

Exhibit Z - Housing Priority Certification

This certification is to be completed annually (refer to the Seasonal Reporting Schedule) in the Asset Management Reporting System (AMRS) Exhibit Z module. This form is to be used in cases where access to AMRS is unavailable.

Property Information			
Property Name:		Property Number:	
Property Address:			
Management Company:			
Property Service Provider/Lead Referral Agency (LRA):			
Housing Priority:			
Permanent Supportive Housing Set-aside (PSH)	Vulnerable Populations Set-aside (VP)	Service Enriched Housing (SE)	
Total Number of Units:			
Total Number of Households Currently Meeting the Set-aside Priority Requirements:			
Target Populations:			
Elderly households	Children of tenants	Individuals with children	Developmentally disabled
Formerly homeless individuals and families		Physically, emotionally, or mentally impaired	
Other:			

Changes		
Has the Set-aside Priority Agreement/MOU changed since Firm Submission? If yes, what changed and why?	Yes	No
Has the Service Enriched Supportive Services Plan Changed Since Firm Submission? If yes, what changed and why?	Yes	No

Referrals
The information in this section is to be provided by the MHDC approved LRA.
What is your referral process? Please include your screening and eligibility criteria for Set-aside units.
How is your referral process inclusive of persons with all types of disabilities or special needs?
Does your referral process include accepting referrals from other providers? Yes No If yes, describe the process for accepting referrals from other providers. If no, discuss the reason(s) why.

<p>Does your referral process include the management company? Yes No If yes, describe how. If no, discuss the reasons(s) why and provide plan of action.</p>
<p>How does the LRA manage the waiting list?</p>
<p>What is the LRA's process to notify local service providers when the waiting list is open?</p>

Occupancy

Note: Good faith efforts toward filling and maintaining set-aside units with qualified residents is expected. Evidence of regular, substantial, and continuous communication with the LRA must be documented. MHDC will verify evidence of ongoing communication between the Owner/Agent and the LRA to determine compliance.

<p>Did management notify the LRA within a timely manner (90 days) prior to occupancy certificate or when marketing began? Yes No If no, provide an explanation.</p>
<p>Does management have a process in place to notify the LRA when units will be available? Yes No If yes, describe how, if no discuss the reason(s) why and provide plan of action.</p>
<p>Describe the process to fill and maintain Permanent Supportive Housing / Vulnerable Population units after initial lease up (i.e., within 30 days)?</p>

Housing Priority Set-aside Lead Referral Agency and/or Service Enriched Provider

Please list requested information for all Housing Priority providers whether individuals or organizations.

Provider Name:	Onsite	Offsite
Address:	Phone Number:	
Contact Person:	Email:	
Provider Name:	Onsite	Offsite
Address:	Phone Number:	
Contact Person:	Email:	
Provider Name:	Onsite	Offsite
Address:	Phone Number:	
Contact Person:	Email:	

If off-site services are offered, how is transportation addressed?

What is used to document services or refusal of services?

Are services appropriate for the target population? Yes No
If yes, describe how. If no, discuss the reason(s) why and provide plan of action.

Additional comments:

For completion by permanent supportive housing properties only:

Does the LRA have a designated point of contact for residents and management?
If so, provide the name, number, address, and email for the designated point of contact. If not, discuss the reason(s) why.

Does the LRA have a plan for negotiating reasonable accommodations if necessary?
If so, describe below. If not, discuss the reason(s) why.

I acknowledge that during inspections and at other times if compliance needs to be verified, MHDC expects the property to have documentation available and on-site. This can include and is not limited to sign-in and/or attendance sheets, transportation logs, and notices provided to tenants about offered services.

Signature:

Date:

Print Name: