

TBRA PROGRAM MONITORING CHECKLIST PROGRAM POLICIES AND PROCEDURES 8/18/04

| Reviewer: Date: | | | | |
|------------------------------------|--------|---|-------|-------|
| Questions | Answer | | Notes | Notos |
| | Y | Ν | notes | |
| A. PROGRAM POLICIES AND PROCEDURES | | | | |
| 1. T. d | | | | |

| A. I KOOKAWI I OLICIES AI (D I KOCEDOKES | | |
|---|--|--|
| 1. Is the program administered in a manner consistent with the Consolidated Plan? | | |
| a. if not, did the PJ receive approval to modify the program's design? | | |
| 2. It there an adequate written program description for the program? | | |
| 3. Are there adequate procedures for making the program description available to the public? | | |
| B. OUTREACH | | |
| 4. Is there an acceptable outreach and marketing plan? | | |
| 5. Is the outreach plan being implemented? | | |
| C. PARTICIPANT SELECTION | | |
| 6. Is a tenant selection policy on file that provides equal opportunities for the targeted population? | | |
| 7. Are there procedures to ensure that all applicants get fair consideration for assistance? | | |
| 8. Are adequate application forms used? | | |
| 9. Based on. a review of case files, has there been proper determination and documentation of the eligibility of program participants? | | |
| 10. Do 90 percent of all program participants have incomes at or below 60 percent of area median income? | | |
| 11. Are there adequate procedures for determining and documenting participant eligibility?a. Is the correct definition of annual income used?b. Do files contain the appropriate documentation to verify each household's income eligibility? | | |
| 12. Are there established selection criteria? | | |
| 13. Are the local preferences structured in a non- discriminatory way? | | |
| 14. Do tenant selection criteria assign weights consistently to any preferences? (if applicable) | | |
| 15. Is there a clearly established method of determining which households should receive offers and in what order? | | |
| 16. Is the offer date consistently documented in applicant files? | | |
| 17. Do case files contain the following required documents: a. Program contract b. Lease c. Total tenant payment d. Annual income recertification e. Documentation of termination reason/effective date | | |

| Questions | | iswer | |
|---|--|-------|---------|
| | | Ν | - Notes |
| 18. Do program case files document unit compliance with local codes and standards and Section 8 HQS: a. At initial occupancy? b. At annual reinspection? c. After any code related complaint? | | | |
| 19. Do program case files document that units meet the following qualifications: a. Unit is located within the proper jurisdiction or approved program area? b. Unit is not an owner-occupied cooperative unit? 20. Based on a review of case files, are rents for participating units | | | |
| reasonable compared to similar unassisted units? 21. Is there a system for ensuring that rents are reasonable by comparing them to similar units? | | | |
| 22. Does a spot-check of comparable units indicate that the units are actually of comparable quality?23. Are there clear policies for determining appropriate unit size, and do case files show that these policies have been applied consistently? | | | |
| E. SUBSIDY ADMINISTRATION AND FILE DOCUMENTS | | | |
| 24. Does the program's payment standard fall between the minimum and maximum allowed under the HOME program, and is there adequate documentation of the payment standard? | | | |
| 25. Do program case files show that annual rent adjustments are consistent with a proper rent reasonableness determination?26. Do case files include notices informing the tenant and the | | | |
| owner of changes in the program and tenant's share of the rent?27. Are exception payment standards used properly? | | | |
| 28. Do case files show that proper utility allowances (either PHA allowances or proper local estimated) were used when determining contract rents? | | | |
| 29. Is there a current utility allowance schedule? | | | |
| 30. Is there a consistent policy for applying updated utility allowances? | | | |
| 31. Do program case files indicate proper calculation of the Total Tenant Payment (TTP) and any utility reimbursement? | | | |
| F. PROGRAM PARTICIPATION | | | |
| 32. Are enough eligible households applying for assistance to spend the funds allocated to the program? | | | |
| 33. Are applicants typically eligible to participate in the program? | | | |
| 34. Are the households that apply for assistance reasonably representative of the eligible population (e.g., race, family size, gender, age)? | | | |
| 35. Are application intake locations and hours likely to affect the applicant pool? | | | |
| G. PROGRAM EFFECTIVENESS | | | |
| 36. Is there a success rate of 90 percent or higher among 60-day coupon holders? | | | |

| Questions | | nswer | - Notes |
|--|---|-------|---------|
| Questions | Y | Ν | - Notes |
| 37. Does the demographic profile of households that are unable to use their coupons suggest the need for program design changes? | | | |
| 38. Is the program operated efficiently?a. Is the average time between initial application and coupon issuance reasonable?b. Is the average time between coupon issuance and lease-up reasonable? | | | |
| 39. Does the turnover rate raise questions about program effectiveness? | | | |
| 40. Are briefings provided for coupon holders? If yes:a. Do the briefings provide time for one-on-one questions?b. Does the information package contain all required materials including lead based paint pamphlets?c. Are they conducted in the same way for all applicants? | | | |
| 41. Is there a payment standard that results in a reasonable rent burden for most participants? | | | |
| H. PROGRAM ADMINISTRATION | | | |
| 42. Are there adequate program procedures? | | | |
| 43. Is documentation on file that health departments are notified quarterly of pre 78 units with children under age 6/pregnant women? (Rental Subsidies Only) | | | |
| 44. Is the area health department sending addresses of pre-1978 units with children with EBLs to the grantee? (Rental Subsidies Only) | | | |
| 45. Are rent checks consistently distributed on time? | | | |
| 46. Are HOME funds disbursed at an appropriate rate? | | | |



TBRA PROGRAM MONITORING CHECKLIST PROJECT CASEFILES 8/18/04

| D | • |
|-----|---------|
| Dat | 1011000 |
| NEV | viewer: |
| | |
| | |

Date:

Tenant ID#:

Tenant Name:

| Questions | | swer | Notes | |
|---|--|------|---|--|
| | | Ν | Inotes | |
| The monitor should select a sample of individual applicant files to entite that decisions were made property (e.g., preference status, rent subsi | | | ocumentation is contained in each file, and | |
| A. APPLICANT DOCUMENTATION | | | | |
| 1. Is the KHRC "posted" setup/revision/closeout form in the file? | | | | |
| 2. Close-out form in file (if applicable)? Effective date and reason for termination provided? | | | | |
| 3. Did the applicant meet the PJ's residency requirement? | | | | |
| 4. Number of Persons/Bedrooms meet Occupancy Standards | | | Persons: BR: | |
| 5. Does the file contain SS card copies/Birth certificates? | | | | |
| 6. Does the file contain a Declaration of Citizenship form? | | | | |
| 7. Does the file contain a completed (signed/dated) application? | | | | |
| 8. Does the file contain an original income eligibility release form? | | | | |
| 9. Is third party income verification on file? | | | | |
| 10. Verification of eligibility for preferences and appropriate preference weight assigned (if applicable) | | | | |
| 11. Income Worksheet on file? | | | Annual Gross Income: | |
| 12. Income limits of participants are at or below: 60% of median 80% of median | | | | |
| 13. Tenant Payment Calculation | | | Tenant: TBRA Subsidy: | |
| 14. Is the utility allowance (if applicable) figured into the TTP? | | | Utility Allowance: | |
| 15. Are Expenses (Medical, child care) documented in the file? | | | | |
| 16. Were any additional income criteria imposed by the PJ (if any) met? | | | | |
| C. TENANT INCOME RECERTIFICATION | | | | |
| 17. Income Release form signed prior to Recertification | | | | |
| 18. On-time and Accurate Income Recertification | | | | |
| 19. Copies of notices sent to owners and tenants noting the change in PJ and tenant payments | | | | |

| Questions | | swer | Nuture |
|--|---|------|--------|
| | Y | Ν | Notes |
| B. LEASING PROCESS DOCUMENTATION | | | |
| 20. Coupon/offer Date | | | |
| 21. Date of Briefing | | | |
| 22. LBP Pamphlet/Disclosure Form Documented | | | |
| 23. Request for Unit Approval form/date | | | |
| 24. PJ/Owner Contract | | | |
| 25. Acceptable Tenant Lease (Signed and Dated by Tenant/LL) | | | |
| 26. Lease Addendum for additional year/month to month agreement? | | | |
| D. LOCAL PROPERTY STANDARDS AND SECTION 8 HQS | | | |
| 27. Is the completed HQS form on file? Certified HQS inspector? | | | |
| 28. Met Section 8 HQS at the time of the original lease? | | | |
| 29. Are there any tenant complaints/grievances in the file? | | | |
| 30. Annual/Interim HQS Inspection completed (if applicable) on time? | | | |
| 31. Any code related problems are corrected within the required time frame? | | | |
| E. UNIT CHARACTERISTICS | | | |
| 32. Do the units meet local housing quality requirements? (if applicable). | | | |
| 33. Do any of the tenants also receive project-based assistance? If yes, check to make sure the TBRA subsidy is not duplicative. | | | |
| 34. If the PJ chooses to set a payment standard that is not tied to the HUD-published Fair market Rent (FMR), the PJ has conducted a market analysis that show comparable non-assisted units have comparable rents to the unit under consideration. | | | |



TBRA Tenant File Checklist 08/05/03

| TBRA Rental Subsidy Files | | | | |
|--|-----------|--|--|--|
| Document | Check (X) | | | |
| Last Name and TBRA Project Number clearly indicated on tenant file | | | | |
| Set/up/Revision/Closeout forms marked "posted" | | | | |
| Formal and informal applications | | | | |
| Declaration of Citizenship or Birth Certificate for head of household | | | | |
| Social Security Card Copy | | | | |
| Original Income Release Form (signed and dated) | | | | |
| Current Income Release Form (Interim or Annual Recertification) | | | | |
| Third Party Income Verification Forms (signed and dated) | | | | |
| Signed Letter/Form from verifying disability status (if applicable) | | | | |
| Tenant Income Calculation Worksheet | | | | |
| Total Gross Income | | | | |
| Adjusted Monthly Income | | | | |
| • Utility Allowance (if Applicable) | | | | |
| Total Tenant Payment | | | | |
| Agency to Landlord Payment | | | | |
| • Disabled/Elderly family medical expenses documented. Amounts over 3% of | | | | |
| income deducted from gross annual income. | | | | |
| Elderly/Disabled Head of Household/Spouse \$400 Total Deduction | | | | |
| • Children under 18/Full time students/children over 18-\$480 each dependent | | | | |
| Letter/Notice of Annual Recertification (90-60-30 day as applicable) | | | | |
| Current Agency Utility Allowance Schedule (if applicable) | | | | |
| Coupon (signed and dated) | | | | |
| Tenant Briefing Date Documented | | | | |
| Signed and Dated LBP Disclosure form | | | | |
| Request for unit approval (signed and dated) | | | | |
| HQS Form signed and dated with "pass" rating (dated and signed) | | | | |
| Agency/Landlord Contract (signed and dated) | | | | |
| Copy of landlord/tenant lease (signed and dated) | | | | |
| Lease addendum for Second Year Lease (not applicable/month to month) | | | | |
| Notice of changes in subsidy letter to landlord and tenant (if applicable) | | | | |



TBRA Tenant File Checklist 08/05/03

| TBRA Security and Utility Deposit (only) Tenant File Checklist | | |
|---|-----------|--|
| Document | Check (X) | |
| Last Name and TBRA Project Number clearly indicated on tenant file | | |
| Set/up form marked "posted" | | |
| Formal and informal applications | | |
| Declaration of Citizenship or Birth Certificate for head of household | | |
| Social Security Card Copy | | |
| Original Income Release Form (signed and dated) | | |
| Third Party Income Verification Forms (signed and dated) | | |
| Request for unit approval (signed and dated) | | |
| HQS Form signed and dated with "pass" rating (dated and signed) | | |
| Signed and Dated LBP Disclosure form | | |
| Copy of landlord/tenant lease (signed and dated) | | |
| If Loan: | | |
| Agreement by tenant to repay security/utility deposit to agency when tenant moves | | |
| Security Deposit Receipt (may be indicated in landlord/tenant lease) | | |
| Utility Deposit Receipt (from vendor) | | |
| "Posted" Closeout Form | | |