

XXIX. EMERGENCY HOUSING VOUCHERS (EHV)

References: PIH Notice 2021-15 EHV Requirements, EHV MOU, HUD Q&As for the EHV Program.

Awarded: 82 Emergency Housing Vouchers
Effective: July 1, 2021

A. EMERGENCY HOUSING VOUCHERS

On March 11, 2021, President Biden signed the American Rescue Plan Act of 2021 hereafter referred to in this plan as “the ARP” into law, which provides over \$1.9 trillion in relief to address the continued impact of the COVID-19 pandemic on the economy, public health, State and local governments, individuals, and businesses.

Section 3202 of the ARP appropriates \$5 billion for new incremental EHV, the renewal of those EHV, and fees for the cost of administering the EHV and other eligible expenses defined by notice to prevent, prepare, and respond to coronavirus and to facilitate the leasing of the emergency vouchers by providing housing search services, such as security deposit assistance and other costs related to retention and support of participating owners.

EHVs provide tenant-based rental assistance to assist individuals and families who are:

- experiencing homelessness,
- at risk of experiencing homelessness,
- fleeing, or attempting to flee, domestic violence, dating violence, sexual assault, stalking, or human trafficking, or
- were recently homeless and for whom providing rental assistance will prevent the family’s homelessness or having high risk of housing instability.

Unless expressly stated below, all statutory and regulatory requirements and HUD directives regarding the HCV program are applicable to EHV, including the use of all HUD-required contracts and other forms.

This chapter in the Administrative Plan sets forth the operating requirements for the EHV program.

B. EHV ADMINISTRATIVE FEES AND FUNDING FOR OTHER ELIGIBLE EXPENSES

CDC was allocated administrative fee funding for EHV administrative costs and for other EHV eligible expenses as described below. These fees may only be used for EHV administration and other eligible EHV expenses and must not be used for or applied to other rental assistance programs.

The administrative fees and other eligible expenses are as follows;

- 1. Preliminary Fee.** A single, one-time preliminary fee of \$400 per EHV allocated. This fee amount will be applied and used for the following activities/services;
 - anticipated immediate administrative start-up costs CDC incurs in the planning, development and implementation stages of the EHV program,
 - any other ongoing eligible administrative expenses related to EHV, and
 - any eligible activities listed under the EHV Services Fees listed in section 4 below.

- 2. Placement Fee/Expedited Issuance Reporting Fee.** Placement fees and expedited issuance reporting fees will be used for and applied to support initial lease-up costs as well as the added cost and effort required to expedite the leasing of the EHV. These fees may be applied to the costs for:
 - establishing and refining the direct referral process with CDCs partners,
 - any administrative costs incurred in the efforts to expedite the leasing process including, income determinations, family briefings, and voucher issuance,
 - costs incurred to report the issuance of the EHV to HUD ahead of the normally applicable reporting deadlines,
 - any eligible administrative expenses related to the EHV, and
 - to pay for any of the eligible activities listed under the EHV Services Fees in section 4 below.

CDC is eligible to receive the following placement and expedited issuance fees;

Issuance Reporting Fee: CDC will receive \$100 for each EHV placed under HAP contract, if the CDC reported the voucher issuance date to the Public Housing Information Center (PIC) within 14 days of issuance.

Placement Fee 1: CDC will receive a placement fee of \$500 for each EHV family placed under HAP contract between July 1, 2021 and October 31, 2021

Placement Fee 2: CDC will receive a placement fee of \$250 for each EHV family placed under HAP contract between November 1, 2021 and December 31, 2021.

The placement/expedited issuance reporting fee is only applicable to the initial time the voucher is leased CDC. The placement/expedited issuance reporting fee is not paid for subsequent lease ups (e.g. the family moves to another unit or the EHV participant leaves the program and the voucher is reissued to another family).

- 3. On-going Administrative Fee.** The on-going administrative fee for EHV is calculated in the same manner as the on-going administrative fee the CDC receives for the HCV program. CDC will be allocated the full Column A administrative fee amount for each EHV that is under HAP contract.

EHV ongoing administrative fees may be used for any eligible administrative expenses related to the EHV. These fees may also be used to pay for any of the eligible activities listed under the EHV Services Fees in section 4. below.

- 4. Services Fees.** CDC will be allocated a one-time service fee to support its efforts in implementing and operating effective EHV services which will best address the needs of the EHV eligible household in its jurisdiction. The amount allocated to CDC will be equal to \$3500 for each EHV allocated. The services fee amount is not tied to each voucher, but instead is the combined total of the service fees that are available to the CDC.

C. PARTNERSHIP WITH THE CoC AND MOU REQUIREMENTS

HUD established an alternative requirement under which the CDC must enter into a Memorandum of Understanding (MOU) with the Continuum of Care (CoC) to establish a partnership for the administration of the EHV.

The primary responsibility of the CoC under the MOU is to make direct referrals of qualifying individuals and families to the CDC. CoCs are responsible for determining whether the family qualifies under one of the four eligibility categories for the EHV program.

Additionally, CoCs are encouraged to offer or make connections to supportive services for families that are referred, including, but not limited to, short- or long-term case management, collecting necessary verifications to support referrals, housing counseling, housing search assistance and utility deposit assistance.

The specific services that the CoCs will provide to individuals or families referred for the EHV program will be outlined in the MOU with the CoC.

The MOU is a complete statement of the responsibilities of the parties and evidence of a commitment of resources to the EHV program. The MOU may be subsequently

amended in order to add, delete or change the MOU however the CoC must always retain the direct referral responsibility of the CoC.

D. DIRECT REFERRALS & EMERGENCY TRANSFERS

If at any time the CDC is not receiving enough referrals or is not receiving referrals in a timely manner from the CoC Coordinated Entry (CE) system or other partner referral agencies, the CDC will contact HUD for assistance. HUD may permit the CDC on a temporary or permanent basis to take EHV applications directly from applicants and admit eligible families to the EHV program in lieu of or in addition to direct referrals in those circumstances.

EHV families are issued EHV as the result of either:

1. The direct referral process from the CoC CE System and/or other partnering agencies,
2. A situation where the CDC makes an EHV available in order to facilitate an emergency transfer in accordance with the Violence Against Women Act (VAWA).

This includes cases where a HUD-assisted tenant reasonably believes that there is a threat of imminent harm from further violence if they remain within the same dwelling unit, or in the case of sexual assault, the HUD-assisted tenant reasonably believes there is a threat of imminent harm from further violence if they remain within the same dwelling unit that they are currently occupying, or the sexual assault occurred on the premise during the 90-day period preceding the date of the request for transfer.

The CE system identifies victims fleeing, or attempting to flee, domestic violence, dating violence, sexual assault, stalking or human trafficking. To identify a broader range of households meeting this definition CDC has also entered into a partnership with Project Sanctuary to receive additional direct referrals for these households.

Applicants under the “recently homeless” eligible category must by definition always be referred by the CoC. CDC must accept referrals for EHV directly from the Coordinated Entry (CE) system.

The CDC will refer a family that is seeking EHV assistance directly from the CDC to the CoC or other referring agency partner for initial intake, assessment, and possible referral for EHV assistance.

E. ELIGIBILITY CATEGORIES FOR DIRECT REFERRALS

In order to be considered by the CoC for referral for an EHV, an individual or family must meet one of the four ***eligible 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 family's homelessness or prevent the household from having a risk of housing instability.

Definitions and Verification Requirements for Eligible Categories

Verification that the household meets one of the four eligibility categories is conducted by the CoC or another partnering agency that makes direct referrals to the CDC for the EHV program.

If it is determined the household meets one of the four eligibility categories, the CoC or other partnering agency will verify the eligible category in accordance with the definitions below and provide CDC with certification upon eligibility determination.

The following lists the four eligibility categories and their definitional elements:

1. **Homeless.** Individuals and families who are homeless. The meaning and definition of "homeless" is as such a term as defined in section 103(a) of the McKinney-Vento Homeless Assistance Act (42 U.S.C. 11302(a)), which is codified in HUD's Continuum of Care Program regulations at 24 CFR 578.3.
2. **Individuals or families who are at-risk of homelessness**
The meaning of "at-risk of homelessness" is as such term is defined in section 401(1) of the McKinney-Vento Homeless Assistance Act (42 U.S.C. 11360(1)), which is codified in HUD's Continuum of Care Program regulations at 24 CFR 578.3.
3. **Individuals or families who are fleeing, or attempting to flee, domestic violence, dating violence, sexual assault, stalking or human trafficking**
This category is composed of any individual or family who is fleeing, or is attempting to flee:
 - domestic violence,
 - dating violence,
 - sexual assault,
 - stalking,
 - human trafficking, or
 - who qualifies as an emergency transfers (refer to section 4. b. above).

Domestic violence includes felony or misdemeanor crimes of violence committed by:

- 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), or
- a person with whom the victim shares a child in common, or
- a person who is cohabitating with or has cohabitated with the victim as a spouse or intimate partner, or
- a person similarly situated to a spouse of the victim under the domestic or family violence laws of the jurisdiction receiving grant monies, or
- 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:

- 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:
 - 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 age.

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.

4. Individuals or families who are recently homeless

This category is composed of individuals and families determined by the CoC to meet the following definition.

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.

Individuals and families classified as recently homeless must be referred by the CoC or its designee.

F. WAITING LIST NOTIFICATION REQUIREMENTS

CDC will inform families on the HCV waiting list of the availability of EHV by posting the information to the website.

The notice will describe the eligible populations to which the EHV are limited and clearly state the availability of these EHV is managed through a direct referral process. The notice will advise the family to contact the CoC if the family believes they may be eligible for EHV assistance.

In providing this notice, CDC will also ensure effective communication with persons with disabilities, including those with vision, hearing, and other communication-related disabilities and take reasonable steps to ensure meaningful access for persons with limited English proficiency.

CDC will notify applicants by mail who claimed the Domestic Violence preference or the homeless/disabled preference and who are listed on the regular HCV wait list and refer

such applicants with these preferences to the CoC or partnering referral agency. The CoC or partnering referral agency will determine if the family is eligible for an EHV based on the eligibility categories for the EHV program.

For any family or individual referred by the CDC to the CoC, the CoC will also determine if the family is eligible for other homeless assistance through the CE system.

G. OPENING AND CLOSING THE WAITING LIST

CDC will open and close the waiting list in the same manner the regular HCV waiting list is opened/closed. Because the EHV waiting list is based on direct referrals or requests through the CDC's VAWA emergency transfer plan CDC will work directly with its CoC and other referral agency partners to manage the number of referrals and the size of the EHV waiting list.

H. PREFERENCES

Under the HCV program, the CDC may establish a system of local preferences for the selection of families. The CDC has an existing set of local preferences for its HCV program that do not align with the specific targeted purpose of the EHV. Excluding EHV from the CDC's normally applicable local preference system will simplify EHV administration and ensure that EHV are not being prioritized based on preferences designed for the broad universe of HCV eligible applicants rather than the subset of EHV qualifying families.

The preference system prioritizes the order in which families on the EHV waiting list are assisted but does not allow the CDC to refuse to accept a referred family that meets one of the four EHV eligibility categories.

HUD is waiving § 982.207(b) and establishing an alternative requirement under which the CDC may not apply any residency preference to EHV applicants.

CDC will apply the following preferences to the EHV waiting list;

- **Recently Homeless – (100 preference points)**
Recently homeless as defined by the definition set for in PIH Notice 2021-15(HA) and the CoC. This preference will be verified by obtaining certification from the CoC or partner agency that the applicant meets the definition for this preference during the eligibility process.
- **Fleeing or Attempting to Flee, Domestic Violence, Dating Violence, Sexual Assault, Stalking, or Human Trafficking - (100 preference points)**
This category is composed of any individual or family who is fleeing, or is attempting to flee; domestic violence, dating violence, sexual assault, stalking, and/or human trafficking.

This preference will be determined applicable and verified automatically by a Project Sanctuary direct referral or, if referred by a CoC member agency by obtaining HUD form 5382, Certification of Domestic Violence, or other applicable documentation verifying the applicant meets the definition for this preference.

- **Seniors - (100 preference points)**

Any member of the household who is 55 years of age or older on the date the direct referral was submitted to CDC will qualify for this preference. This preference will be verified by a photo identification, birth certificate, other acceptable documentation or by self-certification from the applicant.

- **Families w/ Minor Children - (100 preference points)**

Families with a minimum of one minor child with at least 51% physical custody of said minor child will qualify for this preference.

This preference will be verified by self-certification in most cases. If the self-certification is not clear or otherwise determined unacceptable by the CDC, additional types of verification may be requested to confirm eligibility for this preference.

- **COVID 19 Risk Factors - (100 preference points)**

One or more COVID 19 risk factors identified in the EHV CE assessment and determined applicable by the case manager in accordance with the criteria set for by the CoC. CDC will verify this preference by the information listed in the CE system.

- **Veteran or Surviving Spouse of a Veteran (100 preference points)**

Households containing a veteran or the surviving spouse of a veteran of one of the regular armed forces of the United States Armed Forces. This preference will be verified by obtaining a DD214 or equivalent which verifies honorable discharge status or equivalent.

I. WAITING LIST AND SELECTION CRITERIA

CDC will maintain a separate waiting list for EHV referrals to help expedite the leasing process, both at initial leasing and for any turnover vouchers that may be re-issued prior to the September 30, 2023 the turnover voucher cut-off date.

If the EHV waiting list is open, applicants will be placed on the list upon the submittal of a direct referral from the CoC or partner agency which verifies the applicant meets one of the four eligible categories for the EHV program.

Applicants will be selected in order of date and time of the direct referral with consideration to the EHV preferences. CDC uses the aggregate method when determining what local preference holders are contacted first.

J. INCOME VERIFICATIONS AT ADMISSION - ALTERNATIVE REQUIREMENTS

CDC must determine whether an applicant family's income exceeds the applicable income limit as established by HUD in the jurisdiction where the family wishes to lease a unit.

For verification purposes, Notice PIH 2018-18 states that third-party generated documents be dated within 60 days of the PHA's request. For homeless families and other EHV eligible families, documentation may not be readily on-hand and may be difficult to obtain quickly.

Accepting self-certifications and allowing for the delay of receipt of documentation and/or third-party verification will allow the CoC/partnering agency to assist the family in obtaining the necessary documentation without unduly delaying the family's housing assistance.

HUD is waiving the third-party income verification requirements for EHV applicants and, alternatively, allowing CDC to consider **self-certification as the highest form of income verification at admission.**

Applicants must submit an affidavit attesting to reported income, assets, expenses and other factors which would affect an income eligibility determination.

Additionally, applicants may provide third-party documentation which represents the applicant's income within the 60-day period prior to admission or voucher issuance but is not dated within 60 days of the CDC'S request. For example, a Supplemental Security Income (SSI) benefit letter that was issued in November 2020 to represent the applicant's benefit amount for 2021 and was provided to the CDC in September 2021 would be an acceptable form of income verification.

Once HUD makes the EIV data available to CDC under this waiver and alternative requirement, the CDC will:

- review the EIV Income and Income Validation Tool (IVT) Reports to confirm/validate family-reported income within 90 days of the PIC- 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.

CDC will incorporate additional procedures to remind families of the obligation to provide true and complete information. CDC will be responsible for addressing any material discrepancies (i.e., unreported income or a substantial difference in reported income) that may arise later and must take necessary enforcement actions if the tenant was never eligible due to their income, as well as initiate HUD-compliant payment plans

for those whose unreported income was unintentional and do not make the tenant ineligible for the program accordingly.

If the CDC later determines that an ineligible family received assistance, the CDC must take steps to terminate that family from the EHV program.

K. VITAL DOCUMENTS AND ELIGIBLE IMMIGRATION STATUS - ALTERNATIVE REQUIREMENTS

HCV applicants must disclose and document and CDC must verify the social security numbers (SSN) of each applicant.

Applicant documentation may include a valid SSN card issued by the Social Security Administration; an original document issued by a federal or state government agency which contains the individual's name, SSN and other identifying information; or other evidence of the SSN as prescribed by HUD.

Generally, the CDC may not admit an applicant until the required documentation is provided to verify the SSN of each household member. CDC also must verify evidence of U.S. citizenship or eligible immigration status for noncitizens claiming eligibility for assistance. Each eligible household member must sign a declaration of their status and eligible noncitizens must also provide supporting documentation, which must be submitted by the time of the eligibility determination.

Since eligibility for assistance is limited to U.S. citizens and noncitizens who have eligible immigration status, families in which not all members are U.S. citizens or have eligible immigration status are only eligible to receive pro-rated housing assistance based on the percentage of family members who qualify for assistance.

Additionally, CDC must verify each family member's date of birth to verify identity and determine age and disability status per 24 CFR § 5.403, if claimed. These family characteristics impact the income and tenant rent calculations.

This documentation may not be readily on hand and may be difficult to obtain for individuals and families experiencing homelessness. Accepting self-certifications and delaying the receipt of documentation and/or third-party verification will allow the CDC to assist EHV families more quickly and provide time for the family (with assistance from the CoC or other partnering agencies) to obtain the necessary documentation.

HUD is consequently waiving the requirement to obtain and verify SSN documentation and documentation evidencing eligible noncitizen status before admitting the family to the EHV program.

As an alternative requirement, such individuals must provide the required documentation within 180 days of admission to be eligible for continued assistance, pending verification, unless CDC provides an extension based on evidence from the

family or confirmation from the CoC or other partnering agency that the family has made a good-faith effort to obtain the documentation.

Additionally, CDC may accept self-certification of date of birth and disability status if a higher level of verification is not immediately available. If self-certification is used, the CDC must obtain a higher level of verification within 90 days of admission.

CDC will be responsible for addressing any material discrepancies (i.e., erroneous SSNs) that may arise later and must take necessary enforcement actions accordingly. The adoption of this waiver does not authorize any ineligible family to receive assistance under these programs. If the CDC determines that an ineligible family received assistance, the CDC must take steps to terminate that family from the program.

L. INCOME TARGETING - ALTERNATIVE REQUIREMENT – WAIVER

The CDC must determine income eligibility for EHV families in accordance with § 982.201. However, the income targeting requirements of section 16(b) of the United States Housing Act of 1937 and § 982.201(b)(2) are waived and do not apply for EHV families so that participating PHAs can effectively serve individuals and families in all the eligibility categories under the ARP who may be at a variety of income levels, including low-income families.

The CDC may still choose to include the admission of extremely low-income EHV families in its income targeting numbers for the fiscal year in which these families are admitted.

M. DENIAL OF ADMISSIONS AND CRIMINAL HISTORY CRITERIA - ALTERNATIVE REQUIREMENTS

HUD is waiving §982.552 and § 982.553 in part and establishing an alternative requirement with respect to mandatory and permissive prohibitions of admissions for EHV applicants. The EHV alternative requirements for admission screening criteria are as follows:

Denial of Assistance – Mandatory Prohibitions

1. If any household member has ever been convicted of drug-related criminal activity for the manufacture or production of methamphetamine on the premises of federally assisted housing,
2. If any member of the household is subject to a lifetime registration requirement under a State sex offender registration program, and
3. The CDC must 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.

Alternative Criminal History Requirements for EHV's – Permissive Prohibitions

Households shall be denied admission for 12 months after the date of the most recent conviction of the following types of activities:

1. An applicant household will be denied admission if any household member is currently engaged in, or has engaged in within the previous 12 months:
 - Violent criminal activity including domestic violence, and court ordered restraining orders in which the perpetrator is the applicant. This includes restraining orders effective within the last 12-month period.
 - Other 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.

Both types of these activities will be verified by the CDC and a determination will be made based on a preponderance of evidence including; public criminal history records, self-certifications and any other document the CDC deems necessary in the consideration of this decision.

2. An applicant household will be denied admission if any member of the family has committed fraud, bribery, or any other corrupt or criminal act in connection with any Federal housing program within the previous 12 months.
3. If the family engaged in or threatened abusive or violent behavior toward CDC personnel within the previous 12 months as documented and verified by the CDC's records.

Permissive Prohibitions which are excluded for EHV's

CDC will not deny admission for the following reasons;

- Any member of the family has been evicted from federally assisted housing or if the CDC has ever terminated assistance under the program for any member of the family.
- The family currently owes rent or other amounts to the CDC or to another PHA in connection with Section 8 or public housing assistance under the 1937 Act.
- The family has not reimbursed any PHA for amounts paid to an owner under a HAP contract for rent, damages to the unit, or other amounts owed by the family under the lease.
- The family breached an agreement with the CDC to pay amounts owed to the CDC, or amounts paid to an owner by the CDC.
- The family would otherwise be prohibited admission under alcohol abuse standards established by the CDC in accordance with §982.553(a)(3).

Drug Related Criminal Activity: CDC will not deny admission if it is determined that any household member is currently engaged in or has engaged in drug-related criminal activity.

Similar to the HUD-Veterans Affairs Supportive Housing (HUD-VASH) program, HUD is eliminating the PHA's permissive prohibitions for EHV admissions for drug-related criminal activity. The eligible populations of homeless and at-risk of homelessness individuals and families may include individuals struggling with drug addiction, and that addiction may be one of the root causes of their homelessness.

As demonstrated by the "Housing First" model, providing the individual with safe housing may be a critical first step in helping the individual recover from addiction. Consequently, prohibitions based on criminal activity for the eligible EHV populations regarding drug possession will be considered apart from criminal activity against persons (i.e., violent criminal activity).

When adding a family member after the family has been placed under a HAP contract with EHV assistance, the same admission screening requirements for the HCV program apply.

N. INITIAL SEARCH TERM - ALTERNATIVE REQUIREMENT

The initial search term for an EHV household will expire at the end of 120 calendar days, with the opportunity for an additional 60 day extension. The same requirements regarding search time apply for the EHV program as the regular HCV program.

O. HOUSING SEARCH ASSISTANCE AND LANDLORD SERVICES

CDC offers and provides housing search assistance and services to *eligible individuals and families* while searching for a rental unit. The services listed below were designed to assist households in overcoming the key barriers to obtaining permanent housing. Services will be made available to eligible EHV households until funds are no longer available or have been exhausted.

1. IDENTIFYING UNITS

CDC will assist and help EHV families identify potentially available units during their housing search, including physically accessible units with features for family members with disabilities, as well as units in low-poverty neighborhoods.

Any administrative fees including the services fees can be used for the administration of these services.

2. TRANSPORTATION SERVICES

CDC may assist eligible families with transportation services, such as providing directions to units and arranging transportation to potentially available units upon

request. Transportation services may be provided to transport member(s) of the household to and from a meeting with a landlord, or for any other CDC authorized reason that may assist a family to successfully lease a unit with the EHV.

Prior to a family's approval for transportation services an informal assessment will be made. Based on CDC's needs assessment a determination will be made and transportation services may then be authorized.

3. ASSISTANCE WITH PAPERWORK AND EXPEDITED LEASING PROCESS

CDC may assist households with completing rental applications, forms, or any other document necessary to search for, or lease a unit as needed.

To ensure the leasing process is expedited CDC will stay in close communication with the applicant, case manager and landlord when a Request for Tenancy Approval is submitted. CDC will also provide an owner/landlord with enhanced customer service, identifying barriers and when applicable addressing those barriers with landlord incentives and retention payments. CDC may also conduct pre-inspections of units, attend lease signing meetings with the tenant and landlord, and be a direct liaison between all parties involved.

4. APPLICATION FEES

If a landlord/owner requires an application fee to be paid in order to process suitability for a unit, CDC may assist eligible families with such fees.

Households will be permitted a maximum of four application fees per person during their initial housing search.

5. SECURITY DEPOSIT ASSISTANCE

The maximum security deposit amount CDC may pay is equal to one month's rent for eligible families. Household's must contribute at least \$50.00 towards the total security deposit.

The security deposit paid by CDC will be granted to the family upon vacating the unit if the household remains in the assisted unit under HAP contract for twelve consecutive months. Upon vacating the unit, the owner/landlord will refund any remaining security deposit directly to the household in accordance with California tenant/landlord laws.

If the family vacates the unit **prior to twelve months**, any remaining security deposit paid by CDC must be refunded directly to CDC by the owner/landlord. If there are damages to the unit or additional disposition charges the owner/landlord must deduct all damage charges against any tenant paid security deposit before deducting damages from CDC paid security deposit. The

landlord must provide CDC with an itemized statement of the charges incurred in accordance with California tenant/landlord laws.

6. UTILITY DEPOSIT/ ARREARS ASSISTANCE

CDC may provide utility deposit assistance for eligible families in which a utility deposit would be determined a barrier in finding housing. Assistance can be provided for deposits (including connection fees) required for the utilities to be supplied by the tenant under the lease.

CDC will pay the utility deposit assistance directly to the utility company. The utility supplier will return the utility deposit assistance to the household at such time the deposit is returned by the utility supplier (less any amounts retained by the utility supplier).

In addition, some families may have large balances with gas, electric, water, sewer, or trash companies that will make it difficult if not impossible to establish services for tenant-supplied utilities. CDC may also provide the family with assistance to help address these utility arrears to facilitate leasing if no other option is available or the tenant is unable to obtain a payment arrangement to settle the debt.

CDC will require the family to provide a current statement, or similar documentation which confirms the household members name, the date, the utility company, the billing address, how much is owed, and a description of the amount owed. Once documentation is obtained and approved, CDC will take prompt and vigorous action to pay the utility company directly without delaying the leasing process.

CDC will contribute a maximum of \$500 in utility deposit/arrears assistance to the household. This assistance can be paid to one utility service provider or split - between multiple utility service providers. If the utility deposit/arrears is over \$500 CDC may consider the family's circumstances and the Housing Programs Manager may approve a larger amount.

7. MITIGATION/ RETENTION FUNDS

Landlord mitigation/retention funds may be available for landlords when tenants vacate the rental unit and amounts are owed to the landlord under the lease. These funds may be promised to a landlord as an incentive to rent to an EHV eligible family or as a landlord retention incentive when a landlord renews the lease or when a tenant vacates their rental unit.

Amounts owed under the lease may include amounts such as:

- Tenant move out damages and/or cleaning charges exceed the security deposit paid, and/or
- Past due rent is owed

Prior to any mitigation/retention assistance being paid for damages the owner/landlord must deduct all damages/charges from the paid security deposit. If it is determined the damages/charges are in excess of the security paid, the landlord will submit a security deposit disposition listing an itemized statement of the charges. To ensure the damages listed are beyond normal wear and tear CDC may schedule and inspect the premises after the household has vacated.

Prior to any mitigation/retention assistance being paid for past due rent the owner/landlord must provide sufficient records to verify the total amount owed, such as tenant ledgers, three-day notices and other similar documents.

A total of \$1,000.00 in amounts owed under the lease may be paid to a landlord on behalf of an EHV tenant.

8. LANDLORD INCENTIVE

CDC has committed EHV funds to support landlord incentive programs intended to encourage landlords to rent to EHV families.

These programs will support our landlords during these challenging times, allow CDC to recruit new landlords, and help retain current participating landlords. Programs may include incentives such as receiving cash bonuses for renting a unit to an eligible family, or as a recruitment measure to encourage program participation from a new landlord.

P. PAYMENT STANDARDS

Many rental markets with a high need for the EHV's are very competitive with a shortage of affordable rental units. EHV recipients who are homeless or at risk of homelessness may have relatively lower incomes than regular HCV recipients, limiting their ability to rent units with rents above the payment standard. In addition, landlords may be more reluctant to rent to homeless individuals who may have limited or poor credit history, a limited established rental history, or other issues.

Due to those factors and the emergency nature of these vouchers CDC has established a separate higher payment standard for the EHV's in order to increase the potential pool of available units for EHV families.

If CDC is increasing the regular HCV payment standard, the EHV payment standards will also increase if it would be otherwise lower than the new regular HCV payment standard.

Q. RENT REASONABLENESS

All rent reasonableness requirements at § 982.507 continue to apply to EHV units, regardless of whether CDC has established an alternative EHV payment standard.

R. PRE-INSPECTION OF HQS UNITS - ALTERNATIVE REQUIREMENT

CDC may pre-inspect available units that EHV families may be interested in leasing in order to maintain a pool of eligible units. If an EHV family selects a unit that passed an HQS inspection (without intervening occupancy) within 45 days of the date of the Request for Tenancy Approval (form HUD-52517), the unit may be approved as long as it meets all other conditions under § 982.305. However, the family must be free to select their unit and cannot be required to accept a pre-screened unit.

S. PORTABILITY

The normal HCV portability procedures and requirements generally apply to EHV's with the following exceptions.

1. No prohibition on portability for non-resident applicants. In order to provide maximum housing choice for the targeted EHV populations, CDC will allow nonresident EHV applicants to immediately move under portability.
2. Portability billing and absorption. A receiving PHA cannot refuse to assist an incoming EHV family, regardless of whether the receiving PHA does or does not currently administer EHV's.

If the EHV family moves under portability to another PHA that administers EHV's:

- The receiving PHA may only absorb the incoming EHV family with an EHV (assuming it has an EHV voucher available to do so). If the PHA does not have an EHV available to absorb the family, it must bill CDC. The receiving PHA must allow the family to lease the unit with EHV assistance and may not absorb the family with a regular HCV when the family leases the unit.

If the EHV family moves under portability to another PHA that does not administer EHV's, the receiving PHA may absorb the family into its regular HCV program or may bill the CDC.

Regardless of whether the receiving PHA absorbs or bills the CDC for the family's EHV assistance, the EHV administration of the voucher is in accordance with the receiving PHA's EHV policies.

3. Family briefing/initial PHA and receiving PHA coordination on services. In addition to the applicable family briefing requirements as to how portability works and how portability may affect the family's assistance, the CDC will inform the family how portability may impact the special EHV services and assistance that may be available to the family.

CDC will help facilitate the family's portability move to the receiving PHA and inform the family of this requirement in writing, taking reasonable steps to ensure:

- Meaningful access for persons with limited English proficiency (LEP), and
 - If the portability move is in connection with the EHV family's initial lease-up, the receiving PHA and the CDC must consult and coordinate on the EHV services and assistance that will be made available to the family. The primary purpose of this communication is to ensure there is no duplication of EHV services and assistance provided to the family and that the receiving PHA is aware of the maximum amount of services fee funding that the initial PHA may provide to the receiving PHA on behalf of the family.
4. EHV portability – HAP and EHV administrative fees and ongoing fees. The requirements at 982.355(e) apply to portability billing arrangements on behalf of an EHV family:
 - The initial PHA must promptly reimburse the receiving PHA for the full amount of the housing assistance payments made by the receiving PHA for the family.
 - The initial PHA must promptly reimburse the receiving PHA for the lesser of 80 percent of the initial PHA's EHV ongoing administrative fee or 100 percent of the receiving PHA's ongoing administrative fee (or the receiving PHA's EHV ongoing administrative fee if the receiving PHA administers the EHV program).
 - If both PHAs agree, the PHAs may negotiate a different amount of reimbursement.

Services Fee Funding for Portability: If the receiving PHA, in consultation and coordination with the initial PHA, will provide eligible services or assistance to the incoming EHV family, the receiving PHA may be compensated for those costs by the initial PHA. This is the case regardless of whether the receiving PHA bills the initial PHA or absorbs the family into its own program at initial lease-up.

If the receiving PHA administers EHV's, the receiving PHA may use its own services fee and may be reimbursed by the initial PHA, or the initial PHA may provide the services funding upfront to the receiving PHA for those fees and assistance.

If the receiving PHA does not administer EHV's, the initial PHA must provide the services funding upfront to the receiving PHA. Any amounts provided to the

receiving PHA that are not used for services or assistance on behalf of the EHV family must promptly be returned by the receiving PHA to the initial PHA.

The amount of the service fee provided by the initial PHA may not exceed the lesser of the actual cost of the services and assistance provided to the family by the receiving PHA or \$1750, unless the initial PHA and receiving PHA mutually agree to change the \$1750 cap.

Placement fee/issuance reporting fee for Portability: If the portability lease-up qualifies for the placement fee/issuance reporting fee, the receiving PHA receives the full amount of the placement component of the placement/issuance reporting fee.

The receiving PHA is eligible for the placement fee regardless of whether the receiving PHA bills the initial PHA or absorbs the family into its own program at initial lease-up. The initial PHA qualifies for the issuance reporting component of the placement fee, as applicable. Note that the entire preliminary fee is always paid to and retained by the initial PHA and is not impacted by an EHV portability move.

T. RE-ISSUANCE OF EHVS

If an EHV participating household ends participation with the program, the EHV may be re-issued to another applicant household up until September 30, 2023. After that date CDC may not re-issue the EHV to another applicant household, regardless of when the assistance for the formerly assisted household ends or ended.

After September 30, 2023, CDC may not reissue the EHV **when assistance for an assisted family ends**. This means that when an EHV participant (a family that is receiving rental assistance under a HAP contract) leaves the program for any reason, the CDC may not reissue that EHV to another family unless it does so no later than September 30, 2023.

For example, if an EHV participant leaves the program and their HAP contract terminates on August 31, 2023, that EHV must be reissued to another family no later than September 30, 2023. If the CDC does not reissue the EHV to another family by September 30, 2023, the EHV may not be reissued and effectively sunsets. Provided the EHV re-issuance date is no later than September 30, 2023, the term of the EHV may extend beyond September 30, 2023. However, if the family that was issued in this example is ultimately unsuccessful in finding a unit and that EHV expires after September 30, 2023, that EHV may not be reissued to another family.

All EHVs under lease on or after October 1, 2023, may not under any circumstances be reissued to another family when the participant leaves the program for any reason.

An EHV that has never been issued to a family may be initially issued and leased after September 30, 2023, since this prohibition only applies to EHV's that are being reissued upon turnover after assistance to a family has ended.

However, HUD may direct CDCs administering EHV's to cease leasing any unleased EHV's if such action is determined necessary by HUD to ensure there will be sufficient funding available to continue to cover the HAP needs of currently assisted EHV families.

While HUD anticipates most EHV's under the initial allocation would be leased by September 30, 2023, PHAs may have subsequently received a new allocation of EHV's as part of the recapture/reallocation process. HUD will remove any turnover EHV that cannot be reissued from the PHA's CACC as part of the next funding renewal process.