City of Houston Monthly Compliance Reporting Guidelines

Requirements

- Monthly occupancy reports are due the 15th of each month for the previous month's leasing activity.
  For example, leasing activity for December 1st thru the 31st should be submitted no later than January 15th.
- Monthly reports must be signed and dated upon submittal. Standard signatures are preferred; however, electronic signatures are accepted if emailed.
- Report should be filled out completely and only contain leasing activity pertaining to the month being reported.
- Only report leasing activity of the units where tenants have actually moved in to their respective units.

Filling out the Form

Header – fill out header on both Part A and Part B with the appropriate information in the requested fields.

Completing Part A of the Monthly Compliance Report

1) Part A of the compliance report will only allow you to input data in fields where data is needed, (necessary fields): "Occupied", "Vacant", "Over Income", and "Required". (Shaded Fields)

HOME Affordable Housing

Compliance Report

Part A - Compliance Report Summary

Date:

Period: / to /
mo. Yr. mo. Yr.

Contract # FC -

Property Name:
Street Address:
City, State, Zip:
Owner/Manager: Phone:
Preparer's Name: Phone:

PROPERTY SUMMARY						AGENCY USE ONLY
UNIT TYPE	NUMBER OF UNITS					COMPLIANCE STATUS (Requirements Met)
	Occupied	Vacant	Over Income	Total	Required	
1. Lower Income Units				0		a.
2. Very Low Inc. Units				0		b.
Total Qualifying Units	0	0	0	0	0	c.
3. Unrestricted Units				0		d.
Total All Units	0	0	0	0	0	e.
Percent %					100%	f.

I/We (owner) relied in good faith upon information supplied by the occupants and verified the information provided. I/We certify that data presented in this report is accurate to the best of our knowledge.

2) Once data is entered into necessary fields, the “total” columns and rows will automatically calculate. Totals will automatically calculate correctly. (Shaded Fields)

SAMPLE A:

Totals calculated correctly , but data was not entered correctly. Total should equal , required

HOME Affordable Housing

Compliance Report

Part A - Compliance Report Summary

Date:

Period: / to /
mo. Yr. mo. Yr.

Contract # FC -

Property Name:
Street Address:
City, State, Zip:
Owner/Manager: Phone:
Preparer's Name: Phone:

PROPERTY SUMMARY						AGENCY USE ONLY
UNIT TYPE	NUMBER OF UNITS					COMPLIANCE STATUS (Requirements Met)
	Occupied	Vacant	Over Income	Total	Required	
1. Lower Income Units	60	180	0	240	240	a. No
2. Very Low Inc. Units	11	49	0	60	60	b. No
Total Qualifying Units	71	229	0	300	300	c. No
3. Unrestricted Units	517	0	0	517	288	d. No
Total All Units	588	229	0	817	588	e. No
Percent %	100.00	38.95	0.00	138.95	100%	f. No

I/We (owner) relied in good faith upon information supplied by the occupants and verified the information provided. I/We certify that data presented in this report is accurate to the best of our knowledge.

3) Once all the necessary fields are populated (including the "required" column) the “percentages” and the “compliance status” will, also, automatically calculate. (Shaded Fields)

SAMPLE B:

Completed Correctly , but property is not in compliance

HOME Affordable Housing

Compliance Report

Part A - Compliance Report Summary

Date:

Period: / to /
mo. Yr. mo. Yr.

Contract # FC -

Property Name:
Street Address:
City, State, Zip:
Owner/Manager: Phone:
Preparer's Name: Phone:

PROPERTY SUMMARY						AGENCY USE ONLY
UNIT TYPE	NUMBER OF UNITS					COMPLIANCE STATUS (Requirements Met)
	Occupied	Vacant	Over Income	Total	Required	
1. Lower Income Units	60	180	0	240	240	a. No
2. Very Low Inc. Units	11	49	0	60	60	b. No
Total Qualifying Units	71	229	0	300	300	c. No
3. Unrestricted Units	288	0	0	288	288	d. Yes
Total All Units	359	229	0	588	588	e. Yes
Percent %	61.05	38.95	0.00	100.00	100%	f. Yes

I/We (owner) relied in good faith upon information supplied by the occupants and verified the information provided. I/We certify that data presented in this report is accurate to the best of our knowledge.

4) If the property is in complete compliance a, b, and c under "Compliance Status" will read, **Yes** *and* the "percentage" "total" will read **100.00.** (Shaded Fields)

SAMPLE C:

Completed correctly, and property is in compliance! Unrestricted Units do not have to have all the "required" units for the property to be in compliance

HOME Affordable Housing

Compliance Report

Part A - Compliance Report Summary

Date:

Period: / to /
mo. Yr. mo. Yr.

Contract # FC -

Property Name:
Street Address:
City, State, Zip:
Owner/Manager: Phone:
Preparer's Name: Phone:

PROPERTY SUMMARY						AGENCY USE ONLY
UNIT TYPE	NUMBER OF UNITS					COMPLIANCE STATUS (Requirements Met)
	Occupied	Vacant	Over Income	Total	**Required**	
1. Lower Income Units	240	0	0	240	240	a. Yes
2. Very Low Inc. Units	60	0	0	60	60	b. Yes
Total Qualifying Units	300	0	0	300	300	c. Yes
3. Unrestricted Units	258	30	0	288	288	d. No
Total All Units	558	30	0	588	588	e. Yes
Percent %	94.90	5.10	0.00	100.00	100%	f. Yes

I/We (owner) relied in good faith upon information supplied by the occupants and verified the information provided. I/We certify that data presented in this report is accurate to the best of our knowledge.

REFERENCE NOTES

Unit Type and Percentages

- #1. Lower Income Units: Occupied + Vacant+ Over Income = Total
- #2.Very Low Inc. Units: Occupied + Vacant+ Over Income = Total
- #3. Unrestricted Units: Occupied + Vacant = Total
  ("Over Income", does not apply to Unrestricted Units)
- If the "Percentage" "Total" reads, more than or less than 100.00, entered data has inaccuracies. ***(Refer to Sample A)***
- Totals should not equal more than the required amounts.

Compliance Status Section

- a.= value of Yes, if the total "*Occupied*" units for "Lower Income Units" is greater than or equal to the " Required".
- b.= value of Yes, if the total "*Occupied*" units for "Very Low Inc. Units" is greater than or equal to the "Required".
- c.= value of Yes, if the "Occupied" ,"Total Qualifying Units" is greater than or equal to the "Required".
  (Total Occupied Qualifying Units + Total Vacant Qualifying Units = Total Qualifying Units)

- d. = value of Yes, if the "Occupied", "Unrestricted Units" is equal to "Required". Unrestricted units are not a focus for compliance; however, should read as Yes for accuracy. ***(Refer to Sample B)*** ***(Total All Units - Total Qualifying Units = Unrestricted Units)***

- e. = value of Yes, if "Total All Units" " Total" is equal to "Required". If these two do not equal, entered data has inaccuracies ***(Refer to Sample A).*** " Total All Units" " Total" is the total number of units management has on the overall property, regardless of classification.

- f. = value of Yes, if "Percentage" "Total" is equal to "Required". ***(Refer to Sample B & C)***

Completing Part B of the Monthly Compliance Report

Using the supplied unit qualification key (located on the CODES tab) and property leasing information fill out the following fields on Part B as such:

Column	Title	Description
A	Unit	Enter unit number of the restricted unit being reported.
B	Tenant Name	Enter the tenant's name in this field. The format of the name is at the discretion of the preparer. (last name, first name/ last name/ first name last name)
C	Low or High Program units	This field will automatically designate the reported unit as High or Low and does not require any input.
D	# of Bedrooms	Enter the number of bedrooms for the respective unit as indicated on the T.I.C..
E	# of Persons	Enter the number of persons residing in the respective unit as indicated on the T.I.C..
F	Date of Lease or Move-Out	Enter the actual date of tenant move in as indicated on the T.I.C. . If the tenant has moved out that month please enter the move out date and place vacant in the last name field.
G	Unit Designation	Denote the unit restriction by entering the correct number supplied by the key.
H	Tenant Annual Gross Income	Enter the household's annual gross income as calculated on their T.I.C.
I	Max Eligible Annual Income	Using the appropriate program published income limits, enter the max income limit for the reported unit in this field.
J	Housing Assistance Payments	If the tenant is receiving rental assistance from the income sheet place the amount in this field. (i.e. sec 8, vouchers)
K	Tenant Paid Portion	Place the amount the tenant pays out of pocket in this field.

Column	Title	Description
L	Actual Rent	This field is calculated automatically and does not require any input.
M	Max Program rent	Using the appropriate program published rent limits, enter the max rent limit for the reported unit in this field. Note: If the property is layered with other programs, the rent limit will be the lowest limit of the programs.
N	Local Utility Allowance	Enter the current area utility allowance.
O	Max Actual Rent	This field is calculated automatically and does not require any input.
P	Date of Last Income Certification	Enter the most current date the tenant's income was last certified. Certifications are only valid for one year.
Q	Hispanic Y/N	Place a "Y" in this field if the tenant is Hispanic/Latino otherwise place a "N" in the field.
R	Household Race	Using the key on the CODES tab enter the tenant's race.
S	Household Type	Using the key on the CODES tab enter the household type.
T	Assistance Type	Using the key on the CODES tab enter the assistance type.
U	Special Needs	Using the key on the CODES tab specify if the unit is classified as any of the listed special needs.