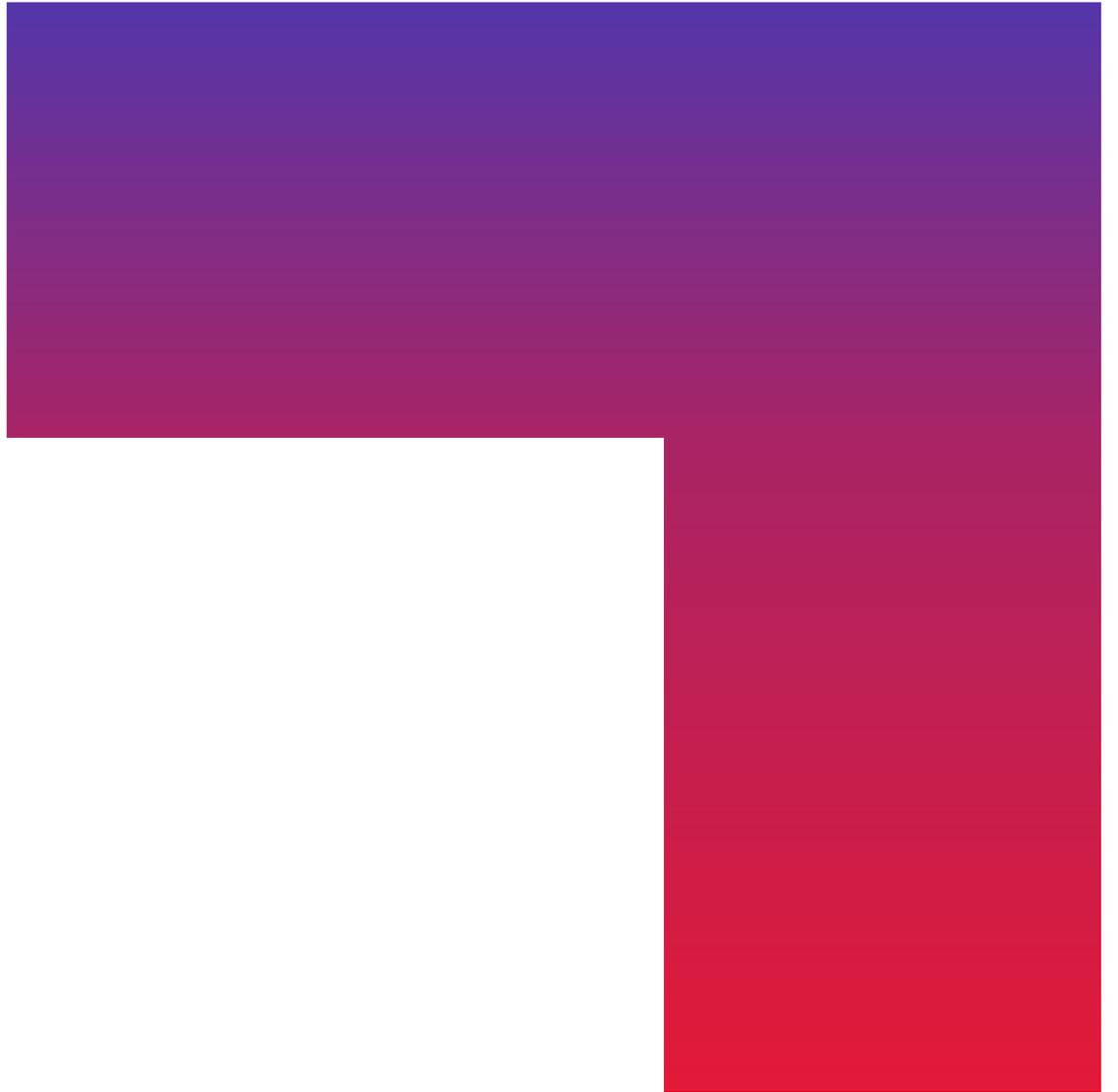


Property Owners & Managers
Learning Exchange Presentation
April 20, 2023

Cate Aponte,
CGI Occupancy Supervisor



Agenda

01

Introduction
to CGI

02

Occupancy
Overview

03

Intake
(RTAs)

04

Leasing/Contracting

05

Q&A

Insights you can act on

Founded in 1976, CGI is among the largest IT and business consulting services firms in the world.

We are insights-driven and outcomes-based to help accelerate returns on your investments. Across hundreds of locations worldwide, we provide comprehensive, scalable and sustainable IT and business consulting services that are informed globally and delivered locally.

cgi.com

The CGI logo consists of the letters 'CGI' in a bold, red, sans-serif font. The letters are closely spaced and have a slight shadow effect. The 'C' and 'G' are connected at the top, and the 'I' is separate. The logo is positioned in the bottom right corner of the slide.

CGI blends our broad affordable housing industry expertise with our IT systems development and support heritage to enable federal, state and local housing agencies to continuously improve their services and comply with regulatory requirements.

We take pride in our strong partnerships with HUD and various PHA's to advance affordable housing programs and help to improve lives of the nearly 5 million US households that receive housing assistance.



Department Divisions

Eligibility

- First step for new program participants
- Evaluates applications to determine eligibility and issue vouchers according to program
- Includes the Portability department

Occupancy

- Receive and process RTA's
- Approval for Initial Inspection
- Submission of signed leases and initial contract execution
- Oversees processing of rent increases

Continued Assistance

- Conducts Annual Recertifications
- Completes Interim Recertifications
- Maintains current contracts
- MIPs for tenants moving within the program

Inspections

- Conducts Initial Inspections for leasing
- Conducts annual inspections per HUD
- Follows up on tenant concerns

Connecting with CGI

By phone:

833-378-2220

By email:

cmha.hcv@housing.systems

In Person:

107 S High Street
Columbus Ohio 43215
2nd Floor

*Temporarily on 4th Floor

What is Occupancy?



Occupancy focuses on the process of a tenant utilizing an issued voucher to lease a unit and complete a contract.

There are two key components to occupancy:

Intake

Leasing/Contracting

Each component plays a key part in ensuring that tenants are housed safely and swiftly in affordable and reasonable units.

Intake

RTA Submission and Review
What it means to be Reasonable
Putting the Rent Burden to Work
Ownership
Approval and Rejections
HQS Inspections

Request for Tenancy Approval (RFTA) Packet

Thank you for your interest in the Housing Choice Voucher Program and making it possible for low income families to enjoy quality, affordable housing!

Submit By Email:

Project Based Vouchers-RAD Project Based Vouchers: cmha.pbvreferrals@housing.systems

FUP-VASH-EHV: cmha.applications@housing.systems

ALL other programs: leasing_contracting@housing.systems

Drop Off In-Person:

107 S. High St, 2nd FL
Columbus, OH 43215

* 9:00 am – 4pm (Monday – Friday)

Required Documentation for RFTA Submissions:

- Completed RTA Packet (Forms listed in Table of Contents)
- Original Voucher (*must be signed by client and have a valid expiration date*)
- Rent Burden Calculation Sheet
- Copy of Owner's Proposed Lease (Not Signed)

Please fill out the RFTA packet completely and make sure all required documents are submitted. An incomplete submission may result in a rejection and will delay the Housing Assistance Payment. Make sure that contact information such as phone number and email address are valid and legible.

WHAT'S NEXT?

1. CGI's Housing Specialist will review all documents submitted within 48 hours of receipt and:
 - Determine if the unit is affordable for the family based on the HUD prescribed calculation and
 - Affordability test
 - Determine whether the rent is comparable with other similar units in the unassisted market where the unit is located.
2. CGI will contact you to coordinate an initial inspection to confirm compliance with HUD's Housing Quality Standards (HQS). **Initial Inspections are scheduled within 10 days of RFTA approval**
4. Within 4 days from the inspection pass date, CGI's Housing Specialist will contact you to establish the move-in date and send a Housing Assistance Payment (HAP) contract to be executed with you or your agent (if you have one).
5. Once you return the executed HAP contract and lease, CGI's Housing Specialist will process the contract within 4 days and payment will be issued at the next check run. Currently, we process check runs on the 1st and 15th of every month.

IMPORTANT NOTE: Ensure that the effective date of the HAP contract **AND** lease start on the same day to avoid processing delays.

Ongoing HAP portion of rent to be issued the 1st of every month thereafter!

RTA Submission

As of 3/1/2023, there are only two ways that RTA's can be received:

- 1) Dropped Off In-Person at the 107 S High Street Office
- 2) By email to one of the following addresses based on the type of voucher the unit is being submitted for:

Project Based Voucher-RAD Project Based Vouchers:

cmha.pbvreferrals@housing.systems

FUP-VASH-EHV: cmha.applications@housing.systems

All other programs: leasing_contracting@housing.systems



Required Documents for RTA Submission

- Completed RTA Packet
- Valid Voucher, Signed by the Tenant
- Rent Burden Calculation Sheet
- Copy of the Unsigned Lease

RTA Packet Table of Contents

Form Title	Page	Form requirements
Owner Notice	Page 3	Reference Only— please read carefully
Housing Choice Voucher Subsidy Standards	Page 4	Reference Only
Calculating the Rental Subsidy	Page 5	Reference Only
Utility Allowance Tables for Tenant Paid Utilities	Page 6-7	Reference Only; Utility Allowance Calculation based on Unit type, bedroom size and voucher size
Rent Burden Test	Page 8	Determines Maximum Rent for Tenant and overall affordability
Request for Tenancy Approval Form	Page 9-10	Required HUD Document; Must be signed by both Owner and Tenant
Lead Based Paint Disclosure	Page 11	Required HUD Document; Must be signed by both Owner and Tenant
Owner/Tenant Utility Billing Affidavit	Page 12	Required HUD Document; Must be signed by both Owner and Tenant
Vendor and Property Management Form	Page 13	Required Document; Must be signed by Owner
Vendor and Property Management Contact Form	Page 14	Identifies Property Contacts; Completed by Owner
Rent Reasonableness Addendum	Page 15	Identifies Property Amendments, Completed by Owner
Landlord Certification of Responsibility	Page 16-17	Required Document; Completed and signed by Owner
New Vendor Setup Forms	Pages 18-22	Required for a New Vendor ID, must be submitted for a contract to be executed

HOUSING CHOICE VOUCHER SUBSIDY STANDARDS

Voucher Size	Subsidy Amount	Minimum # of persons	Maximum # of persons
SRO*	694	1	1
0 BR*	926	1	1
1 BR	1035	1	4
2 BR	1279	2	6
3 BR	1568	3	8
4 BR	1734	4	10
5 BR	1994	5	12
6 BR	2,255	6	14
7 BR	2,515	7	16

* These vouchers are issued for project-based units.

Request for Tenancy Approval
Housing Choice Voucher Program

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

OMB Approval No. 2577-0169
exp. 7/31/2022

The public reporting burden for this information collection is estimated to be 30 minutes, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. The Department of Housing and Urban Development (HUD) is authorized to collect the information on this form by Section 8 of the U.S. Housing Act (42 U.S.C. 1437f). Form is only valid if it includes an OMB Control Number. HUD is committed to protecting the privacy of individuals' information stored electronically or in paper form, in accordance with federal privacy laws, guidance, and best practices. HUD expects its third-party business partners, including Public Housing Authorities, who collect, use maintain, or disseminate HUD information to protect the privacy of that information in accordance with applicable law.

When the participant selects a unit, the owner of the unit completes this form to provide the PHA with information about the unit. The information is used to determine if the unit is eligible for rental assistance. HUD will not disclose this information except when required by law for civil, criminal, or regulatory investigations and prosecutions.

1. Name of Public Housing Agency (PHA)			2. Address of Unit (street address, unit #, city, state, zip code)		
3. Requested Lease Start Date	4. Number of Bedrooms	5. Year Constructed	6. Proposed Rent	7. Security Deposit Amt	8. Date Unit Available for Inspection
9. Structure Type <input type="checkbox"/> Single Family Detached (one family under one roof) <input type="checkbox"/> Semi-Detached (duplex, attached on one side) <input type="checkbox"/> Rowhouse/Townhouse (attached on two sides) <input type="checkbox"/> Low-rise apartment building (4 stories or fewer) <input type="checkbox"/> High-rise apartment building (5+ stories) <input type="checkbox"/> Manufactured Home (mobile home)			10. If this unit is subsidized, indicate type of subsidy: <input type="checkbox"/> Section 202 <input type="checkbox"/> Section 221(d)(3)(B)MIR <input type="checkbox"/> Tax Credit <input type="checkbox"/> HOME <input type="checkbox"/> Section 236 (insured or uninsured) <input type="checkbox"/> Section 515 Rural Development <input type="checkbox"/> Other (Describe Other Subsidy, including any state or local subsidy) _____		

11. Utilities and Appliances
The owner shall provide or pay for the utilities/appliances indicated below by an "O". The tenant shall provide or pay for the utilities/appliances indicated below by a "T". Unless otherwise specified below, the owner shall pay for all utilities and provide the refrigerator and range/microwave.

Item	Specify fuel type	Paid by
Heating	<input type="checkbox"/> Natural gas <input type="checkbox"/> Bottled gas <input type="checkbox"/> Electric <input type="checkbox"/> Heat Pump <input type="checkbox"/> Oil <input type="checkbox"/> Other	
Cooking	<input type="checkbox"/> Natural gas <input type="checkbox"/> Bottled gas <input type="checkbox"/> Electric <input type="checkbox"/> Other	
Water Heating	<input type="checkbox"/> Natural gas <input type="checkbox"/> Bottled gas <input type="checkbox"/> Electric <input type="checkbox"/> Oil <input type="checkbox"/> Other	
Other Electric		
Water		
Sewer		
Trash Collection		
Air Conditioning		
Other (specify)		
Refrigerator		
Range/Microwave		

12. Owner's Certifications

a. The program regulation requires the PHA to certify that the rent charged to the housing choice voucher tenant is not more than the rent charged for other unassisted comparable units. Owners of projects with more than 4 units must complete the following section for most recently leased comparable unassisted units within the premises.

Address and unit number	Date Rented	Rental Amount
1.		
2.		
3.		

b. The owner (including a principal or other interested party) is not the parent, child, grandparent, grandchild, sister or brother of any member of the family, unless the PHA has determined (and has notified the owner and the family of such determination) that approving leasing of the unit, notwithstanding such relationship, would provide reasonable accommodation for a family member who is a person with disabilities.

c. Check one of the following:

- Lead-based paint disclosure requirements do not apply because this property was built on or after January 1, 1978.
- The unit, common areas servicing the unit, and exterior painted surfaces associated with such unit or common areas have been found to be lead-based paint free by a lead-based paint inspector certified under the Federal certification program or under a federally accredited State certification program.

A completed statement is attached containing disclosure of known information on lead-based paint and/or lead-based paint hazards in the unit, common areas or exterior painted surfaces, including a statement that the owner has provided the lead hazard information pamphlet to the family.

13. The PHA has not screened the family's behavior or suitability for tenancy. Such screening is the owner's responsibility.

14. The owner's lease must include word-for-word all provisions of the HUD tenancy addendum.

15. The PHA will arrange for inspection of the unit and will notify the owner and family if the unit is not approved.



Print or Type Name of Owner/Owner Representative		Print or Type Name of Household Head	
Owner/Owner Representative Signature		Head of Household Signature	
Business Address		Present Address	
Telephone Number	Date (mm/dd/yyyy)	Telephone Number	Date (mm/dd/yyyy)

Disclosure of Information on Lead-Based Paint and/or Lead-Based Paint Hazards

THIS FORM MUST BE COMPLETED AND ATTACHED TO THE REQUEST FOR TENANCY APPROVAL FORM

Lead Warning Statement: Housing built before 1978 may contain lead-based paint. Lead from paint, paint chips, and dust can pose health hazards if not managed properly. Lead exposure is especially harmful to young children and pregnant women. Before renting pre-1978 housing, lessors must disclose the presence of known lead-based paint and/or lead-based paint hazards in the dwelling. Lessees must also receive a federally approved pamphlet on lead poisoning prevention.

Lessor's Disclosure (initial)

_____ (a) Presence of lead-based paint or lead-based paint hazards (check one below): Owner Initials

- Must Check One** Known lead-based paint and/or lead-based paint hazards are present in the housing (explain).

- Lessor has no knowledge of lead-based paint and/or lead-based paint hazards in the housing.

_____ (b) Records and reports available to the lessor (check one below): Owner Initials

- Must Check One** Lessor has provided the lessee with all available records and reports pertaining to lead-based paint and/or lead-based paint hazards in the housing (list documents below).

- Lessor has no records or reports pertaining to lead-based paint and/or lead-based paint hazards in the housing.

Lessee's Acknowledgment (initial)

- _____ (c) Lessee has received copies of all information listed above. Tenant Initials
- _____ (d) Lessee has received the pamphlet, *Protect Your Family From Lead in Your Home*. Tenant Initials

Agent's Acknowledgment (initial)

_____ (e) Agent has informed the lessor of the lessor's obligations under 42 U.S.C. 4852d and is aware of his/her responsibility to ensure compliance. Agent Initials

Certification of Accuracy

The following parties have reviewed the information above and certify, to the best of their knowledge, that the information provided by the signatory is true and accurate.

Lessor	Date	Lessor	Date	Owner Sign and Date
Lessee	Date	Lessee	Date	Tenant Sign and Date
Agent	Date	Agent	Date	Agent Sign and Date

Owner/Tenant Utility Billing Affidavit

Re:

_____ Street Address of Assisted Unit

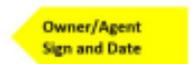
_____ City State Zip Code

1. All separately metered utilities that are the tenant's responsibility must be billed in the name of the tenant or the tenant's assigned designee within 30 days of the move in date.
2. For any utility that is the tenant's responsibility, which is not separately metered, and for which the landlord is billing the tenant, the landlord must bill the tenant using the same ratio, percentage, or calculation that is used for like units that are unassisted.
3. The landlord hereby certifies that for any such non-metered utility for which the tenant is being billed, the landlord is billing the tenant using the same ratio, percentage, or calculation that is used for like units that are unassisted.
4. Failure to have the utilities on as described above can result in the abatement of rent, termination of assistance or the cancellation of a contract at the sole discretion of CMHA.

Signature of Tenant (Head of Household) _____
Date



Signature of Owner/Agent _____
Date



Vendor and Property Management Information

To be completed by New Vendors:

Is the unit listed on the Franklin County Auditor Website? YES or NO (If yes, please complete below)

Who is listed as the owner on the Franklin County Auditor website? _____

Vendor Address: _____

Vendor Phone Number: _____

Contact Name: _____

E-mail Address: _____

To be completed by Existing Vendors:

Vendor ID (required): _____ Vendor Name: _____

Vendor Address: _____

Vendor Phone Number: _____

Contact Name: _____

E-mail Address: _____

Is there a Property Management Agreement or authorized agent contracted for the unit? YES or NO (If yes, please complete below)

Property Management Company: _____

Property Management Address: _____

Contact Name: _____

Contact Phone Number: _____

****To obtain a vendor ID, new vendors must complete an IRS Form W-9. A letter will be e-mailed to the vendor. CMHA will utilize the contact information noted on this form. Please be advised that payment on the Housing Assistance Payment Contract (HAP Contract) may be delayed if the IRS Form W-9 is not received by the Occupancy Department. Please submit the IRS Form W-9 via e-mail to leasing_contracting@housing.systems**

****Vendors with a Property Management Agreement, Power of Attorney or guardianship documentation are required to submit verification to CMHA. Initial payment on the HAP Contract may be delayed until all documentation is received. Please submit via e-mail to leasing_contracting@housing.systems**

****Please do not submit personal and company sensitive information via the family for privacy concerns. (Example: IRS Form W-9 requires social security number or EIN).**

Vendor and Property Management Contact Form

It is important to have accurate and specific contact information for the Owner/Property Management company during the Occupancy process so effective communication can be achieved. Having specific contact information for each step of the process will ensure that CGI is contacting the correct person for the issue at hand and the Occupancy processing does not encounter any unnecessary delays.

For a single point of contact that will be the only person involved in the various steps of the Occupancy process, please complete Section A - Single Point of Contact.

For multiple points of contact for the various steps of the Occupancy process, please complete Section B - Multiple Contacts. Please make sure you list the accurate and specific contact information for each step of the process.

Section A- Single Contact

Contact Name Phone Number Email Address

Section B- Multiple Contacts

Inspections Contact Name: Phone Number Email Address

This should be the person CGI will contact to schedule the inspection, address failed HQS items, address maintenance, contact prior to arriving for inspection, etc.

Leasing/Contracting Contact Name: Phone Number Email Address

This should be the person CGI will contact regarding RTAs, RTA approvals/rejections, rent negotiation, lease compliance with HUD requirements and any corrections that are needed to lease, submission of Contracting documents, etc.

Payments Contact Name: Phone Number Email Address

This should be the person CGI will contact for new vendor set-up, over-payments, payment reconciliation, etc.

Other Contact Name: Phone Number Email Address

Reason for contact:

RENT REASONABLENESS ADDENDUM

Tenant Name		Client #	
Unit Address			
Owner Name		Vendor #	

Check one for each section

Type of Unit		Square Footage	
<input type="checkbox"/> Single Family Detached	<input type="checkbox"/> High Rise with Elevator	<input type="checkbox"/> 500 or less	<input type="checkbox"/> 1001-1250
<input type="checkbox"/> Low Rise	<input type="checkbox"/> Row House/Townhouse	<input type="checkbox"/> 501-750	<input type="checkbox"/> 1251-1500
<input type="checkbox"/> Semi-Detached	<input type="checkbox"/> Manufactured Home	<input type="checkbox"/> 751-1000	<input type="checkbox"/> 1501 or more
Location/Neighborhood/Area			
<input type="checkbox"/> Residential	<input type="checkbox"/> Commercial	<input type="checkbox"/> Industrial/Residential	<input type="checkbox"/> Industrial/Commercial

Check all that apply

Accessibility to Services			
<input type="checkbox"/> Shopping	<input type="checkbox"/> School	<input type="checkbox"/> Train/Bus/Ferry	<input type="checkbox"/> Daycare
Management & Maintenance of Building			
<input type="checkbox"/> On Site Maintenance	<input type="checkbox"/> Lawn Care	<input type="checkbox"/> Snow Removal	<input type="checkbox"/> Security Guard
<input type="checkbox"/> Owner/Super Lives in the Building			
Facilities for the Building		Amenities Provided by Owner	
<input type="checkbox"/> Interroom	<input type="checkbox"/> Good Building Exterior	<input type="checkbox"/> New Stove	<input type="checkbox"/> Separate Dining Room
<input type="checkbox"/> Security System	<input type="checkbox"/> Swimming Pool	<input type="checkbox"/> New Refrigerator	<input type="checkbox"/> W Washer/Dryer Hookups in unit
<input type="checkbox"/> Cable TV Hookup	<input type="checkbox"/> Large Yard	<input type="checkbox"/> Microwave Oven	<input type="checkbox"/> Clothes Washer
<input type="checkbox"/> Laundry Facilities	<input type="checkbox"/> Playground	<input type="checkbox"/> New Kitchen Cabinets	<input type="checkbox"/> Clothes Dryer
<input type="checkbox"/> Community Room	<input type="checkbox"/> Driveway	<input type="checkbox"/> Dishwasher	<input type="checkbox"/> Pvt. Patio Deck/Balcony
<input type="checkbox"/> Recreational Facility	<input type="checkbox"/> Free Parking Facility	<input type="checkbox"/> Eat-in-Kitchen	<input type="checkbox"/> New Windows
<input type="checkbox"/> Handicap Access	<input type="checkbox"/> Paid Parking Facility	<input type="checkbox"/> Storage Room	<input type="checkbox"/> Window Screens
<input type="checkbox"/> Garage		<input type="checkbox"/> Den/Family Room	<input type="checkbox"/> New Carpet
		<input type="checkbox"/> Extra Full Bath	<input type="checkbox"/> New Closet Doors
		<input type="checkbox"/> Extra Half Bath	<input type="checkbox"/> Central A/C

Check all that apply

Have any major renovations been made to unit?	Yes	No
If yes, please check what was completed and list the year the renovation was made.		
New roof Year	New siding Year	New windows Year
New flooring throughout Year	New plumbing throughout Year	
New wiring throughout Year	New plumbing fixtures throughout Year	
New lighting throughout Year	New kitchen cabinets Year	
New bathroom cabinets/vanity Year	New toilet/tub/shower in bath Year	
New appliances Year	Other:	Year

Section 8 Programs Landlord Certification of Responsibility

Re:

Street Address of Assisted Unit

City State Zip Code

1. I certify that I am the legal or the legally designated agent for the above referenced unit, and that the tenant has no ownership in this dwelling.
2. I understand that I should carefully screen the family for suitability for tenancy, including the family's background with respect to such factors as rent and utility payment history, caring for unit and premises, respecting the rights of others to the peaceful enjoyment of their housing, and drug-related and criminal activity that is a threat to the life, safety, or property of others.
3. I understand that I may collect a security deposit from the tenant that is not in excess of private market practice, or in excess amounts that I charge to unassisted tenants.
4. I understand my obligation to offer a lease to the tenant and that the lease may not differ in form or content from any other lease that I am currently using for any unassisted tenants.
5. I understand that the family members listed on the Housing Assistance Payments Contract are the only individuals permitted to reside in the unit. I understand that CMHA and I must grant prior written approval for other persons to be added to the household.
6. I understand that I am not permitted to live in the unit while I am receiving housing assistance payments.
7. I agree to comply with all requirements contained in the lease, tenancy addendum, Housing Assistance Payments Contract, parts A, B and C. I understand that it is imperative that I fully understand the terms and conditions of the lease, tenancy addendum and the HAP Contract.
8. I understand that I must submit to the tenant for their consideration and to CMHA for their review, any new lease or lease or lease revision a minimum of sixty (60) days in advance of the effective date of the lease or lease revision.
9. I understand that I must provide CMHA with a written request for any rent increase a minimum of sixty (60) days in advance of the increase and in accordance with the provisions of the lease and HAP Contract.
10. I understand that the tenant's portion of the contract rent is determined by CMHA and that it is illegal to charge any additional amounts for rent or any other item not specified in the lease, which has not been specifically approved by CMHA.
11. I understand that I may not lease a unit to my family members, including all occupants, who are related to me in any of the following ways: parent, child, grandparent, grandchild, sister or brother. I understand that CMHA may grant prior written approval if the rental unit will provide reasonable accommodations for a family member who is a person with disabilities.
12. I understand that I may not assign the HAP Contract to a new owner without the prior written consent of CMHA.
13. I understand my obligations in compliance with the Housing Assistance Payments Contract to perform necessary maintenance so the units continue to comply with Housing Quality Standards.

Section 8 Programs Landlord Certification of Responsibility

14. I understand that should the assisted unit become vacant, I am responsible for notifying CMHA immediately in writing. I also understand that the HAP Contract and payment will terminate immediately.
15. I understand that I should attempt to resolve disputes between the tenant and me and contact CMHA in writing, only in serious disputes that we are unable to resolve.
16. I understand that I must promptly give CMHA a copy of an owner- eviction notice to the tenant and to comply with all State and local eviction procedures.
17. I acknowledge that I have been briefed on the Section 8 Program. I understand that my failure to fulfill the above may result in the withholding, abatement, or termination of housing assistance payments for the contract unit or another unit; and or being barred from participating in CMHA housing programs.
18. I understand that knowingly supplying false, incomplete, or inaccurate information is punishable under Federal or State Criminal Law.

**Owner/Agent
Sign and Date**

Signature of Owner/Agent

Date

Warning: Title 18, US Code Section 1001, states that a person who knowingly and willingly make false or fraudulent statements to any Department or Agency of the United States is guilty of a felony. State law may also provide penalties for false of fraudulent statements.

NEW VENDOR SETUP

You will need the following items to successfully setup a New Vendor ID:

- Proof of Ownership: This may be only in the form of a signed Settlement Statement (signed by the buyer and the seller), a recorded deed (registered with the Franklin County Auditor), a current tax bill, or a current insurance bill. The Franklin County Auditor site may not be submitted as proof of ownership.
- Assignment of Housing Payments Contract and Lease Form
- Authorization Agreement for ACH Payments Form
- Property Management Agreement (if applicable)
- IRS Form W-9 with owner's information (not property management company information)

It is our goal to process all new vendor requests in a timely manner. Please be advised that CGI is unable to prepare your HAP Contract to disburse payment until we establish your vendor ID.

You will receive information for E-disbursement (electronic payment) via email at the address you provide on the ACH Authorization Agreement form.

To submit the change of ownership, you can submit all documents by:

➤ email: leasing_contracting@housing.systems

➤ Via mail:

PO Box 163490
Columbus, OH 43216

➤ In person during normal business hours 8:00 AM-4:30 PM at:

107 S. High St.
2nd Floor,
Columbus, OH 43215
Temporarily Located on the 4th Floor

(Check **only** one)

- Standard HCV
- PBV (Property Name)

RENT BURDEN TEST

FAMILY HAP & RENT CALCULATION FORM
 Housing Choice Voucher Programs Department
HCV

Family Name: _____ Client #: _____ Voucher Size: _____

Monthly Adjusted Income (MAI): _____ Total Tenant Payment (TTP): _____

Payment Standards Effective 10-01-2022							
SRO	STUDIO	1BR	2BR	3BR	4BR	5BR	6BR
\$694	\$926	\$1035	\$1279	\$1568	\$1734	\$1994	\$2255

Rent Burden Test

<p>Box A</p> <p>Payment Standard for ___BR: _____</p> <p>MAI Times 10% _____</p> <p>Maximum Gross Rent Allowed: _____</p>	<p>Box B</p> <p>Owner Contract Rent: \$ _____</p> <p>Utility Allowance: \$ _____</p> <p>Gross Rent \$ _____</p>
--	--

- When selecting a unit smaller than the issued voucher size, the smaller unit size will be used.
- If the Gross rent (Box B) exceeds the Maximum Gross Rent (Box A), the unit cannot be approved.

CALCULATING HAP AND FAMILY RENT TO OWNER

- If the Gross Rent (Box B) is less than the Maximum Gross Rent Allowed (Box A), you must use the Gross Rent as the Payment Standard in order to correctly calculate the amount of the Voucher Subsidy and Family Rent to Owner.

If the Unit's Gross Rent is less than the Payment Standard, use Box C.

If the Unit's Gross Rent is greater than the Payment Standard, use box D.

<p>Box C</p> <p>Total Tenant Payment (TTP): _____</p> <p>Minus Utility Allowances: _____</p> <p>Equals Family Rent to Owner: _____</p>	<p>Box D</p> <p>Gross Rent _____ minus</p> <p>Subsidy Standard _____ = _____</p> <p>Add Total Tenant Payment: + _____</p> <p>Equals Family Total Expense: _____</p> <p>Less Utilities: _____</p> <p>Equals Family Rent to Owner _____</p>
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Rent Burden Test- Affordability

-Serves as our guide in determining affordability for the tenant

-Serves as the tenant and landlords guide in determining affordability for the tenant

Payment Standard per bedroom + MAI x 10% = Maximum Gross Rent

Contract Rent + Utility Allowance = Gross Rent

Gross Rent **MUST BE LOWER OR EQUAL TO the Maximum** Gross Rent to be affordable for the tenant

Utility Allowance Schedule

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

OMB Approval
No. 2577-0169
exp. 7/31/2022

The following allowances are used to determine the total cost of tenant-furnished utilities and appliances.

Locality/PHA		Unit Type					Date	
COLUMBUS METROPOLITAN HOUSING AUTHORITY		Multi-Family (Garden/Flat/High-Rise/Apartment/Row House/Townhouse/Semi-Detached/)					4/1/2023	
Utility or Service	Fuel Type	0-BR	1-BR	2-BR	3-BR	4-BR	5-BR	
		MONTHLY DOLLAR ALLOWANCES						
Heating	Natural Gas	\$ 18.00	\$ 21.00	\$ 24.00	\$ 27.00	\$ 31.00	\$ 34.00	
	Bottled Gas / Propane	\$ 64.00	\$ 74.00	\$ 87.00	\$ 97.00	\$ 113.00	\$ 123.00	
	Electric	\$ 22.00	\$ 26.00	\$ 35.00	\$ 44.00	\$ 53.00	\$ 62.00	
	Electric - Heat Pump	\$ 20.00	\$ 23.00	\$ 27.00	\$ 31.00	\$ 34.00	\$ 37.00	
	Oil							
Cooking	Natural Gas	\$ 2.00	\$ 2.00	\$ 4.00	\$ 5.00	\$ 6.00	\$ 7.00	
	Bottled Gas / Propane	\$ 8.00	\$ 8.00	\$ 13.00	\$ 18.00	\$ 23.00	\$ 26.00	
	Electric	\$ 6.00	\$ 7.00	\$ 10.00	\$ 13.00	\$ 16.00	\$ 19.00	
Other Electric (Lights and Appliances)		\$ 22.00	\$ 26.00	\$ 35.00	\$ 45.00	\$ 55.00	\$ 65.00	
Air Conditioning		\$ 6.00	\$ 7.00	\$ 9.00	\$ 12.00	\$ 15.00	\$ 17.00	
Water Heating	Natural Gas	\$ 5.00	\$ 6.00	\$ 8.00	\$ 11.00	\$ 14.00	\$ 17.00	
	Bottled Gas / Propane	\$ 20.00	\$ 23.00	\$ 31.00	\$ 41.00	\$ 51.00	\$ 61.00	
	Electric	\$ 15.00	\$ 17.00	\$ 22.00	\$ 27.00	\$ 32.00	\$ 36.00	
	Oil							
Water	City of Columbus (Inside City)	\$ 26.00	\$ 26.00	\$ 34.00	\$ 41.00	\$ 49.00	\$ 56.00	
	Avg (Subdivisions)	\$ 36.00	\$ 37.00	\$ 47.00	\$ 58.00	\$ 68.00	\$ 79.00	
Sewer	City of Columbus (Inside City)	\$ 39.00	\$ 40.00	\$ 50.00	\$ 61.00	\$ 71.00	\$ 81.00	
	Avg (Subdivisions)	\$ 37.00	\$ 38.00	\$ 51.00	\$ 63.00	\$ 75.00	\$ 87.00	
Trash Collection	(Rumpke Disposal)	\$ 28.00	\$ 28.00	\$ 28.00	\$ 28.00	\$ 28.00	\$ 28.00	
Other – specify	Electric Charge \$13.07	\$ 13.00	\$ 13.00	\$ 13.00	\$ 13.00	\$ 13.00	\$ 13.00	
	Natural Gas Charge \$38.95	\$ 39.00	\$ 39.00	\$ 39.00	\$ 39.00	\$ 39.00	\$ 39.00	
Tenant-supplied Appliances	Range / Microwave	\$ 11.00	\$ 11.00	\$ 11.00	\$ 11.00	\$ 11.00	\$ 11.00	
	Refrigerator	\$ 12.00	\$ 12.00	\$ 12.00	\$ 12.00	\$ 12.00	\$ 12.00	
Actual Family Allowances – May be used by the family to compute allowance while searching for a unit.						Utility/Service/Appliance	Allowance	
Head of Household Name						Heating		
						Cooking		
Unit Address						Other Electric		
						Air Conditioning		
Number of Bedrooms						Water Heating		
						Water		
						Sewer		
						Trash Collection		
Number of Bedrooms						Other		
						Range / Microwave		
Number of Bedrooms						Refrigerator		
						TOTAL		

Previous versions are obsolete

Form HUD-52667 (7/2019)

Utility Allowance

When considering the cost of housing, HUD acknowledges that the cost of housing is just the building- it's utilities too.

Utility Allowance is determined by the utilities a tenant is listed as responsible for on the RTA and in the lease.

*As of April 1st, 2023, there is an additional amount allotted to any tenant paying for electric and/or gas utilities

- If both fuel sources are utilized in utilities paid by the tenant, they are eligible to receive both allowances

What does it mean to be Rent Reasonable?

In short, it is our means of ensuring that the tenant is getting their money's worth

Rent Reasonableness utilizes the RTA form and the Rent Reasonableness Addendum to determine what features a property contains and determines how much a property is able to charge.

Things that impact Rent Reasonableness:

1) Property Details: Bedroom Size, Number of Bathrooms, Build or Renovation Date, Square Footage, whether or not laundry is in unit, the presence of a balcony or patio, off street parking, etc

2) Utilities Included in the Rent Amount

Determining Rent Reasonableness

As part of the RTA process, we utilize the forms in the RTA packet and plug them in to a software called Novogradac.

Novogradac uses the information we take from these forms to not only determine whether the rent a landlord is asking for is appropriate, it uses data such as proximity to resources and comparable properties to determine the maximum amount that can be charged for each unit.



Verifying Ownership

The final step before we can approve a unit and send it to inspection is verifying the ownership of a unit. We run into three different scenarios at this point:

IF a landlord is an established landlord AND the unit is already in our system, we are able to use the Franklin County Auditor

IF a landlord is an established landlord BUT the unit is new, we need to verify ownership with a more substantial document such as a deed

IF a landlord is a NEW LANDLORD, then we both need to complete the new vendor set up process and verify ownership with a more substantial document

(Per CMHA Admin Plan)

HQS Inspection

Once an RTA is approved and entered into the system, it transmits to OnCue, CGI's inspection software.

Once transmitted to Oncue, Inspection Coordinators will call the Landlord and verify the inspection time and date

Inspections occur within 7-10 days of RTA Approval



HQS Inspections (Cont)

- If the unit passes the initial inspection, we can proceed with contracting
- If no one is there for the inspection to occur, a reinspection will be scheduled.
- If the unit fails the initial inspection, a fail report will be issued. A reinspection will be scheduled for 3 weeks from initial to allow time for repairs.
- If a unit receives two inconclusives OR two fails, the RTA will be rejected.



CGI OnCue Inspections Portal and CGI Landlord Portal

Leasing/Contracting

Ready Notifications
Lease Requirements
Leasing Up/Executing the HAP

A bit of a HCV Program Vocabulary Lesson

HAP vs UAP

HAP refers to the Housing Assistance Payments Contract, which is the official document that completes a contract between a landlord and HUD

UAP refers to the Utility Allowance Payment, which is a sum that is sometimes received by a tenant to assist with utility payments (dependent on income)

TTP vs Tenant Rent

TTP (Total Tenant Portion) is 30% of the tenants income, and the HUD expectation for what the tenant will be responsible for paying

Tenant Rent refers to the TTP (including the 10% MAI if it is included) MINUS the Utility Allowance

Leasing/Contracting

Following a passed inspection, we issue a ready notification and the HAP Contract and Tenancy Addendum to provide to the landlord.

The ready notification outlines the following things:

Effective Date:

Contract Rent:

Tenant Portion:

CMHA's Portion: (AKA HAP Portion)

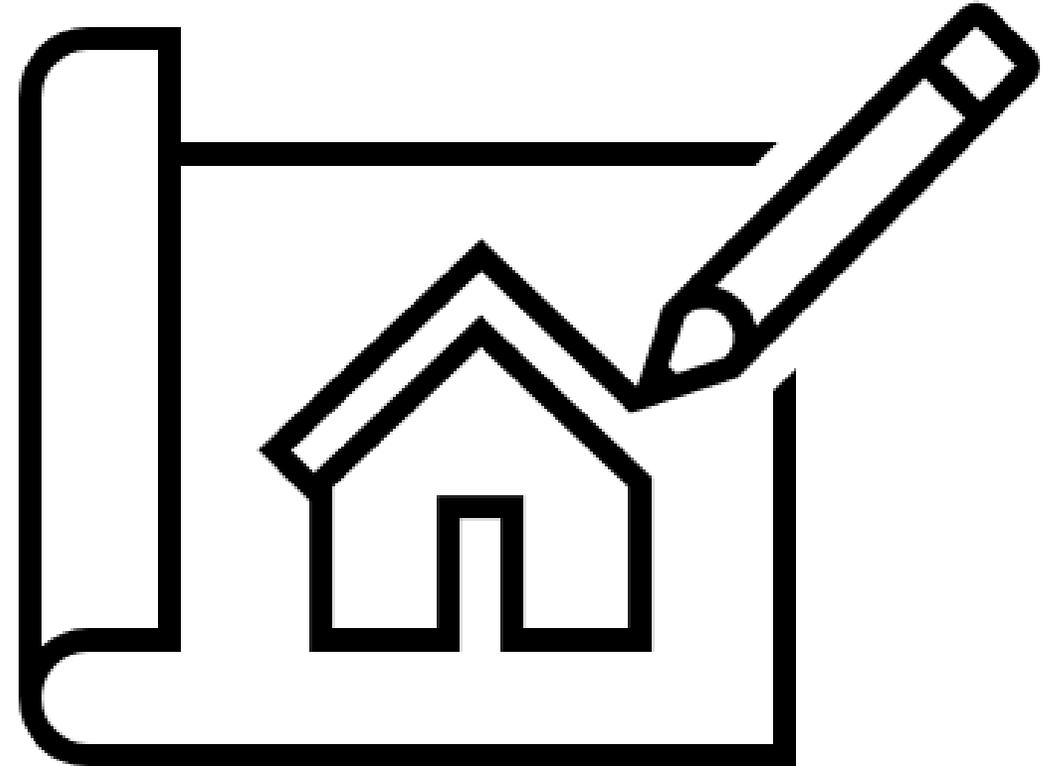
It provides guidance for submission of a signed lease with the appropriate dates and to ensure we are in agreeance of these amounts prior to the HAP Contract being executed

A signed lease should start the day after the inspection passes (or a reasonable time after in which the tenant moves in) and should end the last day of the month before the lease starts

Example: 3/15/2023-2/28/2024

Lease Requirements

- Dates must be for one year
- Lease must end on the last day of the month prior in the following year
- Must confirm responsibility of the utilities on the lease
- Must not contain any automatic renewal fees
- No automatic rent increases
- Must contain all required addendums



Leasing Up/Executing the HAP Contract

Once the lease is received with the corrected dates, we are able to proceed with the HAP contract.

We do a final check to ensure all info is correct in Scyphus and on the returned and signed contract, we are then able to execute the contract.

Once we upload the signed documents and sign the leasing checklist in Scyphus, the contract dates will generate in the contracting screen. Payments will begin according to the next pay schedule.

Lease- agreement between the tenant and landlord

HAP/IRD- agreement between HUD and the landlord



In order to remain HUD compliant, all contracts must be executed within 60 days of a passed Inspection.

Payments Schedule



- Currently, we operate off of two check runs: The first of the month check run and the mid month check run
- Initial payments will be issued depending on when the contract is completed.
- After initial payment, all payments will be issued at the first of the month

