, then the resident may inadvertently come into contact with sewage, which may result in illness.
	If a toilet is missing, then the resident’s ability to dispose of human waste is limited.
	If a toilet is missing, then the resident is unable to use a fixture that is expected to be provided and maintained as part of their rent.
	A resident is likely to notice a missing toilet and to recognize it is important enough to report to property management because it may present health or sanitary hazards. Property management should be expected to prioritize a work order for a missing toilet because it may result in health or sanitary hazards.
<b>Deficiency 2 – Toilet: Inside</b>	

<b>Deficiency</b>	A toilet is missing and at least 1 toilet is installed elsewhere that is operational.
<b>Deficiency Criteria</b>	A toilet is missing (i.e., evidence of prior installation, but now not present or is incomplete) and at least 1 toilet is installed elsewhere within the Inside area that is operational.
<b>Health and Safety Determination</b>	Moderate
<b>Correction Timeframe</b>	30 days
<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If a toilet is missing, then the resident may inadvertently come into contact with sewage, which may result in illness.</p> <p>If a toilet is missing, then the resident's ability to dispose of human waste is limited.</p> <p>If a toilet is missing, then the resident is unable to use a fixture that is expected to be provided and maintained as part of their rent.</p> <p>Property management would be expected to ensure that staff members understand how to identify a missing toilet. Management practices would be expected to assure prompt creation and prioritization of a work order to replace the toilet because it may result in safety or sanitary hazards.</p>
<b>Deficiency 3 – Toilet: Unit</b>	
<b>Deficiency</b>	Only 1 toilet was installed, and it is damaged or inoperable.
<b>Deficiency Criteria</b>	<p>Only 1 toilet was installed, and it is damaged (i.e., visibly defective; impacts functionality).</p> <p>OR</p> <p>Only 1 toilet was installed, and it is inoperable (i.e., overall system is not meeting function or purpose; with or without visible damage).</p>
<b>Health and Safety Determination</b>	Severe
<b>Correction Timeframe</b>	24 hours
<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail

<b>Rationale</b>	<p>If the toilet is damaged or inoperable, then the resident may be at an increased risk of exposure to pathogens due to a leak or overflow of the toilet, which may result in illness.</p> <p>If the toilet is damaged or inoperable, then the resident's ability to dispose of human waste may be limited.</p> <p>If the toilet is damaged or inoperable, then the resident may be unable to use a fixture that is expected to be provided and maintained as part of their rent.</p> <p>If the toilet is damaged or inoperable, and it is not shutting off and the resident is responsible for water and sewage utilities, there may be an increased expense for both excessive water usage and sewer incurred by the resident.</p> <p>A resident is likely to notice if the toilet is damaged or inoperable and to recognize it is important enough to report to property management because it may present health or sanitary hazards. Property management should be expected to prioritize a work order for the damaged or inoperable toilet because it may result in health or sanitary hazards.</p>
<b>Deficiency 3 – Toilet: Inside</b>	
<b>Deficiency</b>	Only 1 toilet was installed, and it is damaged or inoperable.
<b>Deficiency Criteria</b>	<p>Only 1 toilet was installed, and it is damaged (i.e., visibly defective; impacts functionality).</p> <p>OR</p> <p>Only 1 toilet was installed, and it is inoperable (i.e., overall system is not meeting function or purpose; with or without visible damage).</p>
<b>Health and Safety Determination</b>	Moderate
<b>Correction Timeframe</b>	30 days
<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If the toilet is damaged or inoperable, then the resident may be at an increased risk of exposure to pathogens due to a leak or overflow of the toilet, which may result in illness.</p> <p>If the toilet is damaged or inoperable, then the resident's ability to dispose of human waste may be limited.</p>

If the toilet is damaged or inoperable, then the resident may be unable to use a fixture that is expected to be provided and maintained as part of their rent.

Property management would be expected to ensure that staff members understand how to identify if the toilet is damaged or inoperable. Management practices would be expected to assure prompt creation and prioritization of a work order to remedy the deficiency because it may result in safety or sanitary hazards.

#### Deficiency 4 – Toilet: Unit

<b>Deficiency</b>	A toilet is damaged or inoperable and at least 1 toilet is installed elsewhere that is operational.
<b>Deficiency Criteria</b>	<p>A toilet is damaged (i.e., visibly defective; impacts functionality) and at least 1 toilet is installed elsewhere within the Unit that is operational.</p> <p>OR</p> <p>A toilet is inoperable (i.e., overall system is not meeting function or purpose; with or without visible damage) and at least 1 toilet is installed elsewhere within the Unit that is operational.</p>
<b>Health and Safety Determination</b>	Moderate
<b>Correction Timeframe</b>	30 days
<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If a toilet is damaged or inoperable, then the resident may be at an increased risk of exposure to pathogens due to a leak or overflow of the toilet, which may result in illness.</p> <p>If a toilet is damaged or inoperable, then the resident’s ability to dispose of human waste may be limited.</p> <p>If a toilet is damaged or inoperable, then the resident may be unable to use a fixture that is expected to be provided and maintained as part of their rent.</p> <p>If a toilet is damaged or inoperable, and it is not shutting off and the resident is responsible for water and sewage utilities, there may be an increased expense for both excessive water usage and sewer incurred by the resident.</p> <p>A resident is likely to notice a damaged or inoperable toilet and to recognize it is important enough to report to property management because it may</p>

present health or sanitary hazards. Property management should be expected to prioritize a work order for a damaged or inoperable toilet because it may result in health or sanitary hazards.

#### Deficiency 4 – Toilet: Inside

<b>Deficiency</b>	A toilet is damaged or inoperable and at least 1 toilet is installed elsewhere that is operational.
<b>Deficiency Criteria</b>	<p>A toilet is damaged (i.e., visibly defective; impacts functionality) and at least 1 toilet is installed elsewhere within the Inside area that is operational.</p> <p>OR</p> <p>A toilet is inoperable (i.e., overall system is not meeting function or purpose; with or without visible damage) and at least 1 toilet is installed elsewhere within the Inside area that is operational.</p>
<b>Health and Safety Determination</b>	Moderate
<b>Correction Timeframe</b>	30 days
<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If a toilet is damaged or inoperable, then the resident may be at an increased risk of exposure to pathogens due to a leak or overflow of the toilet, which may result in illness.</p> <p>If a toilet is damaged or inoperable, then the resident’s ability to dispose of human waste may be limited.</p> <p>If a toilet is damaged or inoperable, then the resident may be unable to use a fixture that is expected to be provided and maintained as part of their rent.</p> <p>Property management would be expected to ensure that staff members understand how to identify if a toilet is damaged or inoperable. Management practices would be expected to assure prompt creation and prioritization of a work order to remedy the deficiency because it may result in safety or sanitary hazards.</p>

#### Deficiency 5 – Toilet: Unit

<b>Deficiency</b>	Toilet component is damaged, inoperable, or missing such that it may limit the resident’s ability to safely discharge human waste.
<b>Deficiency Criteria</b>	Toilet component is damaged (i.e., visibly defective; impacts functionality) such that it may limit the resident’s ability to safely discharge human waste.

	<p>OR</p> <p>Toilet component is inoperable (i.e., component is not meeting function or purpose; with or without visible damage) such that it may limit the resident's ability to safely discharge human waste.</p> <p>OR</p> <p>Toilet component is missing (i.e., evidence of prior installation, but now not present or is incomplete) such that it may limit the resident's ability to safely discharge human waste.</p>
<b>Health and Safety Determination</b>	Moderate
<b>Correction Timeframe</b>	30 days
<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If a toilet component is damaged, inoperable, or missing such that it may limit the resident's ability to safely discharge human waste, then the resident may be at an increased risk of illness from infectious disease.</p> <p>If a toilet component is damaged, inoperable, or missing such that it may limit the resident's ability to safely discharge human waste, then the resident may not be able to use a feature that is expected to be provided and maintained as part of their rent.</p> <p>If a toilet component is damaged, inoperable, or missing such that it may limit the resident's ability to safely discharge human waste, then the resident is likely to notice this and to recognize it is important enough to report it to property management because it may present sanitary hazards or usability barriers. Property management should be expected to prioritize a work order to remedy this deficiency because it may result in sanitary hazards.</p>
<b>Deficiency 5 – Toilet: Inside</b>	
<b>Deficiency</b>	Toilet component is damaged, inoperable, or missing such that it may limit the resident's ability to safely discharge human waste.
<b>Deficiency Criteria</b>	<p>Toilet component is damaged (i.e., visibly defective; impacts functionality) such that it may limit the resident's ability to safely discharge human waste.</p> <p>OR</p>

Toilet component is inoperable (i.e., component is not meeting function or purpose; with or without visible damage) such that it may limit the resident's ability to safely discharge human waste.

OR

Toilet component is missing (i.e., evidence of prior installation, but now not present or is incomplete) such that it may limit the resident's ability to safely discharge human waste.

<b>Health and Safety Determination</b>	Moderate
<b>Correction Timeframe</b>	30 days
<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If a toilet component is damaged, inoperable, or missing such that it may limit the resident's ability to safely discharge human waste, then the resident may be at an increased risk of illness from infectious disease.</p> <p>If a toilet component is damaged, inoperable, or missing such that it may limit the resident's ability to safely discharge human waste, then the resident may not be able to use a feature that is expected to be provided and maintained as part of their rent.</p> <p>Property management would be expected to ensure that staff members understand how to identify a toilet component that is damaged, inoperable, or missing such that it may limit the resident's ability to safely discharge human waste. Management practices would be expected to assure prompt creation and prioritization of a work order to remedy this deficiency because it may result in sanitary hazards or usability barriers.</p>
<b>Deficiency 6 – Toilet: Unit</b>	
<b>Deficiency</b>	Toilet is not secured at the base.
<b>Deficiency Criteria</b>	Toilet is not secured at the base.
<b>Health and Safety Determination</b>	Moderate
<b>Correction Timeframe</b>	30 days
<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail

<b>Rationale</b>	<p>If a toilet is not secure at the base, then the resident could be exposed to sewer leakage.</p> <p>If a toilet is not secure at the base, then there is a potential for injury to the resident.</p> <p>If a toilet is not secure at the base, then the resident's ability to dispose of human waste may be limited.</p> <p>If a toilet is not secure at the base, then the resident may be unable to use a fixture that is expected to be provided and maintained as part of their rent.</p> <p>A resident is likely to notice a toilet that is not secure at the base and to recognize it is important enough to report to property management because it may present safety hazards. Property management should be expected to prioritize a work order to remedy this deficiency because it may result in safety hazards or usability barriers.</p>
<b>Deficiency 6 – Toilet: Inside</b>	
<b>Deficiency</b>	Toilet is not secured at the base.
<b>Deficiency Criteria</b>	Toilet is not secured at the base.
<b>Health and Safety Determination</b>	Moderate
<b>Correction Timeframe</b>	30 days
<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If a toilet is not secure at the base, then the resident could be exposed to sewer leakage.</p> <p>If a toilet is not secure at the base, then there is a potential for injury to the resident.</p> <p>If a toilet is not secure at the base, then the resident's ability to dispose of human waste may be limited.</p> <p>If a toilet is not secure at the base, then the resident may be unable to use a fixture that is expected to be provided and maintained as part of their rent.</p> <p>Property management would be expected to ensure that staff members understand how to identify a toilet that is not secure at the base. Management practices would be expected to assure prompt creation and prioritization of a work order to remedy the deficiency because it may result in safety hazards or usability barriers.</p>

**Deficiency 7 – Toilet: Unit**

<b>Deficiency</b>	Toilet component is damaged, inoperable, or missing and it does not limit the resident's ability to discharge human waste.
<b>Deficiency Criteria</b>	Toilet component is damaged (i.e., visibly defective; impacts functionality) and it does not limit the resident's ability to safely discharge human waste.  OR  Toilet component is inoperable (i.e., component is not meeting function or purpose; with or without visible damage) and it does not limit the resident's ability to safely discharge human waste.  OR  Toilet component is missing (i.e., evidence of prior installation, but now not present or is incomplete) and it does not limit the resident's ability to safely discharge human waste.
<b>Health and Safety Determination</b>	Low
<b>Correction Timeframe</b>	60 Days
<b>HCV Correction Timeframe</b>	N/A
<b>HCV Pass/Fail</b>	Pass
<b>Rationale</b>	If the resident's ability to safely discharge human waste is not limited, but a toilet component is damaged, inoperable, or missing, then the resident's ability to fully utilize an aspect of the fixture may be reduced.  If the resident's ability to safely discharge human waste is not limited, but a toilet component is damaged, inoperable, or missing, then the resident's ability to fully utilize an aspect of the fixture may be reduced.

**Deficiency 7 – Toilet: Inside**

<b>Deficiency</b>	Toilet component is damaged, inoperable, or missing and it does not limit the resident's ability to discharge human waste.
<b>Deficiency Criteria</b>	Toilet component is damaged (i.e., visibly defective; impacts functionality) and it does not limit the resident's ability to safely discharge human waste.  OR  Toilet component is inoperable (i.e., component is not meeting function or purpose; with or without visible damage) and it does not limit the resident's ability to safely discharge human waste.  OR

	Toilet component is missing (i.e., evidence of prior installation, but now not present or is incomplete) and it does not limit the resident's ability to safely discharge human waste.
<b>Health and Safety Determination</b>	Low
<b>Correction Timeframe</b>	60 Days
<b>HCV Correction Timeframe</b>	N/A
<b>HCV Pass/Fail</b>	Pass
<b>Rationale</b>	<p>If the resident's ability to safely discharge human waste is not limited, but a toilet component is damaged, inoperable, or missing, then the resident's ability to fully utilize an aspect of the fixture may be reduced.</p> <p>If the resident's ability to safely discharge human waste is not limited, but a toilet component is damaged, inoperable, or missing, then property management would be expected to assure prompt creation and prioritization of a work order to remedy this deficiency because it may result in usability barriers.</p>

<b>Deficiency 8 – Toilet: Unit</b>		<b>Affirmative Habitability Requirement: Yes</b>
<b>Deficiency</b>	Toilet cannot be used in private.	
<b>Deficiency Criteria</b>	Toilet cannot be used in private.	
<b>Health and Safety Determination</b>	Moderate	
<b>Correction Timeframe</b>	30 days	
<b>HCV Correction Timeframe</b>	30 days	
<b>HCV Pass/Fail</b>	Fail	
<b>Rationale</b>	If a toilet cannot be used in private, then the resident's reasonable expectation of privacy within their unit is not being met.	

<b>Deficiency 8 – Toilet: Inside</b>	
<b>Deficiency</b>	Toilet cannot be used in private.
<b>Deficiency Criteria</b>	Toilet cannot be used in private.
<b>Health and Safety Determination</b>	Moderate
<b>Correction Timeframe</b>	30 days

<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	If a toilet cannot be used in private, then the resident's reasonable expectation of privacy is not being met.

**TABLE 57—TRASH CHUTE STANDARD**

<b>Definition and Location</b>	
<b>Definition</b>	A large tube through which refuse is carried by means of gravity to a large waste receptacle at the bottom end.
<b>Location</b>	Inside: Hallways of high-rises, hallway closets of high-rises, typically located in the same place on every floor.
<b>Deficiency 1 – Trash Chute: Inside</b>	
<b>Deficiency</b>	Chute door does not open or self-close and latch.
<b>Deficiency Criteria</b>	Chute door does not open.  OR  Chute door does not self-close and latch.
<b>Health and Safety Determination</b>	Moderate
<b>Correction Timeframe</b>	30 days
<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If the chute door does not self-close and latch, then it may present a fall risk for the resident. Additionally, if there is a fire, then it may provide a route for fire to move between locations through a building.</p> <p>If the chute door does not open or self-close and latch, then the resident's ability to dispose of garbage in a sanitary manner may be impacted.</p> <p>If the chute door does not open or self-close and latch, then the resident may be unable to use a feature that is expected to be provided and maintained as part of their rent.</p> <p>If the chute door does not open or self-close and latch, then the resident would likely report it because there is a barrier to usability, and the</p>

presence of this deficiency may indicate complaint-based work orders are not being addressed.

If the chute door does not open or self-close and latch, then this should be identified during regular maintenance activities and the presence of this deficiency may indicate self-generated work orders are not being addressed.

#### **Deficiency 2 – Trash Chute: Inside**

<b>Deficiency</b>	Chute is clogged.
<b>Deficiency Criteria</b>	Trash is overflowing or backed up inside the chute.
<b>Health and Safety Determination</b>	Moderate
<b>Correction Timeframe</b>	30 days
<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If trash is overflowing or backed up inside the chute, then there may be an increased risk of infestation, which may expose the resident to potential health risks (e.g., disease).</p> <p>If trash is overflowing or backed up inside the chute, then the resident’s ability to dispose of garbage in a sanitary manner may be impacted.</p> <p>If trash is overflowing or backed up inside the chute, then the resident may be unable to use a feature that is expected to be provided and maintained as part of their rent.</p> <p>If trash is overflowing or backed up inside the chute, then the resident would likely report it because there is a barrier to usability, and the presence of this deficiency may indicate complaint-based work orders are not being addressed.</p> <p>If trash is overflowing or backed up inside the chute, then this should be identified during regular maintenance activities and the presence of this deficiency may indicate self-generated work orders are not being addressed.</p>

**TABLE 58—TRIP HAZARD STANDARD**

#### **Definition and Location**

<b>Definition</b>	Hazard caused by an abrupt change in vertical elevation or horizontal separation on any walking surface.
<b>Location</b>	Unit: Throughout the Unit.  Inside: Throughout the Inside.  Outside: Throughout the Outside.
<b>Deficiency 1 – Trip Hazard: Unit</b>	
<b>Deficiency</b>	Trip hazard on walking surface.
<b>Deficiency Criteria</b>	There is an abrupt change in vertical elevation or horizontal separation on any walking surface along the normal path of travel, consisting of the following criteria: <ul style="list-style-type: none"> <li>- An unintended ¼-inch or greater vertical difference OR</li> <li>- An unintended 2-inch or greater horizontal separation that is perpendicular to the path of travel.</li> </ul>
<b>Health and Safety Determination</b>	Moderate
<b>Correction Timeframe</b>	30 days
<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If there is a trip hazard on a walking surface, then there may be an increased safety risk to the resident due to falls.</p> <p>A resident is likely to notice if there is a trip hazard on a walking surface and to recognize it is important enough to report it to property management because it may present safety hazards. Property management should be expected to prioritize a work order to remedy this deficiency because it may result in safety hazards.</p>
<b>Deficiency 1 – Trip Hazard: Inside</b>	
<b>Deficiency</b>	Trip hazard on walking surface.
<b>Deficiency Criteria</b>	There is an abrupt change in vertical elevation or horizontal separation on any walking surface along the normal path of travel, consisting of the following criteria: <ul style="list-style-type: none"> <li>- An unintended ¼-inch or greater vertical difference OR</li> <li>- An unintended 2-inch or greater horizontal separation that is perpendicular to the path of travel.</li> </ul>

<b>Health and Safety Determination</b>	Moderate
<b>Correction Timeframe</b>	30 days
<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If there is a trip hazard on a walking surface, then there may be an increased safety risk to the resident due to falls.</p> <p>Property management would be expected to ensure that staff understand how to identify if there is a trip hazard on a walking surface. Management practices would be expected to assure prompt creation and prioritization of a work order to remedy this defect, because it may result in safety hazards.</p>
<b>Deficiency 1 – Trip Hazard: Outside</b>	
<b>Deficiency</b>	Trip hazard on walking surface.
<b>Deficiency Criteria</b>	<p>There is an abrupt change in vertical elevation or horizontal separation on any walking surface along the normal path of travel, consisting of the following criteria:</p> <ul style="list-style-type: none"> <li>- An unintended ¾-inch or greater vertical difference OR</li> <li>- An unintended 2-inch or greater horizontal separation that is perpendicular to the path of travel.</li> </ul>
<b>Health and Safety Determination</b>	Moderate
<b>Correction Timeframe</b>	30 days
<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If there is a trip hazard on a walking surface, then there may be an increased safety risk to the resident due to falls.</p> <p>Property management would be expected to ensure that staff understand how to identify if there is a trip hazard on a walking surface. Management practices would be expected to assure prompt creation and prioritization of a work order to remedy this defect, because it may result in safety hazards.</p>

**TABLE 59—VENTILATION STANDARD**

<b>Definition and Location</b>	
<b>Definition</b>	Means of supplying air to or removing air from a space.
<b>Location</b>	Unit: Primary kitchen, primary food preparation area, bathroom Inside: Kitchen, food preparation area, bathroom
<b>Deficiency 1 – Ventilation: Unit</b>	
<b>Deficiency</b>	Exhaust system does not respond to the control switch.
<b>Deficiency Criteria</b>	Exhaust system does not respond to the control switch.
<b>Health and Safety Determination</b>	Moderate
<b>Correction Timeframe</b>	30 days
<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If the exhaust system does not respond to the control switch, then it may be unable to control indoor air quality, which may trigger respiratory issues. If the exhaust system does not respond to the control switch, then the resident may be unable to use a feature that is expected to be provided and maintained as part of their rent.</p> <p>A resident is likely to notice if the exhaust system does not respond to the control switch and to recognize it is important enough to report it to property management because it may present health hazards or usability barriers. Property management should be expected to prioritize a work order to remedy this deficiency because it may result in health hazards or usability barriers.</p>
<b>Deficiency 1 –Ventilation: Inside</b>	
<b>Deficiency</b>	Exhaust system does not respond to the control switch.
<b>Deficiency Criteria</b>	Exhaust system does not respond to the control switch.
<b>Health and Safety Determination</b>	Moderate
<b>Correction Timeframe</b>	30 days
<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail

<b>Rationale</b>	<p>If the exhaust system does not respond to the control switch, then it may be unable to control indoor air quality, which may trigger respiratory issues.</p> <p>If the exhaust system does not respond to the control switch, then the resident may be unable to use a feature that is expected to be provided and maintained as part of their rent.</p> <p>Property management would be expected to ensure that staff members understand how to identify if the exhaust system does not respond to the control switch. Management practices would be expected to assure prompt creation and prioritization of a work order to remedy this deficiency because it may lead to health hazards and usability barriers.</p>
<b>Deficiency 2 –Ventilation: Unit</b>	
<b>Deficiency</b>	Exhaust system has restricted airflow.
<b>Deficiency Criteria</b>	Exhaust system is blocked such that airflow may be restricted.
<b>Health and Safety Determination</b>	Moderate
<b>Correction Timeframe</b>	30 days
<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If the exhaust system is blocked such that airflow may be restricted, then it may be unable to control indoor air quality, which may trigger respiratory issues.</p> <p>If the exhaust system is blocked such that airflow may be restricted, then the resident may be unable to use a feature that is expected to be provided and maintained as part of their rent.</p> <p>A resident is likely to notice if the exhaust system is blocked such that airflow may be restricted and to recognize it is important enough to report it to property management because it may present health hazards or usability barriers. Property management should be expected to prioritize a work order to remedy this defect because it may result in health hazards or usability barriers.</p>

<b>Deficiency 2 –Ventilation: Inside</b>	
<b>Deficiency</b>	Exhaust system has restricted airflow.
<b>Deficiency Criteria</b>	Exhaust system is blocked such that airflow may be restricted.

<b>Health and Safety Determination</b>	Moderate
<b>Correction Timeframe</b>	30 days
<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If the exhaust system is blocked such that airflow may be restricted, then it may be unable to control indoor air quality, which may trigger respiratory issues.</p> <p>If the exhaust system is blocked such that airflow may be restricted, then the resident may be unable to use a feature that is expected to be provided and maintained as part of their rent.</p> <p>Property management would be expected to ensure that staff members understand how to identify if the exhaust system is blocked such that airflow may be restricted. Management practices would be expected to assure prompt creation and prioritization of a work order to remedy this deficiency because it may lead to health hazards and usability barriers.</p>

### Deficiency 3 –Ventilation: Unit

<b>Deficiency</b>	Exhaust system component is damaged or missing.
<b>Deficiency Criteria</b>	<p>Exhaust system component is damaged (i.e., visibly defective; impacts functionality).</p> <p>OR</p> <p>Exhaust system component is missing (i.e., evidence of prior installation, but now not present or is incomplete).</p>
<b>Health and Safety Determination</b>	Moderate
<b>Correction Timeframe</b>	30 days
<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If an exhaust system component is damaged or missing, then it may be unable to control indoor air quality, which may trigger respiratory issues. If an exhaust system component is damaged or missing, then the resident may be unable to use a feature that is expected to be provided and maintained as part of their rent.</p>

A resident is likely to notice if an exhaust system component is damaged or missing and to recognize it is important enough to report it to property management because it may present health hazards or usability barriers. Property management should be expected to prioritize a work order to remedy this deficiency because it may result in health hazards or usability barriers.

### Deficiency 3 – Ventilation: Inside

<b>Deficiency</b>	Exhaust system component is damaged or missing.
<b>Deficiency Criteria</b>	Exhaust system component is damaged (i.e., visibly defective; impacts functionality).  OR  Exhaust system component is missing (i.e., evidence of prior installation, but now not present or is incomplete).
<b>Health and Safety Determination</b>	Moderate
<b>Correction Timeframe</b>	30 days
<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If an exhaust system component is damaged or missing, then it may be unable to control indoor air quality, which may trigger respiratory issues.</p> <p>If an exhaust system component is damaged or missing, then the resident may be unable to use a feature that is expected to be provided and maintained as part of their rent.</p> <p>Property management would be expected to ensure that staff understand how to identify an exhaust system component that is damaged or missing. Management practices would be expected to assure prompt creation and prioritization of a work order to remedy this defect, because it may result in health hazards or usability barriers.</p>

### Deficiency 4 – Ventilation: Unit

<b>Deficiency</b>	Bathroom does not have proper ventilation or dehumidification.
<b>Deficiency Criteria</b>	Neither an exhaust fan, window, nor adequate means of ventilation or dehumidification is present and operable.
<b>Health and Safety Determination</b>	Moderate

<b>Correction Timeframe</b>	30 days
<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If an operable exhaust fan, window, or adequate means of ventilation or dehumidification is not present, then this may increase interior moisture levels, which provides an environment favorable for mold growth and may trigger respiratory issues.</p> <p>A resident is likely to notice an exhaust fan, window, or adequate means of ventilation or dehumidification that is inoperable or not present and to recognize it is important enough to report it to property management because it may increase moisture levels within the unit, resulting in potential health hazards. Property management should be expected to prioritize a work order for an exhaust fan, window, or adequate means of ventilation or dehumidification that is inoperable or not present because it may result in health hazards.</p>

#### **Deficiency 4 – Ventilation: Inside**

<b>Deficiency</b>	Bathroom does not have proper ventilation or dehumidification.
<b>Deficiency Criteria</b>	Neither an exhaust fan, window, nor adequate means of ventilation or dehumidification is present and operable.
<b>Health and Safety Determination</b>	Moderate
<b>Correction Timeframe</b>	30 days
<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If an operable exhaust fan, window, or adequate means of ventilation or dehumidification is not present, then this may increase interior moisture levels, which provides an environment favorable for mold growth and may trigger respiratory issues.</p> <p>Property management would be expected to ensure that staff members understand how to identify an exhaust fan, window, or adequate means of ventilation or dehumidification that is inoperable or not present within the inside area. Management practices would be expected to assure prompt creation and prioritization of a work order to remedy or repair the ventilation or dehumidification source, because it may increase moisture levels, resulting in potential health hazards.</p>

TABLE 60—WALL – EXTERIOR STANDARD

Definition and Location	
<b>Definition</b>	<p><u>Exterior wall</u>: The finished or unfinished surface that provides a vertical separation between the interior and exterior of the building and may provide security and privacy, sound proofing, and weather resistance.</p> <p><u>Wall covering</u>: Material such as siding or stucco used as a covering for exterior walls.</p> <p>Note: <i>Unfinished</i> within this standard refers to concrete masonry unit or poured concrete walls.</p>
<b>Location</b>	Outside: Exterior of the unit.
Deficiency 1 – Wall – Exterior: Outside	
<b>Deficiency</b>	Exterior wall covering has missing sections of at least 1 square foot per wall.
<b>Deficiency Criteria</b>	Cumulatively, 1 square foot or more of an exterior wall covering is missing (i.e., evidence of prior installation, but now not present or is incomplete).
<b>Health and Safety Determination</b>	Moderate
<b>Correction Timeframe</b>	30 days
<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If 1 square foot or more of an exterior wall cover is missing, and the building envelope has been compromised, then this may increase interior moisture levels, which provides an environment favorable for mold growth and may trigger respiratory issues.</p> <p>Property management would be expected to ensure that staff members understand how to identify if an exterior wall cover is missing. Management practices would be expected to assure prompt creation and prioritization of a work order to remedy this deficiency because it may result in health hazards.</p> <p>If 1 square foot or more of an exterior wall cover is missing, and it is visible to a visitor, then the property may suffer reputational harm.</p>
Deficiency 2 – Wall – Exterior: Outside	
<b>Deficiency</b>	Exterior wall has peeling paint of 10 square feet or more.

<b>Deficiency Criteria</b>	Cumulatively, there is 10 square feet or more of peeling paint on an exterior wall built after 1978.
<b>Health and Safety Determination</b>	Moderate
<b>Correction Timeframe</b>	30 days
<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If there is 10 square feet or more of peeling paint on an exterior wall, and the building envelope has been compromised, then this may increase interior moisture levels, which provides an environment favorable for mold growth and may trigger respiratory issues.</p> <p>Property management would be expected to ensure that staff members understand how to identify peeling paint on an exterior wall. Management practices would be expected to assure prompt creation and prioritization of a work order to remedy this deficiency because it may result in health hazards.</p> <p>If there is 10 square feet or more of peeling paint on an exterior wall, and it is visible to a visitor, then the property may suffer reputational harm.</p>

### **Deficiency 3 – Wall – Exterior: Outside**

<b>Deficiency</b>	Exterior wall component(s) is not functionally adequate.
<b>Deficiency Criteria</b>	Exterior wall component(s) is not functionally adequate (i.e., impacts the integrity of the wall assembly or building envelope, or does not allow exterior wall to separate the accommodation inside from that outside).
<b>Health and Safety Determination</b>	Moderate
<b>Correction Timeframe</b>	30 days
<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail

<b>Rationale</b>	<p>If an exterior wall component(s) is not functionally adequate, then the resident may be exposed to health hazards.</p> <p>If an exterior wall component(s) is not functionally adequate, then the resident may be exposed to safety hazards.</p> <p>Property management would be expected to ensure that staff members understand how to identify if an exterior wall component(s) is not functionally adequate. Management practices would be expected to assure prompt creation and prioritization of a work order to remedy this deficiency because it may result in health and safety hazards.</p>
------------------	---

**TABLE 61—WALL – INTERIOR STANDARD**

<b>Definition and Location</b>	
<b>Definition</b>	A vertical surface that may define an area, and provide security, shelter, or sound proofing.
<b>Location</b>	<p>Unit: Dining room, living room, kitchen, bathroom, bedroom, closet, hallway, other interior space.</p> <p>Inside: Dining room, living room, kitchen, bathroom, closet, hallway, other interior space.</p>
<b>Deficiency 1 – Wall – Interior: Unit</b>	
<b>Deficiency</b>	Interior wall has a loose or detached surface covering.
<b>Deficiency Criteria</b>	Interior wall has a loose or detached surface covering.
<b>Health and Safety Determination</b>	Moderate
<b>Correction Timeframe</b>	30 days
<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If the interior wall has a loose or detached surface covering, then the resident could be injured by falling debris.</p> <p>If the interior wall has a loose or detached surface covering, then the resident may be unable to fully rely on or use a feature that is expected to be provided and maintained as part of their rent.</p> <p>A resident is likely to notice if the interior wall has a loose or detached surface covering and to recognize it is important enough to report it to property management because it may present safety hazards. Property</p>

management should be expected to prioritize a work order to remedy this deficiency because it may result in safety hazards.

#### **Deficiency 1 – Wall – Interior: Inside**

<b>Deficiency</b>	Interior wall has a loose or detached surface covering.
<b>Deficiency Criteria</b>	Interior wall has a loose or detached surface covering.
<b>Health and Safety Determination</b>	Moderate
<b>Correction Timeframe</b>	30 days
<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If the interior wall has a loose or detached surface covering, then the resident could be injured by falling debris.</p> <p>If the interior wall has a loose or detached surface covering, then the resident may be unable to fully rely on or use a feature that is expected to be provided and maintained as part of their rent.</p> <p>Property management would be expected to ensure that staff members understand how to identify if the interior wall has a loose or detached surface covering. Management practices would be expected to assure prompt creation and prioritization of a work order to remedy this deficiency because it may result in safety hazards.</p>

#### **Deficiency 2 – Wall – Interior: Unit**

<b>Deficiency</b>	Interior wall component(s) is not functionally adequate.
<b>Deficiency Criteria</b>	Interior wall component(s) is not functionally adequate (i.e., impacts the integrity of the interior wall or does not allow interior wall to provide vertical separation between rooms or spaces).
<b>Health and Safety Determination</b>	Moderate
<b>Correction Timeframe</b>	30 days
<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	If an interior wall component(s) is not functionally adequate, then the resident may be exposed to health hazards.

If an interior wall component(s) is not functionally adequate, then the resident may be exposed to safety hazards.

A resident is likely to notice if an interior wall component(s) is not functionally adequate and to recognize it is important enough to report it to property management because it may present health and safety hazards. Property management should be expected to prioritize a work order to remedy this deficiency because it may result in health and safety hazards.

#### **Deficiency 2 – Wall – Interior: Inside**

<b>Deficiency</b>	Interior wall component(s) is not functionally adequate.
<b>Deficiency Criteria</b>	Interior wall component(s) is not functionally adequate (i.e., impacts the integrity of the interior wall or does not allow interior wall to provide vertical separation between rooms or spaces).
<b>Health and Safety Determination</b>	Moderate
<b>Correction Timeframe</b>	30 days
<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If an interior wall component(s) is not functionally adequate, then the resident may be exposed to health hazards.</p> <p>If an interior wall component(s) is not functionally adequate, then the resident may be exposed to safety hazards.</p> <p>Property management would be expected to ensure that staff members understand how to identify if an interior wall component(s) is not functionally adequate. Management practices would be expected to assure prompt creation and prioritization of a work order to remedy this deficiency because it may result in health and safety hazards.</p>

#### **Deficiency 3 – Wall – Interior: Unit**

<b>Deficiency</b>	Interior wall has a hole that is greater than 2 inches in diameter or there is an accumulation of holes that are cumulatively greater than 6 inches by 6 inches.
<b>Deficiency Criteria</b>	<p>A hole is greater than 2 inches in diameter.</p> <p>OR</p> <p>An accumulation of holes in any one wall that are cumulatively greater than 6 inches by 6 inches.</p>

<b>Health and Safety Determination</b>	Moderate
<b>Correction Timeframe</b>	30 days
<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If there is a hole that is greater than 2 inches in diameter or an accumulation of holes that are cumulatively greater than 6 inches by 6 inches, then the resident may be exposed to items behind the wall (e.g., insulation, lead dust, asbestos, wires) that may harm their health.</p> <p>If there is a hole that is greater than 2 inches in diameter or an accumulation of holes that are cumulatively greater than 6 inches by 6 inches, then the resident may be unable to fully use a feature (i.e., a wall without a hole) that is expected to be provided and maintained as part of their rent.</p> <p>If there is a hole that is greater than 2 inches in diameter or an accumulation of holes that are cumulatively greater than 6 inches by 6 inches, then it should be identified during routine maintenance activities and its presence may indicate that self-generated work orders are not being addressed.</p>

### Deficiency 3 – Wall – Interior: Inside

<b>Deficiency</b>	Interior wall has a hole that is greater than 2 inches in diameter or there is an accumulation of holes that are cumulatively greater than 6 inches by 6 inches.
<b>Deficiency Criteria</b>	<p>A hole is greater than 2 inches in diameter.</p> <p>OR</p> <p>An accumulation of holes in any one wall that are cumulatively greater than 6 inches by 6 inches.</p>
<b>Health and Safety Determination</b>	Moderate
<b>Correction Timeframe</b>	30 days
<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail

<b>Rationale</b>	<p>If there is a hole that is greater than 2 inches in diameter or an accumulation of holes that are cumulatively greater than 6 inches by 6 inches, then the resident may be exposed to items behind the wall (e.g., insulation, lead dust, asbestos, wires) that may harm their health.</p> <p>If there is a hole that is greater than 2 inches in diameter or an accumulation of holes that are cumulatively greater than 6 inches by 6 inches, then the resident may be unable to fully use a feature (i.e., a wall without a hole) that is expected to be provided and maintained as part of their rent.</p> <p>If there is a hole that is greater than 2 inches in diameter or an accumulation of holes that are cumulatively greater than 6 inches by 6 inches, then it should be identified during routine maintenance activities and its presence may indicate that self-generated work orders are not being addressed.</p>
------------------	--

**TABLE 62—WATER HEATER STANDARD**

<b>Definition and Location</b>	
<b>Definition</b>	A device designed to generate and store hot water for domestic use.
<b>Location</b>	<p>Unit: Mechanical rooms, mechanical closets, basements, under stairs, kitchens.</p> <p>Inside: Mechanical rooms, mechanical closets, basements, under stairs, kitchens.</p> <p>Outside: Back or side yard.</p>
<b>Deficiency 1 – Water Heater: Unit</b>	
<b>Deficiency</b>	Temperature pressure relief (TPR) valve has an active leak or is obstructed or relief valve discharge piping is damaged, capped, has an upward slope, or is constructed of unsuitable material.
<b>Deficiency Criteria</b>	<p>TPR valve has an active leak.</p> <p>OR</p> <p>TPR valve is obstructed such that the TPR valve is unable to be fully actuated.</p> <p>OR</p> <p>Relief valve discharge piping is damaged (i.e., visibly defective; impacts functionality), capped, has an upward slope, or is constructed of unsuitable material.</p>

<b>Health and Safety Determination</b>	Severe
<b>Correction Timeframe</b>	24 hours
<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail

<b>Rationale</b>	<p>If the TPR valve has an active leak, is obstructed such that it is unable to be fully actuated, or the relief valve discharge piping is damaged, capped, has an upward slope, or is constructed of unsuitable material, and the water within the water heater reaches temperatures above its boiling point, then there may be an increased safety risk to the resident due to a rupturing water heater, which may result in injury.</p> <p>Property management would be expected to ensure that staff members understand how to identify a TPR valve that has an active leak, is obstructed such that it is unable to be fully actuated, or relief valve discharge piping that is damaged, capped, has an upward slope, or is constructed of unsuitable material. Management practices would be expected to assure prompt creation and prioritization of a work order to remedy this deficiency because it may result in safety hazards.</p> <p>Water heaters should be checked during periodic property inspections, and according to industry best practices, should be included in a preventative maintenance plan. If the TPR valve has an active leak, is obstructed such that it is unable to be fully actuated, or the relief valve discharge piping is damaged, capped, has an upward slope, or is constructed of unsuitable material, then it may indicate preventative maintenance activities could be improved.</p>
------------------	---

#### **Deficiency 1 – Water Heater: Inside**

<b>Deficiency</b>	Temperature pressure relief (TPR) valve has an active leak or is obstructed or relief valve discharge piping is damaged, capped, has an upward slope, or is constructed of unsuitable material.
<b>Deficiency Criteria</b>	<p>TPR valve has an active leak.</p> <p>OR</p> <p>TPR valve is obstructed such that the TPR valve is unable to be fully actuated.</p> <p>OR</p>

	Relief valve discharge piping is damaged (i.e., visibly defective; impacts functionality), capped, has an upward slope, or is constructed of unsuitable material.
<b>Health and Safety Determination</b>	Severe
<b>Correction Timeframe</b>	24 hours
<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If the TPR valve has an active leak, is obstructed such that it is unable to be fully actuated, or the relief valve discharge piping is damaged, capped, has an upward slope, or is constructed of unsuitable material, and the water within the water heater reaches temperatures above its boiling point, then there may be an increased safety risk to the resident due to a rupturing water heater, which may result in injury.</p> <p>Property management would be expected to ensure that staff members understand how to identify a TPR valve that has an active leak, is obstructed such that it is unable to be fully actuated, or relief valve discharge piping that is damaged, capped, has an upward slope, or is constructed of unsuitable material. Management practices would be expected to assure prompt creation and prioritization of a work order to remedy this deficiency because it may result in safety hazards.</p> <p>Water heaters should be checked during periodic property inspections, and according to industry best practices, should be included in a preventative maintenance plan. If the TPR valve has an active leak, is obstructed such that it is unable to be fully actuated, or the relief valve discharge piping is damaged, capped, has an upward slope, or is constructed of unsuitable material, then it may indicate preventative maintenance activities could be improved.</p>

#### Deficiency 1 – Water Heater: Outside

<b>Deficiency</b>	Temperature pressure relief (TPR) valve has an active leak or is obstructed or relief valve discharge piping is damaged, capped, has an upward slope, or is constructed of unsuitable material.
<b>Deficiency Criteria</b>	<p>TPR valve has an active leak.</p> <p>OR</p> <p>TPR valve is obstructed such that the TPR valve is unable to be fully actuated.</p> <p>OR</p>

	Relief valve discharge piping is damaged (i.e., visibly defective; impacts functionality), capped, has an upward slope, or is constructed of unsuitable material.
<b>Health and Safety Determination</b>	Severe
<b>Correction Timeframe</b>	24 hours
<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If the TPR valve has an active leak, is obstructed such that it is unable to be fully actuated, or the relief valve discharge piping is damaged, capped, has an upward slope, or is constructed of unsuitable material, and the water within the water heater reaches temperatures above its boiling point, then there may be an increased safety risk to the resident due to a rupturing water heater, which may result in injury.</p> <p>Property management would be expected to ensure that staff members understand how to identify a TPR valve that has an active leak, is obstructed such that it is unable to be fully actuated, or relief valve discharge piping that is damaged, capped, has an upward slope, or is constructed of unsuitable material. Management practices would be expected to assure prompt creation and prioritization of a work order to remedy this deficiency because it may result in safety hazards.</p> <p>Water heaters should be checked during periodic property inspections, and according to industry best practices, should be included in a preventative maintenance plan. If the TPR valve has an active leak, is obstructed such that it is unable to be fully actuated, or the relief valve discharge piping is damaged, capped, has an upward slope, or is constructed of unsuitable material, then it may indicate preventative maintenance activities could be improved.</p>

#### Deficiency 2 – Water Heater: Unit

<b>Deficiency</b>	No hot water.
<b>Deficiency Criteria</b>	Hot water does not dispense after the handle is engaged.
<b>Health and Safety Determination</b>	Severe
<b>Correction Timeframe</b>	24 hours
<b>HCV Correction Timeframe</b>	30 days

<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If hot water does not dispense after the handle is engaged, then the resident cannot maintain personal hygiene, which may result in sickness.</p> <p>If hot water does not dispense after the handle is engaged, then the resident is unable to maintain household hygiene, including washing clothes and dishes, cleaning, etc.</p> <p>If hot water does not dispense after the handle is engaged, then the resident is unable to fully use a fixture that is expected to be provided and maintained as part of their rent.</p> <p>A resident is likely to notice if hot water does not dispense after the handle is engaged and to recognize it is important enough to report to property management because it may present health and sanitary hazards. Property management should be expected to prioritize a work order to remedy this deficiency because it may result in health and sanitary hazards.</p>
<b>Deficiency 2 – Water Heater: Inside</b>	
<b>Deficiency</b>	No hot water.
<b>Deficiency Criteria</b>	Hot water does not dispense after the handle is engaged.
<b>Health and Safety Determination</b>	Low
<b>Correction Timeframe</b>	60 Days
<b>HCV Correction Timeframe</b>	N/A
<b>HCV Pass/Fail</b>	Pass
<b>Rationale</b>	<p>If hot water does not dispense after the handle is engaged, then the resident may not be able to fully use a fixture.</p> <p>Property management would be expected to ensure that staff members understand how to identify if hot water does not dispense after the handle is engaged. Management practices would be expected to assure prompt creation and prioritization of a work order to remedy this deficiency because it may result in usability barriers.</p>
<b>Deficiency 3 – Water Heater: Unit</b>	
<b>Deficiency</b>	The relief valve discharge piping is missing or terminates greater than 6 inches or less than 2 inches from waste receptor flood-level.
<b>Deficiency Criteria</b>	<p>The relief valve discharge piping is missing (i.e., evidence of prior installation, but is now not present or is incomplete).</p> <p>OR</p>

	The relief valve discharge piping terminates greater than 6 inches or less than 2 inches from waste receptor flood-level.
<b>Health and Safety Determination</b>	Moderate
<b>Correction Timeframe</b>	30 days
<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If the relief valve discharge piping is missing or terminates greater than 6 inches or less than 2 inches from waste receptor flood-level, there may be an increased safety risk to the resident of thermal burns, which may result in injury.</p> <p>Property management would be expected to ensure that staff members understand how to identify if the relief valve discharge piping is missing or terminates greater than 6 inches or less than 2 inches from waste receptor flood-level. Management practices would be expected to assure prompt creation and prioritization of a work order to remedy this deficiency as it may result in safety hazards.</p>

### Deficiency 3 – Water Heater: Inside

<b>Deficiency</b>	The relief valve discharge piping is missing or terminates greater than 6 inches or less than 2 inches from waste receptor flood-level.
<b>Deficiency Criteria</b>	<p>The relief valve discharge piping is missing (i.e., evidence of prior installation, but is now not present or is incomplete).</p> <p>OR</p> <p>The relief valve discharge piping terminates greater than 6 inches or less than 2 inches from waste receptor flood-level.</p>
<b>Health and Safety Determination</b>	Moderate
<b>Correction Timeframe</b>	30 days
<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail

<b>Rationale</b>	<p>If the relief valve discharge piping is missing or terminates greater than 6 inches or less than 2 inches from waste receptor flood-level, there may be an increased safety risk to the resident of thermal burns, which may result in injury.</p> <p>Property management would be expected to ensure that staff members understand how to identify if the relief valve discharge piping is missing or terminates greater than 6 inches or less than 2 inches from waste receptor flood-level. Management practices would be expected to assure prompt creation and prioritization of a work order to remedy this deficiency as it may result in safety hazards.</p>
<b>Deficiency 3 – Water Heater: Outside</b>	
<b>Deficiency</b>	The relief valve discharge piping is missing or terminates greater than 6 inches or less than 2 inches from waste receptor flood-level.
<b>Deficiency Criteria</b>	<p>The relief valve discharge piping is missing (i.e., evidence of prior installation, but is now not present or is incomplete).</p> <p>OR</p> <p>The relief valve discharge piping terminates greater than 6 inches or less than 2 inches from waste receptor flood-level.</p>
<b>Health and Safety Determination</b>	Moderate
<b>Correction Timeframe</b>	30 days
<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If the relief valve discharge piping is missing or terminates greater than 6 inches or less than 2 inches from waste receptor flood-level, there may be an increased safety risk to the resident of thermal burns, which may result in injury.</p> <p>Property management would be expected to ensure that staff members understand how to identify if the relief valve discharge piping is missing or terminates greater than 6 inches or less than 2 inches from waste receptor flood-level. Management practices would be expected to assure prompt creation and prioritization of a work order to remedy this deficiency as it may result in safety hazards.</p>
<b>Deficiency 4 – Water Heater: Unit</b>	
<b>Deficiency</b>	Chimney or flue piping is blocked, misaligned, or missing.
<b>Deficiency Criteria</b>	Chimney or flue piping is blocked, misaligned, or missing (i.e., evidence of prior installation, but now not present or is incomplete).

<b>Health and Safety Determination</b>	Life-Threatening
<b>Correction Timeframe</b>	24 hours
<b>HCV Correction Timeframe</b>	24 hours
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If the chimney or flue piping is blocked, misaligned, or missing, then the resident may be exposed to carbon monoxide leaks.</p> <p>A resident is likely to notice if the chimney or flue piping is blocked, misaligned, or missing and to recognize it is important enough to report to property management because it may present safety hazards. Property management should be expected to prioritize a work order to remedy this deficiency because it may result in safety hazards.</p>

#### **Deficiency 4 – Water Heater: Inside**

<b>Deficiency</b>	Chimney or flue piping is blocked, misaligned, or missing.
<b>Deficiency Criteria</b>	Chimney or flue piping is blocked, misaligned, or missing (i.e., evidence of prior installation, but now not present or is incomplete).
<b>Health and Safety Determination</b>	Life-Threatening
<b>Correction Timeframe</b>	24 hours
<b>HCV Correction Timeframe</b>	24 hours
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If the chimney or flue piping is blocked, misaligned, or missing, then the resident may be exposed to carbon monoxide leaks.</p> <p>Property management would be expected to ensure that staff members understand how to identify if chimney or flue piping is blocked, misaligned, or missing. Management practices would be expected to assure prompt creation and prioritization of a work order to remedy this as it may result in safety hazards.</p>

#### **Deficiency 4 – Water Heater: Outside**

<b>Deficiency</b>	Chimney or flue piping is blocked, misaligned, or missing.
<b>Deficiency Criteria</b>	Chimney or flue piping is blocked, misaligned, or missing (i.e., evidence of prior installation, but now not present or is incomplete).

<b>Health and Safety Determination</b>	Life-Threatening
<b>Correction Timeframe</b>	24 hours
<b>HCV Correction Timeframe</b>	24 hours
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If the chimney or flue piping is blocked, misaligned, or missing, then the resident may be exposed to carbon monoxide leaks.</p> <p>Property management would be expected to ensure that staff members understand how to identify if chimney or flue piping is blocked, misaligned, or missing. Management practices would be expected to assure prompt creation and prioritization of a work order to remedy this as it may result in safety hazards.</p>
<b>Deficiency 5 – Water Heater: Unit</b>	
<b>Deficiency</b>	Gas shutoff valve is damaged, missing, or not installed.
<b>Deficiency Criteria</b>	<p>Gas shutoff valve is damaged (i.e., visibly defective; impacts functionality).</p> <p>OR</p> <p>Gas shutoff valve is missing (i.e., evidence of prior installation, but is now not present or is incomplete).</p> <p>OR</p> <p>Gas shutoff valve is not installed (i.e., never installed, but should have been).</p>
<b>Health and Safety Determination</b>	Life-Threatening
<b>Correction Timeframe</b>	24 hours
<b>HCV Correction Timeframe</b>	24 hours
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If the gas shutoff valve is damaged, missing, or not installed and there is a need to shut off the gas, then there may be an increased safety risk to the resident of fire, which may result in injury or death.</p> <p>Property management would be expected to ensure that staff members understand how to identify a gas shutoff valve that is damaged, missing, or not installed. Management practices would be expected to assure prompt</p>

creation and prioritization of a work order to remedy this deficiency because it may result in safety hazards.

#### Deficiency 5 – Water Heater: Inside

<b>Deficiency</b>	Gas shutoff valve is damaged, missing, or not installed.
<b>Deficiency Criteria</b>	Gas shutoff valve is damaged (i.e., visibly defective; impacts functionality). OR Gas shutoff valve is missing (i.e., evidence of prior installation, but is now not present or is incomplete). OR Gas shutoff valve is not installed (i.e., never installed, but should have been).
<b>Health and Safety Determination</b>	Life-Threatening
<b>Correction Timeframe</b>	24 hours
<b>HCV Correction Timeframe</b>	24 hours
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	If the gas shutoff valve is damaged, missing, or not installed and there is a need to shut off the gas, then there may be an increased safety risk to the resident of fire, which may result in injury or death.  Property management would be expected to ensure that staff members understand how to identify a gas shutoff valve that is damaged, missing, or not installed. Management practices would be expected to assure prompt creation and prioritization of a work order to remedy this deficiency because it may result in safety hazards.

#### Deficiency 5 – Water Heater: Outside

<b>Deficiency</b>	Gas shutoff valve is damaged, missing, or not installed.
<b>Deficiency Criteria</b>	Gas shutoff valve is damaged (i.e., visibly defective; impacts functionality). OR Gas shutoff valve is missing (i.e., evidence of prior installation, but is now not present or is incomplete). OR Gas shutoff valve is not installed (i.e., never installed, but should have been).

<b>Health and Safety Determination</b>	Life-Threatening
<b>Correction Timeframe</b>	24 hours
<b>HCV Correction Timeframe</b>	24 hours
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If the gas shutoff valve is damaged, missing, or not installed and there is a need to shut off the gas, then there may be an increased safety risk to the resident of fire, which may result in injury or death.</p> <p>Property management would be expected to ensure that staff members understand how to identify a gas shutoff valve that is damaged, missing, or not installed. Management practices would be expected to assure prompt creation and prioritization of a work order to remedy this deficiency because it may result in safety hazards.</p>

**TABLE 63—WINDOW STANDARD**

<b>Definition and Location</b>	
<b>Definition</b>	Opening in a wall or roof of a building that is fitted with glass or other material.
<b>Location</b>	<p>Unit: Throughout the Unit.</p> <p>Inside: Throughout the Inside.</p> <p>Outside: Throughout the Outside.</p>
<b>Deficiency 1 – Window: Unit</b>	
<b>Deficiency</b>	Window will not open or stay open.
<b>Deficiency Criteria</b>	<p>Window will not open.</p> <p>OR</p> <p>Once opened, window will not stay open without the use of a tool or item.</p>
<b>Health and Safety Determination</b>	Moderate
<b>Correction Timeframe</b>	30 days
<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail

<b>Rationale</b>	<p>If a window does not open or stay open, then it may limit ventilation of interior spaces, which may affect indoor air quality and trigger respiratory issues.</p> <p>If a window will not open or stay open, then the resident may not be able to use a feature that is expected to be provided and maintained as part of their rent.</p> <p>A resident is likely to notice a window a that will not open or stay open and to recognize it is important enough to report it to property management because it may present health hazards or usability barriers. Property management should be expected to prioritize a work order to remedy this deficiency because it may result in health hazards.</p>
<b>Deficiency 1 – Window: Inside</b>	
<b>Deficiency</b>	Window will not open or stay open.
<b>Deficiency Criteria</b>	<p>Window will not open.</p> <p>OR</p> <p>Once opened, window will not stay open without the use of a tool or item.</p>
<b>Health and Safety Determination</b>	Low
<b>Correction Timeframe</b>	60 Days
<b>HCV Correction Timeframe</b>	N/A
<b>HCV Pass/Fail</b>	Pass
<b>Rationale</b>	<p>If a window will not open or stay open, then the resident may not be able to use a feature that is expected to be provided and maintained as part of their rent.</p> <p>Property management would be expected to ensure that staff members understand how to identify a window that will not open or stay open. Management practices would be expected to assure prompt creation and prioritization of a work order to remedy this deficiency because it may result in usability barriers.</p>
<b>Deficiency 2 – Window: Unit</b>	
<b>Deficiency</b>	Window cannot be secured.
<b>Deficiency Criteria</b>	Window cannot be secured (i.e., access controlled) by at least 1 installed lock.

<b>Health and Safety Determination</b>	Moderate
<b>Correction Timeframe</b>	30 days
<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If the window cannot be secured, then the resident may be unable to control access to the property.</p> <p>If the window cannot be secured, then the resident may not be able to fully use a feature that is expected to be provided and maintained as part of their rent.</p> <p>A resident is likely to notice if a window cannot be secured and to recognize it is important enough to report it to property management because it may present security hazards. Property management should be expected to prioritize a work order to remedy this deficiency because it may result in security hazards.</p>

#### **Deficiency 2 – Window: Inside**

<b>Deficiency</b>	Window cannot be secured.
<b>Deficiency Criteria</b>	Window cannot be secured (i.e., access controlled) by at least 1 installed lock.
<b>Health and Safety Determination</b>	Low
<b>Correction Timeframe</b>	60 Days
<b>HCV Correction Timeframe</b>	N/A
<b>HCV Pass/Fail</b>	Pass
<b>Rationale</b>	Property management would be expected to ensure that staff members understand how to identify a window that cannot be secured by at least 1 installed lock. Management practices would be expected to assure prompt creation and prioritization of a work order to remedy this deficiency.

#### **Deficiency 3 – Window: Unit**

<b>Deficiency</b>	Window will not close.
<b>Deficiency Criteria</b>	The window will not close.

<b>Health and Safety Determination</b>	Severe
<b>Correction Timeframe</b>	24 hours
<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If the window will not close, then the resident may be exposed to environmental elements, which may result in illness.</p> <p>If the window will not close, there may be an increased safety risk to the resident of fall hazards, which may result in injury.</p> <p>If the window will not close, then the resident may be unable to control access to the property.</p> <p>If the window will not close, then resident may be unable to fully use a feature that is expected to be provided and maintained as part of their rent.</p> <p>A resident is likely to notice a window that will not close and to recognize it is important enough to report it to property management because it may present health or security hazards, or usability barriers. Property management should be expected to prioritize a work order to remedy this deficiency because it may result in health or security hazards.</p>

### Deficiency 3 – Window: Inside

<b>Deficiency</b>	Window will not close.
<b>Deficiency Criteria</b>	The window will not close.
<b>Health and Safety Determination</b>	Moderate
<b>Correction Timeframe</b>	30 days
<b>HCV Correction Timeframe</b>	30 days
<b>HCV Pass/Fail</b>	Fail
<b>Rationale</b>	<p>If the window will not close, there may be an increased safety risk to the resident of fall hazards, which may result in injury.</p> <p>If the window will not close, then the resident may be unable to control access to the property.</p> <p>If the window will not close, then resident may be unable to fully use a feature that is expected to be provided and maintained as part of their rent.</p>

Property management would be expected to ensure that staff members understand how to identify a window that will not close. Management practices would be expected to assure prompt creation and prioritization of a work order to remedy this deficiency because it may result in security hazards or usability barriers.

---

**Deficiency 4 – Window: Unit**


---

**Deficiency** Window component is damaged or missing and the window is not functionally adequate.

**Deficiency Criteria** Any portion of a visually accessible (i.e., can be reasonably accessed and observed) window component is damaged (i.e., visibly defective) and the window is not functionally adequate (i.e., cannot protect from the elements, bugs, or debris, permit illumination within the interior space, or permit visual access between spaces).

OR

Any portion of a visually accessible (i.e., can be reasonably accessed and observed) window component is missing (i.e., evidence of prior installation, but is now not present or is incomplete) and the window is not functionally adequate (i.e., cannot protect from the elements, bugs, or debris, permit illumination within the interior space, or permit visual access between spaces).

OR

A visually accessible (i.e., can be reasonably accessed and observed) window screen has a hole, tear, or cut that is 1 inch or greater.

---

**Health and Safety Determination** Moderate

---

**Correction Timeframe** 30 days

---

**HCV Correction Timeframe** 30 days

---

**HCV Pass/Fail** Fail

---

**Rationale**

If a window component is damaged or missing and the window is not functionally adequate, then the resident may be exposed to environmental elements, which may result in illness.

If a window component is damaged or missing and the window is not functionally adequate, then the resident may be unable to fully use a feature that is expected to be provided and maintained as part of their rent.

A resident is likely to notice if a window component is damaged or missing and the window is not functionally adequate, and to recognize it is important enough to report it to property management because it may

---

present health hazards or usability barriers. Property management should be expected to prioritize a work order to remedy this deficiency because it may result in health hazards.

---

**Deficiency 4 – Window: Inside**


---

<b>Deficiency</b>	Window component is damaged or missing and the window is not functionally adequate.
<b>Deficiency Criteria</b>	<p>Any portion of a visually accessible (i.e., can be reasonably accessed and observed) window component is damaged (i.e., visibly defective) and the window is not functionally adequate (i.e., cannot protect from the elements, bugs, or debris, permit illumination within the interior space, or permit visual access between spaces).</p> <p>OR</p> <p>Any portion of a visually accessible (i.e., can be reasonably accessed and observed) window component is missing (i.e., evidence of prior installation, but is now not present or is incomplete) and the window is not functionally adequate (i.e., cannot protect from the elements, bugs, or debris, permit illumination within the interior space, or permit visual access between spaces).</p> <p>OR</p> <p>A visually accessible (i.e., can be reasonably accessed and observed) window screen has a hole, tear, or cut that is 1 inch or greater.</p>

---

<b>Health and Safety Determination</b>	Moderate
--	----------

---

<b>Correction Timeframe</b>	30 days
-----------------------------	---------

---

<b>HCV Correction Timeframe</b>	30 days
---------------------------------	---------

---

<b>HCV Pass/Fail</b>	Fail
----------------------	------

---

<b>Rationale</b>	<p>If a window component is damaged or missing and the window is not functionally adequate, then the resident may be exposed to environmental elements, which may result in illness.</p> <p>If a window component is damaged or missing and the window is not functionally adequate, then the resident may be unable to fully use a feature that is expected to be provided and maintained as part of their rent.</p> <p>Property management would be expected to ensure that staff members understand how to identify a window component that is damaged or missing and the window is not functionally adequate. Management</p>
------------------	--

---

---

practices would be expected to assure prompt creation and prioritization of a work order to remedy this deficiency.

---

TABLE 64—AFFIRMATIVE HABITABILITY REQUIREMENTS

Inspectable Item	Location	Deficiency
<b>Bathtub and Shower</b>	Unit	Bathtub or shower cannot be used in private.
<b>Cabinet and Storage</b>	Unit	Food storage space is not present.
<b>Carbon Monoxide Alarm</b>	Unit	Carbon monoxide alarm is missing, not installed, or not installed in a proper location.
	Inside	Carbon monoxide alarm is missing, not installed, or not installed in a proper location.
<b>Cooking Appliance</b>	Unit	Primary cooking appliance is missing.
<b>Electrical – Ground-Fault Circuit Interrupter (GFCI) or Arc-Fault Circuit Interrupter (AFCI) – Outlet or Breaker</b>	Unit	An unprotected outlet is present within six feet of a water source.
	Inside	An unprotected outlet is present within six feet of a water source.
	Outside	An unprotected outlet is present within six feet of a water source.
<b>Food Preparation Area</b>	Unit	Food preparation area is not present.
<b>Guardrail</b>	Unit	Guardrail is missing or not installed.
	Inside	Guardrail is missing or not installed.
	Outside	Guardrail is missing or not installed.
<b>Heating, Ventilation, and Air Conditioning (HVAC)</b>	Unit	The inspection date is on or between October 1 and March 31 and the permanently installed heating source is not working or the permanently installed heating source is working and the interior temperature is below 64 degrees Fahrenheit.
	Unit	The inspection date is on or between October 1 and March 31 and the permanently installed heating source is working and the interior temperature is 64 to 67.9 degrees Fahrenheit.
	Unit	Unvented space heater that burns gas, oil, or kerosene is present.
	Inside	Unvented space heater that burns gas, oil, or kerosene is present.
	Unit	The inspection date is on or between April 1 and September 30 and a permanently installed heating source is damaged, inoperable, missing, or not installed.
	Inside	The inspection date is on or between October 1 and March 31 and the permanently installed heating source is inoperable.
	Unit	At least one (1) permanently installed light fixture is not present in the kitchen and bathroom.

	Inside	At least one (1) permanently installed light fixture is not present in the kitchen and bathroom.
<b>Minimum Electrical and Lighting</b>	Unit	At least two (2) working outlets are not present within each habitable room. OR At least one (1) working outlet and one (1) permanently installed light fixture is not present within each habitable room.
<b>Refrigerator</b>	Unit	Refrigerator is missing.
<b>Sink</b>	Unit	Cannot activate or deactivate hot and cold water.
	Unit	Sink is missing or not installed within the primary kitchen.
<b>Smoke Alarm</b>	Unit	Smoke alarm is not installed where required.
	Inside	Smoke alarm is not installed where required.
<b>Toilet</b>	Unit	Toilet cannot be used in private.

**TABLE 65—HOTMA LIFE THREATENING CONDITIONS**

As described in the notice, HUD proposes to update to the list of life-threatening conditions included on the Housing Opportunity Through Modernization Act of 2016 Life-Threatening List (“HOTMA LT”) for the HCV and PBV programs. Within the standards, the HOTMA LT deficiencies include the following descriptions:

<b>Health and Safety Determination</b>	Life-Threatening
<b>Correction Timeframe</b>	24 hours, if occupied
<b>HCV Correction Timeframe</b>	24 hours, if occupied
<b>HCV Pass/Fail</b>	Fail

For occupied units where the family already has a voucher and is undergoing a periodic reexamination, deficiencies on the HOTMA LT list must be corrected within 24 hours. For new units proposed for the HCV program, HOTMA LT deficiencies must be resolved before the Housing Assistance Payment (HAP) contract is executed and the family moves into the unit. Other deficiencies included in the NSPIRE standards must be resolved within timelines established by the PHA administering the voucher, typically 30 days. Where NSPIRE deficiencies are not corrected within established timeframes, PHAs will be required to suspend, abate or terminate HAP to the landlord once the standards are final.

Inspectable Item	Deficiency
<b>Call-for-Aid System</b>	System is blocked, or pull cord is higher than 6 inches off the floor. System does not function properly.
<b>Carbon Monoxide Alarm</b>	Carbon monoxide alarm is missing, not installed, or not installed in a proper location. Carbon monoxide alarm is obstructed. Carbon monoxide alarm does not produce an audio or visual alarm when tested.
<b>Chimney</b>	A visually accessible chimney, flue, or firebox connected to a fireplace or wood-burning appliance is incomplete or damaged such that it may not safely contain fire and convey smoke and combustion gases to the exterior. Chimney exhibits signs of structural failure.
<b>Clothes Dryer Exhaust Ventilation</b>	Electric dryer transition duct is detached or missing. Gas dryer transition duct is detached or missing. Electric dryer exhaust ventilation system has restricted airflow. Dryer transition duct is constructed of unsuitable material. Gas dryer exhaust ventilation system has restricted airflow.
<b>Door - Entry</b>	Entry door is missing.
<b>Door - Fire Labeled</b>	Fire labeled door is missing.
<b>Egress</b>	Obstructed means of egress. Sleeping room is located on the 3rd floor or below and has an obstructed rescue opening. Fire escape is obstructed.
<b>Electrical - Conductor, Outlet, and Switch</b>	Outlet or switch is damaged. Exposed electrical conductor. Water is currently in contact with an electrical conductor.
<b>Electrical - Service Panel</b>	The overcurrent protection device is damaged.
<b>Exit Sign</b>	Exit sign is damaged, missing, obstructed, or not adequately illuminated.
<b>Fire Escape</b>	Fire escape component is damaged or missing.
<b>Fire Extinguisher</b>	Fire extinguisher pressure gauge reads over or under-charged. Fire extinguisher service tag is missing, illegible, or expired. Fire extinguisher is damaged or missing.
<b>Flammable and Combustible Items</b>	Flammable or combustible item is on or within 3 feet of an appliance that provides heat for thermal comfort or a fuel-burning water heater. OR Improperly stored chemicals.
<b>Guardrail</b>	Guardrail is missing or not installed. Guardrail is not functionally adequate.
<b>Heating, Ventilation, and Air Conditioning (HVAC)</b>	The inspection date is on or between October 1 and March 31 and the permanently installed heating source is not working or the permanently

	installed heating source is working and the interior temperature is below 64 degrees Fahrenheit.
	Unvented space heater that burns gas, oil, or kerosene is present.
	Combustion chamber cover or gas shutoff valve is missing from a fuel burning heating appliance.
	Fuel burning heating system or device exhaust vent is misaligned, blocked, disconnected, improperly connected, damaged, or missing.
<b>Leak - Gas or Oil</b>	Natural gas, propane, or oil leak.
<b>Mold-like Substance</b>	Presence of mold-like substance at extremely high levels is observed visually.
<b>Smoke Alarm</b>	Smoke alarm is not installed where required.
	Smoke alarm is obstructed.
	Smoke alarm does not produce an audio or visual alarm when tested.
<b>Sprinkler Assembly</b>	Sprinkler head assembly is encased or obstructed by an item or object that is within 18 inches of the sprinkler head.
	Sprinkler assembly component is damaged, inoperable, or missing and it is detrimental to performance.
	Sprinkler assembly has evidence of corrosion.
	Sprinkler assembly has evidence of foreign material that is detrimental to performance.
<b>Structural System</b>	Structural system exhibits signs of serious failure.
<b>Toilet</b>	Only 1 toilet was installed, and it is missing.
<b>Water Heater</b>	Chimney or flue piping is blocked, misaligned, or missing.
	Gas shutoff valve is damaged, missing, or not installed.