## **2019 Owner's Compliance Verification – HOME**

Cor	tification Dates: 1/1/19-12/31/19	
	OO Name:	
	OO Address:	
	mary Point of Contact:	Email:
	cutive Director:	Email:
Pre	sident of the Board:	Email:
	dersigned (Executive Director) and (Board President) or oes that:	wner on behalf of the CHDO/property/grant, hereby
1.	The organization continues to meet the definition or a C at 24 CFR 92.2.	ommunity Housing Development Organization as define
	□Yes □No □N/A	
2.	All tenants in HOME funded properties meet the income and rent guidelines as outlined in each HOME Grant Agreement.	
	□Yes □No	
3.	All households have been certified at least annually to qualify as low income households according to 24 CFR 92.252; and if self-certification is allowed, full documentation of income qualification is reviewed for all tenants i the 1st, 6 <sup>th</sup> , 12 <sup>th</sup> and 18 <sup>th</sup> year for each grant.	
	□Yes □No	
4.	If any HH income exceeded 80% of AMGI the household was treated as an 'over income tenant' per 24 CFR 92.252. (Certain Tax Credit Rules may apply for rent determination.)	
	□Yes □No	
5.	The owner has a repayment requirement by grant with KHRC. (If there is a repayment requirement, document must be submitted to prove that it has been paid, waived, or exempted due to inadequate cash flow.)	
	□Yes □No	
6.	Have units in any grant been sold or released in the last year? Provide, on a separate page, the grant numbers, addresses and dates of units sold or released.	
	□Yes □No	
7.	All units meet local/State building code, HQS and/or UPCS standards. If there are outstanding physical deficiencies from an agency other than KHRC attach a copy of the inspection.	
	□Yes □No	
8.	Inspections of each unit are conducted at least annually charges for damages.	and records maintained, to include possible
	□Yes □No	

9.	Units meet all applicable Section 504 and agreement requirements for physical accessibility for persons with disabilities.	
	□Yes □No	
10.	For any projects constructed prior to 1978 the owner has provided the lead base pamphlet, required the tenant to sign the certification, and provide any reports on lead-based paint/or lead hazards, including records and reports concerning common areas and other units.	
	☐ Lead Free ☐ Addendum and Pamphlet Provided	
11.	The CHDO/property/grant has a written Fair Housing Plan that describes targeted populations and has made affirmative outreach and marketing efforts to those populations within the past 12 months.	
	□Yes □No	
12.	The CHDO/property/grant has the financial capacity to operate each grant through the entire compliance period. (If no, please explain on a separate page.)	
	□Yes □No	
13.	The CHDO has paid staff with the experience and ability to perform the management and/or development responsibilities of the CHDO to demonstrate capacity.	
	□Yes □No □N/A	
14.	The CHDO has a board that is actively involved in the operation and oversight of the grants.	
	□Yes □No □N/A	
15.	The CHDO is currently eligible to receive HOME funds. (If no please explain on a separate page.)	
	□Yes □No □N/A	
16.	The CHDO has implemented the Federal mandate for the Violence Against Women Act (VAWA).	
	□Yes □No	
17.	The CHDO has selection criteria to not allow illegal aliens (This is not a HOME requirement but the owner can have policies prohibiting illegal aliens.)	
	□Yes □No □N/A	
Note: Failure to adequately complete this form and the entire annual report will result in noncompliance with State and Program requirements and failure to demonstrate capacity. In addition, any individual other than the Executive Director and Board President are not permitted to sign this form.		
the ap	HDO/property/grant is otherwise in compliance with the HOME Final Rule at 24 CFR Part 92 (as amended July 24, 2013), plicable State Allocation Plan, and all other applicable laws, rules and regulations. This Certification and any attachments ade UNDER PENALTY OF PERJURY.	