

Memorandum



Date: September 2, 2008

To: Honorable Chairman Bruno A. Barreiro
and Members, Board of County Commissioners

Agenda Item No. 8(G)(1)(A)

From: George M. Brygers
County Manager

A handwritten signature in black ink, appearing to read "Brygers", written over the printed name of George M. Brygers.

Subject: Resolution Approving Miami-Dade Housing Agency's Public Housing
Admission and Continued Occupancy Policy (ACOP)

The attached Miami-Dade Housing Agency's (MDHA) Public Housing Admission and Continued Occupancy Policy (ACOP) is presented for consideration by the Board of County Commissioners (BCC) as requested by the US Department of Housing and Urban Development (US HUD) Oversight Administrator in charge of MDHA. With the BCC's approval, the US HUD Oversight Administrator will submit the ACOP to US HUD for final approval.

On October 26, 2007, US HUD executed a Settlement Agreement (Agreement) with Miami-Dade County, which authorized US HUD to take temporary possession of MDHA for a period of nine months. The ACOP has been revised to reflect changes authorized by the US HUD Oversight Administrator, during the time of US HUD's temporary possession.

Scope

The ACOP impacts the Public Housing program administered by MDHA. Other housing authorities exist within Miami-Dade County, such as Hialeah Housing Authority, Housing Authority of the City of Miami Beach, and Homestead Housing Authority, which administer their own Public Housing programs with their own ACOP.

Fiscal Impact

Adoption of the ACOP will not have a fiscal impact to the County. The ACOP sets guidelines for tenant eligibility and admissions, and does not deal with the request for federal funds to support public housing operations.

Background

Pursuant to the federal regulations promulgated by US HUD, each public housing agency is to adopt and implement policies and procedures for its Public Housing program on an as-needed basis, which shall include but not be limited to tenant selection and assignment process. Once the ACOP is approved by the BCC, as the legislative governing body, it is submitted to US HUD. The BCC approved the current ACOP on July 10, 2007 through Resolution R-800-07.

The purpose of the ACOP is to establish guidelines for MDHA to follow in determining eligibility for tenant admission and continued occupancy for the public housing program. These guidelines are governed by the requirement set forth by US HUD in conjunction with local policies and procedures. These policies and procedures for admissions and continued occupancy are binding upon applicants, residents and MDHA.

The major revisions to the ACOP presented for Board consideration are:

Chapter II – Eligibility for Admissions and Processing Applications

- **Submission of Applications:**
MDHA is stating that applications will be accepted on-line through MDHA's website. Assistance with the on-line submission will be available at locations throughout Miami-Dade County.
- **Denial of Assistance:**
The new policy proposes to deny assistance whether the person has been arrested or convicted. MDHA is recommending deleting the Conditions Section, which spells out that criminal activity includes being considered guilty, convicted, nolo contendere, fined, adjudicated or adjudicated withheld. MDHA is also recommending the revision to the time periods that an applicant can be denied:
 - ✓ MDHA is recommending a ten year ban from participating in public housing for criminal activities under the One Strike rule, which includes drug-related crimes, violent crimes, and non-violent crimes that may threaten the health, safety or right to peaceful enjoyment of the premises by other residents, including alcohol abuse or a pattern of alcohol abuse.
 - ✓ MDHA is recommending five years for non-criminal activities related to not meeting financial obligations, such as paying rent and utilities.

The current policy notes specific crimes that are subject to a ten-year ban. Those crimes are first and second degree murder, arson, kidnapping, or violent sex related offenses except those that are subject to a lifetime registration as a sex offender. The current policy notes specific crimes and circumstances that require a five-year ban. Those conditions are eviction from public housing for drug-related or violent crimes, as well as manslaughter, some sex offenses, or non-murder violent criminal activities. Finally, the current policy has specific circumstances when there is a three-year ban from participation. Some of those specifics are eviction or termination from housing programs for reasons other than drug or violent crimes, and alcohol abuse.

Chapter V – Transfer Policy

- The ACOP distinguishes between "Management Initiated Transfers" and "Resident Initiated Transfers." Management Initiated Transfers must be initiated by the site managers in cases of emergency and to correct overhoused or underhoused conditions. MDHA is recommending that Resident Initiated Transfers are limited to requests made to accommodate a disability.

This changes because the existing policy allows residents to request transfers for reasons other than disabilities.

Chapter VIII - Lease Termination Procedures

- **General Policy for Lease Termination:**
MDHA is recommending changing one of the reasons for lease termination to include "the issuance of one 14-day notice of termination for non-payment of rent in any twelve-month period."

The current policy allows three 14-day notices within any twelve month period to be issued to a resident on non-payment of rent before an eviction will be filed for consistent non-payment issues. Nothing in the current policy precludes the Agency from taking action for non-payment of rent prior to the issuance of three 14-day notices. This suggests that training on the issue is needed to ensure that the proper procedures are followed. This is a procedure issue and not a policy issue.

Honorable Chairman Bruno A. Barreiro
and Members, Board of County Commissioners
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Additional Information

The ACOP was distributed to the Public Housing's Resident Advisory Board (RAB) for input and comments. The ACOP is also posted on MDHA's website. No written comments were received from the RAB.

Attachments



Cynthia W. Curry
Senior Advisor to the County Manager



MEMORANDUM

(Revised)

TO: Honorable Chairman Bruno A. Barreiro
and Members, Board of County Commissioners

DATE: September 2, 2008

FROM: 
R. A. Cuevas, Jr.
County Attorney

SUBJECT: Agenda Item No. 8(G)(1)(A)

Please note any items checked.

- "4-Day Rule" ("3-Day Rule" for committees) applicable if raised
- 6 weeks required between first reading and public hearing
- 4 weeks notification to municipal officials required prior to public hearing
- Decreases revenues or increases expenditures without balancing budget
- Budget required
- Statement of fiscal impact required
- Bid waiver requiring County Manager's written recommendation
- Ordinance creating a new board requires detailed County Manager's report for public hearing
- Housekeeping item (no policy decision required)
- No committee review

Approved _____ Mayor
Veto _____
Override _____

Agenda Item No. 8(G)(1)(A)

9-2-08

RESOLUTION NO. _____

RESOLUTION APPROVING THE MIAMI-DADE HOUSING AGENCY PUBLIC HOUSING ADMISSION AND CONTINUED OCCUPANCY POLICY (ACOP); AUTHORIZING THE US HUD OVERSIGHT ADMINISTRATOR TO SUBMIT SAID ACOP TO U.S. DEPARTMENT OF HOUSING AND URBAN DEVELOPMENT FOR APPROVAL ON BEHALF OF MIAMI-DADE COUNTY; AND AUTHORIZING THE US HUD OVERSIGHT ADMINISTRATOR TO MODIFY AND APPROVE CHANGES TO THE ACOP AS REQUIRED BY REGULATORY AMENDMENTS OR COURT RELATED CHANGES

WHEREAS, this Board desires to accomplish the purposes outlined in the accompanying memorandum, a copy of which are incorporated herein by reference; and

WHEREAS, a copy of the Public Housing Admission and Continued Occupancy Policy (“ACOP”) is attached hereto and incorporated herein by reference; and

WHEREAS, MDHA is responsible for providing safe, decent and sanitary affordable housing opportunities to the income groups defined by the United States Department of Housing and Urban Development (“US HUD”) as extremely low, low, and very-low income residents living in public housing; and

WHEREAS, the US HUD has taken temporary possession of MDHA pursuant to the Agreement executed between US HUD and the County October 26, 2007; and

WHEREAS, but for US HUD taking temporary possession of MDHA, this Board authorize the Mayor or his designee to submit the ACOP to US HUD for final approval; and

WHEREAS, pursuant to the Agreement, the HUD Oversight Administrator is authorized to submit the ACOP to US HUD on the County’s behalf,

NOW, THEREFORE, BE IT RESOLVED BY THE BOARD OF COUNTY COMMISSIONERS OF MIAMI-DADE COUNTY, FLORIDA that this Board approves MDHA's ACOP; authorizes the US HUD Oversight Administrator to submit said ACOP to the U.S. Department of Housing and Urban Development on behalf of Miami-Dade County; and authorizes the US HUD Oversight Administrator to modify and approve changes to the ACOP as required by regulatory amendments or court related changes.

The foregoing resolution was offered by Commissioner _____, who moved its adoption. The motion was seconded by Commissioner _____ and upon being put to a vote, the vote was as follows:

Bruno A. Barreiro, Chairman	
Barbara J. Jordan, Vice-Chairwoman	
Jose "Pepe" Diaz	Audrey M. Edmonson
Carlos A. Gimenez	Sally A. Heyman
Joe A. Martinez	Dennis C. Moss
Dorrin D. Rolle	Natacha Seijas
Katy Sorenson	Rebeca Sosa
Sen. Javier D. Souto	

The Chairperson thereupon declared the resolution duly passed and adopted this 2nd day of September, 2008. This resolution shall become effective ten (10) days after the date of its adoption unless vetoed by the Mayor, and if vetoed, shall become effective only upon an override by this Board.

MIAMI-DADE COUNTY, FLORIDA
BY ITS BOARD OF
COUNTY COMMISSIONERS

HARVEY RUVIN, CLERK

By: _____
Deputy Clerk

Approved by County Attorney as
to form and legal sufficiency.



Terrence A. Smith



MIAMI-DADE HOUSING AGENCY

ADMISSIONS AND CONTINUED OCCUPANCY POLICY (ACOP) 2008 Revision

EFFECTIVE: _____

This material is available in accessible format upon request. Please call the ADA Coordinator at 305-644-5187 (telephone) or Florida Relay Service (800) 955-8771 (TDD/TTY).

ADMISSIONS AND CONTINUED OCCUPANCY POLICY

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Admissions and Continued Occupancy Policy

I. Program Administration

A. Purpose of the Admission and Continued Occupancy Policy

This Admission and Continued Occupancy Policy (ACOP) is a supporting document to Miami-Dade Housing Agency's Public Housing Agency (PHA) Plan. It shall be available for public review during regular office hours Monday through Friday at its main administrative offices located at 1401 NW 7 Street, and at the Public Housing Regional and Site Offices.

The purpose of the ACOP is to establish written policies in accordance with United States Department of Housing and Urban Development (USHUD) regulations and in regards to matters not covered under the USHUD regulations, but left to local discretion for the Public Housing Program, as established by the United States Housing Act of 1937. The regulations that govern these programs are documented in 24 Code of Federal Regulations (CFR) Parts 5, 960, 966 and other applicable regulations promulgated by the USHUD.

B. Miami-Dade Housing Agency (MDHA)

Miami-Dade County, the local government entity responsible for affordable housing programs, administers assisted housing programs through one of its departments, the Miami-Dade Housing Agency, hereafter referred to as the "Agency" or "MDHA". Although the Agency has responsibility for all day-to-day operations of the Public Housing programs, any revisions to this ACOP after its adoption, require approval from the Board of County Commissioners and/or other authorized MDHA officials.

Administration of the Public Housing programs shall comply with applicable Federal, State and local law, the Public Housing regulations, handbooks, and policies promulgated by the USHUD, and other federal laws including the Fair Housing Act, as amended, The Civil Rights Act of 1964, as amended, Section 504 of the Rehabilitation Act of 1973, as amended, and Section 3 of the Housing and Urban Development Act of 1968, as amended.

C. Ann Marie Adker, et al v. Miami-Dade County and USHUD, Decree

Ann-Marie Adker and other public housing residents filed a lawsuit against USHUD and Miami-Dade County asserting claims of violations of fair housing and civil rights laws. Without admission of any liability, the County and USHUD agreed to resolve all outstanding claims the plaintiffs had against them and a Decree was entered on October 28, 1998 by the District Court. The term of the Decree is ten (10) years, effective from the date the Fair Housing Center, established pursuant to the Decree, began its operations. The Decree will expire on August 2, 2009.

In addition, the County executed a Voluntary Compliance Agreement (VCA) with USHUD, which requires the County to address deficiencies identified in MDHA's housing, non-housing, (i.e., common entrances, management offices, laundry rooms common areas, corridors, hallways, elevators, community programs and day care facilities,) and administrative offices. The County/MDHA is required to construct or convert a minimum of 5%, i.e., 478 of its 9,543 total housing units to comply with Section 504, Title II of the ADA, the Uniform Federal Accessibility Standards (UFAS), the Fair Housing Act and the Architecture Barriers Act.

The County/MDHA is also required to ensure that non-housing programs are accessible to persons with disabilities, including, but not limited to all common areas, accessible routes, management and regional offices (including restrooms), laundry room mail delivery, trash disposal, meeting rooms, recreation rooms, community center (including restrooms) and day care centers (including restrooms).

In addition to the structural changes, MDHA was required and has implemented a Reasonable Accommodation Policy, which is incorporated by reference and included herein as Appendix IV.

This ACOP incorporates and implements the provisions of the Decree and the VCA on applicant processing, tenant selection, placement and waiting lists management. Nothing contained herein is intended to modify, amend or replace any provision of the Decree and the VCA. Wherever conflicts may occur between both documents, the provisions of the Decree and the VCA shall govern.

D. Fraud and Crime Control Program

MDHA investigates allegations of fraud or illegal activity committed by housing program applicants and residents. Incidents of fraud or illegal activity may be reported by calling MDHA's fraud hotline number at 305-644-5302. All calls are confidential and callers may remain anonymous.

Additionally, USHUD's Office of the Inspector General (OIG) has established a satellite office at MDHA's Central Office to investigate allegations of housing fraud. The Inspector General accepts calls from staff and the general public. Calls are confidential and all information received is handled by the Inspector General. USHUD-OIG fraud hotline number is 305-644-5300.

Miami-Dade County's OIG also works in conjunction with MDHA to prevent and eliminate crime and fraud in MDHA housing programs. MDHA may refer cases to Miami-Dade County's OIG, or any other local law enforcement agency with jurisdiction to investigate housing fraud, criminal and fraud cases for prosecution and collection of debt, if applicable. Miami-Dade County's OIG representatives will attend grievance hearings as required, when MDHA proposes to deny admission or terminate tenancy regarding cases they have investigated or prosecuted.

In an effort to maintain crime control in MDHA's public housing developments, each site manager shall establish a "no trespass" listing of persons who have been terminated for drug, violent and non-violent criminal activities, including domestic violence. Such list must be included in MDHA's shared drive and be posted in conspicuous places in each development.

E. Assistance to Limited English Proficiency (LEP) Persons

MDHA is committed to ensuring the accessibility of its program and activities to all eligible applicants and program participants. MDHA staff shall provide high quality customer service to LEP persons, as follows:

- ✓ Identified Spanish and Creole as the non-English languages used by over five (5%) percent of its program's participants.

- ✓ Staff members fluent in Spanish and Creole will assist LEP applicants and residents with issues related to MDHA's housing programs and by providing information about the resources available for LEP families and how to access those resources.
- ✓ Vital documents, letters and signs to be posted in public places are translated into Spanish and Creole.

II. Eligibility for Admission and Processing of Applications

A. Affirmative Marketing

MDHA will take affirmative steps to further fair housing goals by developing a marketing plan that attracts and ensures inclusion on its waiting list of all persons without regard to race, national origin, color, sex, religion, age, disability, familial and marital status, ancestry or sexual orientation.

The opening of the waiting list will be advertised at a minimum in each of the following newspapers: *The Miami Herald*, the largest paper of daily general circulation; *The Miami Times*, the paper with the largest circulation among African-Americans; *Diario Las Americas*, a Spanish publication, the *Haiti en March*, a Haitian publication, and *The Voice*, a publication for disabled persons. The opening and closing dates of any open waiting list period will be advertised a minimum of two (2) weeks in advance.

1. Outreach to Very-Low Income Families.

Efforts will be taken for special outreach to ensure that all segments of Miami-Dade County's eligible population are informed of all opportunities to apply for program assistance. In order to reach the widest, most needy eligible population, special outreach may take any of the following methods:

- Notice to churches, synagogues, and other places of worship,
- Notice to government offices including Miami-Dade County regional libraries, Team Metro Offices, Miami-Dade County Department of Human Services, Social Security Administration, State of Florida Department of Children and Families or other agencies designed to assist the low income community;
- Notice to agencies that assist the elderly or disabled;
- Public service announcement on radio or television;
- Announcement at public meetings; and
- Any other methods deemed appropriate to increase the scope of outreach for eligible applicants.

In accordance with the Decree, MDHA will consult with the Fair Housing Center (see definition in Appendix I of this ACOP) on MDHA's affirmative marketing plan before implementation.

2. Marketing and informational materials will:

- Comply with Fair Housing Act requirements on wording, logo, size of type, etc.;
- Describe the housing units, application process, waiting list and preference structure accurately;
- Use clear and easy to understand terms and distribute in more than English-language print media;
- Contact agencies that serve potentially qualified applicants least likely to apply (e.g. the disabled) to ensure that accessible/504/ADA-adaptable units are offered to applicants who need their features;
- Make clear who is eligible: low income individuals and families; working and non-working people; and people with both physical and mental disabilities; and

- Be clear about MDHA's responsibility to provide reasonable accommodations to people with disabilities.

B. Qualifying for Admission

1. It is MDHA's policy to admit into its housing programs only qualified applicants.
2. An applicant is qualified if he or she meets all of the following criteria:
 - Is a family, as defined in Appendix I of this ACOP..
 - Meets USHUD requirements on citizenship or immigration status as described in item # 3 below;
 - Has an Annual Income (as stated in Chapter XII of this ACOP) at the time of admission that does not exceed the income limits (maximum incomes by family size established by USHUD) posted in MDHA offices;
 - Provides documentation of Social Security numbers for family members age six (6) or older, or certifies that they do not have Social Security numbers, as described in item # 4 below; and
 - Meets the Applicant Selection Criteria in Chapter II, Sections G, H, I, J, K & L of this ACOP, including completing a MDHA-approved pre-occupancy orientation session, if requested;
3. Citizenship or Eligible Immigration Status

In order to receive housing assistance, at least one member of the applicant family shall be a U.S. citizen or have eligible immigration status. Details of the requirements are described below:

- a. As long as one family member is either a citizen or an eligible immigrant, the family will qualify as a "mixed family" and will have their housing assistance pro-rated, which means they will pay a higher rent than they would if all family members were either citizens or eligible immigrants (24 CFR 5.508).
- b. MDHA requires all participant families receiving assistance on June 19, 1995 or after November 29, 1996 to provide written documentation of legal immigration status. At the time of annual re-certification or interim certification any new family member shall provide written proof of immigration status for verification by MDHA. All family members must submit proof as follows:
 - Citizens - Signed declaration of U.S. citizenship. MDHA requires verification of citizenship through U.S. passport, voter registration card, birth certificate, or naturalization papers for any family member asserting U.S. citizenship.
 - Non-citizens sixty two (62) years of age and older as of June 19, 1995 - Signed declaration of eligible immigration status and proof of age.
 - All other non-citizens - Signed declaration of eligible immigration status and specified acceptable U.S. Immigration and Naturalization Service (INS) documents of eligible immigration status.
- c. Documentation proving citizenship or eligible immigration status must be provided to MDHA within the prescribed period of time. MDHA may extend the submission period not to exceed thirty (30) days. The family is required to submit evidence of eligible status only once while being continuously assisted under the program.

MDHA shall verify with INS through primary, and if necessary, secondary verifications of documentary evidence submitted by the family to determine the eligibility of each family member.

- d. Once the applicant or participant has submitted the documents of eligibility, MDHA may not deny, delay or terminate assistance solely on the basis that the primary or secondary verification of the immigration documents has not been completed.
- e. In circumstances where INS has not verified eligibility, the family will be provided with a written notice that shall include:
 - That the family has a right to request an appeal to INS of the results of the verification of immigration status;
 - That the family has the right to request an informal hearing with MDHA upon completion of the INS appeal. Such hearing shall be in accordance with hearing procedures in Chapter IX of this ACOP;
 - That housing assistance may not be denied or terminated until the conclusion of the INS or MDHA appeal process; and
 - Notification of the type of assistance for which the family may be eligible (continued assistance, temporary deferral of assistance or pro-ration of assistance).

4. Mandatory Social Security Numbers

- a. Families are required to provide verification of social security numbers for all family members age six (6) and older prior to admission, if they have been issued a number by the Social Security Administration. This requirement also applies to persons joining the family after admission to the program, including a live-in aide.
- b. Persons who have not been issued a social security number must sign a certification attesting that they have not yet been issued a social security number.
- c. Persons who disclose their social security number but cannot provide verification must sign a certification and provide verification within sixty (60) days. Elderly persons (as defined in Appendix I of this ACOP) must provide verification within one hundred and twenty (120) days.
- d. For minors, the above certifications must be signed by a parent or legal guardian.
- e. Social security numbers are verified through a valid social security card, or by any other official document showing the social security number, including but not limited to Internal Revenue Service (IRS) records and IRS Form 1099.
- f. Failure to furnish verification of social security numbers is grounds for denial or termination of assistance.

5. Legal Capacity:

The head of household of the family must be eighteen (18) years of age or older at the time of application, or have been emancipated by a court of competent jurisdiction, consistent with Florida law, otherwise the family will be removed from the waiting list. The head of

household must have the capacity under state and local law to enter into a legally binding lease agreement, in which the tenant is bound by the terms of the lease.

C. Waiting List Management

In accordance with the Decree, the waiting list has been organized into two (2) separate waiting lists: one (1) for Project-based programs and a second for Tenant-based programs.

1. The Project-based Waiting List includes the following programs:

- Conventional Public Housing, including Assisted Living Facilities,
- County-owned Section 8 New Construction(*); and
- Section 8 Moderate Rehabilitation

(*) County-owned Section 8 New Construction Developments: Miami Gardens, Wynwood, Singer Plaza, Little Havana I, Riverside, Gibson Plaza, Coconut Grove, Goulds and Perrine Rainbow. Effective February 1, 2008, the Section 8 New Construction developments have been transferred to the Office of Community and Economic Development (OCED). MDHA's ALC will continue managing the waiting list and certifying eligible families until the expiration of the Decree on August 2, 2009.

2. The Tenant-based Waiting List includes the following programs:

- The Housing Choice Voucher Program, and all targeted programs including but not limited to,
- Mainstream Vouchers for Non-Elderly Persons with Disabilities; and
- Project-Based Voucher Program.

The requirements for the Tenant-based Waiting List are included in MDHA's Section 8 Administrative Plan.

3. Position on Waiting List

In the Project-based Waiting List, each applicant will be categorized by the type (e.g., general occupancy, accessible or non-accessible) and size (number of bedrooms required) of unit. Applicants who qualify for any local preferences that may be established shall be given priority for housing placement over non-preference applicants.

4. Movement on the Waiting List

Each family moves up the waiting list in sequence, based upon:

- A neutral lottery system that determines the applicant's ranking on each waiting list.
- Type and size of unit required.

When an applicant is close to the top of the Project-based Waiting List, the applicant's information will be verified so that the applicant may be certified eligible to receive benefits. As required by the Decree, those applicants who are determined eligible to be offered family public housing units and for whom a desegregative housing offer (see definition in Appendix I of this ACOP) will be available shall be referred to the Fair Housing Center for initial mobility counseling, if chosen by the applicant.

Applicants determined ineligible will be promptly notified of their ineligibility and the reason for the determination, and shall be provided an opportunity for an informal review if requested within thirty (30) days of the notice.

A mobility pool member (class members of the Decree) that has come to the top of the mobility pool list and determined ineligible for one (1) program shall remain on the mobility pool list for purposes of receiving offers from other programs for which mobility pool members may be eligible, including homeownership opportunities.

5. Changes to Family Composition

All changes to the family composition shall be considered on a case-by-case basis and approved by the division director or designee, and must be documented at the time such changes occur.

a. Requests for additions to the family composition are to be made in writing by the head of household and are restricted to:

- Spouses, or domestic partners (see definition of Family in Appendix I of this ACOP), children born to, adopted, or otherwise granted custody by operation of law, including foster children. MDHA will require documentation that the head of household has authorization to include a minor as part of the household. Court approved custody or guardianship is not the only mechanism for establishing that a head of household has authorization to include a minor in the family composition. Addition of minors may also be allowed for families in which one (1) or more children live with the designee of the parent or legal custodian, with the parent or custodian's written consent. Documentation can include but is not limited to court documents, pre-need guardian, school records, other state and federal public assistance documentation, or power of attorney.
- Immediate relatives (sons, daughters, brothers, sisters, parents, grandparents and grandchildren), may be added for humanitarian and extraordinary reasons, including reasonable accommodation for a family member.

b. Addition of a Live-in Aide

- MDHA will consider approval of a written request for a live-in aide (see definition in Appendix I of this ACOP) as a reasonable accommodation, upon written verification that the elderly, near-elderly or disabled person requires the services of a live-in aide. For the Live-in Aide Request and Verification forms, refer to Appendix IV of this ACOP, Reasonable Accommodation Policies and Procedures.
- The live-in aide is a household member, not a family member. The income of the live-in aide is not considered towards the calculation of the family's annual income.
- The live-in aide may live in the unit solely to care for the family member and qualifies for occupancy only for as long as the individual requires the supportive services and is living in the unit. MDHA shall deny occupancy of

the unit to the live-in aide after the resident, for whatever reason, is no longer living in the unit.

- A relative may be considered as a live-in aide, but must meet all the above criteria and be qualified to provide the care for the family member. The head of household and the live-in aide shall acknowledge that the live-in aide does not have any right to the unit and does not qualify for continued occupancy as a remaining family member, by signing the Live-In Aide Agreement which shall become an addendum to the resident's lease (for the Live-In Agreement form, refer to Appendix IV of this ACOP, Reasonable Accommodation Policies and Procedures).
- Under extraordinary circumstances, upon approval of the division director, relatives satisfying the definition of a live-in aide wanting to have remaining family status, may be added to the family composition as a family member and not as a live-in aide. In such case, the relative's income will be considered in the family's annual income.
- An eligible live-in aide must meet the admission criteria described in this chapter, including citizenship or eligible immigration status, and mandatory social security number. Criminal and sex offender background checks of the proposed live-in aide shall be completed prior to his/her approval. MDHA has the right to deny the request for a live-in aide who does not meet such criteria.

c. Removals from the Family Composition:

- Any adult family member, including the head of household, requesting to be removed from the family composition, must provide a notarized statement agreeing to the removal.
- If the adult family member is unable to provide the notarized statement (e.g. death, jail), the head of household must provide a written statement explaining the reason why the family member is unable to provide the statement and provide supporting documentation, if available (e.g. death certificate, jail order).

D. Opening and Closing of the Waiting List

1. Timing

- a. The Decree requires that the waiting lists be dissolved approximately every three (3) years. Re-application is necessary during the open registration period in order to be added to the waiting list.
- b. In compliance with the Decree, the position of the applicants on the Project-based and Tenant-based Waiting Lists is determined by a neutral lottery system. One lottery is conducted for the Tenant-based Waiting List and another lottery is conducted for the Project-based Waiting List.

- c. The Decree further permits that MDHA may re-open the Project-based Waiting List within the three (3) year period if there are insufficient applicants for a particular bedroom size. The Project-based Waiting List thus established will only remain in effect until the next dissolution of both Project-based and Tenant -based Waiting Lists and shall not affect the timing of such dissolution. Applicants who are placed on the Project-based Waiting List because of this provision shall not be placed on the Tenant-based Waiting List and shall be thus informed. Such applicants will be informed that their placement on the Project-based Waiting List is temporary until such time as the Project-based and Tenant-based Waiting Lists are dissolved.
 - d. The opening and closing of registration periods will be advertised in the media, as described in Section A of this Chapter, for the purpose of reaching all segments of the community and with appropriate advance notice.
 - e. The mobility pool list shall remain unaffected by the dissolution of the Project-based and Tenant-based waiting lists. The mobility pool list is organized, and its members are housed, by the resident's original move-in date.
2. Open Registration at Designated Locations
 - a. Persons interested in applying for the programs offered by MDHA may do so during open registration periods described herein.
 - b. Applications will be available on-line at designated locations that will be listed in the media advertisement providing notice of the opening of the waiting list. The designated locations will be accessible to persons with disabilities.
3. Submission of Applications
 - a. The waiting list registration period shall remain open for at least five (5) days, in compliance with the Decree.
 - b. MDHA's application for public housing admission may request and include, but may not be limited to, the following information for each application: family composition, and income, applicant's race and ethnicity; dates of birth; disability and immigration status of each family member.
 - c. Applications will be available electronically during the open registration period at www.miamidade.gov/housing. Assistance with the submission online may be available at locations throughout Miami-Dade County to enable access to all eligible applicants.
 - d. In the event that MDHA decides to accept applications in person at designated locations, MDHA will make reasonable accommodations for applicants with disabilities.
 - e. Only one application is allowed per family. Duplicate applications will be disregarded. Applications will be screened for duplicity to ensure that the applicant, or any other adult family member listed in the application, has not submitted another application.
 - f. If an applicant is determined ineligible to be placed on the waiting list, the applicant will be notified by mail.

E. Processing Applications for Admission

All applicants will certify the information they provide in the pre-application is true and accurate. Third party verification of all information provided will be sought as part of the eligibility process.

1. All applicants are responsible for updating MDHA regarding address changes. If an applicant does not respond to notices of scheduled appointments or MDHA correspondence, even if no correspondence was received by the applicant because of a change in address, the applicant's name will be removed from the waiting list. If removed from the waiting list, applicants will have a right to request an informal review in accordance with the Grievance Policy, Chapter IX of this ACOP.
2. Applications are nontransferable except under the following conditions:
 - a. If the head of household passes away, the remaining adult family member will automatically become the head of household applicant, provided such person meets all eligibility requirements. In circumstances where there is more than one (1) surviving adult family member, the family shall determine which surviving family member should be head of household. MDHA shall not make the determination nor create more than one (1) application.
 - b. If the head of household passes away and the remaining family members are minors, the person granted legal custody of such children is entitled to the original date of application, provided such person meets all eligibility requirements.
 - c. As only one application is allowed per family, if a family divides, MDHA will consider the following circumstances in determining which family member shall assume the application:
 - The desires of the family;
 - The interest of minor children, or disabled or elderly family members;
 - Any instance of actual or threatened physical violence against a family member by another family member;
 - Which family members were part of the original application for assistance;
 - or
 - If a court determines property disposition between the family members, MDHA will abide the court's determination.

F. The Applicant Selection System

The factors that may affect applicant selection are described below:

1. Need for Uniform Federal Accessibility Standards Units
 - a. Transfers of residents with disabilities and placement of applicants with disabilities requiring Uniform Federal Accessibility Standards (UFAS) - Accessible Units, or units with accessible features (as defined in Appendix I of this ACOP), will be centrally coordinated through MDHA's Section 504/ADA Coordinator's Office, with the assistance of MDHA's Applicant and Leasing Center.

- b. When an accessible unit becomes available, the unit will first be offered to a current resident with disabilities in the same development who requires the accessibility features of the vacant, accessible unit and occupying a unit not having those features.
- c. If there is no current resident in the same development who requires the accessibility features, then the vacant, accessible unit will be offered to a resident with disabilities residing in another development that requires the accessibility features.
- d. If there is no current resident who requires the accessibility features of the vacant, accessible unit, then the vacant, accessible unit will be offered to an eligible, qualified applicant with disabilities on the waiting list who can benefit from the accessible features of the available, accessible unit.
- e. If there is not an eligible, qualified resident or applicant with disabilities on the waiting list who wishes to reside in the available, accessible unit, then it will be offered to an applicant on the waiting list who does not need the accessible features of the unit. MDHA's *Conventional Public Housing Dwelling Lease* requires residents to relocate to a vacant, non-accessible unit within fifteen (15) days of notice by MDHA, if there is an eligible applicant or existing resident with disabilities who requires the accessibility features of the unit.

2. Income Targeting

MDHA will comply with applicable USHUD income targeting requirements for Public Housing as indicated below, or as may be amended by USHUD:

- Families with incomes between 0% and 30% of area median income (extremely low income): This group must constitute at least 40% of all new admissions from the waiting list in any year.
- Families with incomes between 31% and 80% of area median income: The remaining Public Housing new admissions (no more than 60%) can be up to the low-income level (up to 80% of the area median income).
- Only where necessary, MDHA may skip applicants on the waiting list to attain the annual extremely low income targeting requirement of 40%.

3. Transfers

MDHA will also offer units to existing residents on the transfer list. Some transfers are processed before new admissions, as detailed in Chapter V of this ACOP. Transfers do not count toward the 40% income targeting requirement.

4. Designated Housing

- a. Elderly families will receive a priority for admission to units or buildings covered by a USHUD-approved Designation Plan. When there are insufficient elderly families, near-elderly families (as defined in Appendix I of this ACOP) will receive a priority for this type of unit.
- b. Currently, USHUD approved MDHA's Designated Housing Plan to designate 2,598 units for the elderly. The projects designated for the elderly and their number of units are:

Biscayne Plaza (52), Edison Plaza (80), Florida City Gardens (50), Goulds Plaza (50); Haley Sofge (475), Helen Sawyer Assisted Living Facility (101), Lemon City (100), Palmetto Gardens (40), Peters Plaza (102), Robert King High (315), Smathers Plaza (182), South Miami Plaza (97), Three Round Towers (391), Ward Towers (200), Wynwood Elderly (72), Palm Court (88), Palm Towers (103), and Ward Towers Assisted Living Facility (100).

5. Mixed Population Projects:

A mixed population project is a public housing development that was reserved for elderly and disabled families at its inception, Dwelling units with special accessibility features for handicapped persons will be offered first to families with persons that require the accessibility features of such units.

6. Deconcentration of Income and Poverty

- a. MDHA performs an annual income analysis of its covered public housing developments as part of the PHA Plan, to determine those covered developments falling outside the Established Income Range (EIR). The EIR is between 85 to 115% of the average family income of MDHA covered developments, or 30% of the Area Median Income, whichever is greater.
- b. MDHA's policy includes capital improvements toward developments with average income below the EIR to encourage applicant families with income above the EIR to accept units in those developments.
- c. Currently, the selection of applicants is not affected by the deconcentration of income requirement, as the income profile of the MDHA's developments falling below or above the EIR can be justified because of the Decree, family self-sufficiency program and strategies, and/or size of the development.

7. Preferences

a. Assisted Living Facilities (ALF).

- MDHA uses an ALF preference over new admissions to the Project-based waiting list when an applicant desires to be housed in an ALF or when a resident from public housing is granted a transfer to and ALF, and where it can be documented that the applicant or transferee meets the ALF eligibility criteria at the time of housing offer, which will be verified prior to tenant selection. ALF eligibility criteria are set forth in Chapter III, Section G of this ACOP.
- MDHA will house qualified transferees first from the transfer list and then, if such transfer list is exhausted, MDHA will house qualified applicants from the waiting list. When there are insufficient qualified transferees or applicants, elderly persons ages sixty two (62) or older will receive priority for this type of unit.
- Transferees or applicants in the latter category shall be required to execute a lease permitting MDHA to transfer said transferee or applicant in the event an ALF eligible transferee or applicant requires the unit. MDHA shall be

responsible for the moving costs of the transferee or applicant who is required to relocate.

b. Displaced Persons Preference

- Includes persons displaced due to governmental action, national disasters declared by the President of the United States, and domestic violence (see definition in Appendix I of this ACOP).
- Families displaced because of national disasters must be referred and verified by the Relocation Office of the Miami-Dade County Office of Community and Economic Development.
- The referral for assistance must be made within six (6) months of the displacement in order for such families to qualify for housing assistance. Written referrals may also be accepted from USHUD, appropriate federal, state and local law enforcement agencies, by the State Attorney's Office, or by the courts.

MDHA will not hold its units vacant for applicants or transferees with a preference, nor will it relax eligibility or screening criteria to admit otherwise unqualified applicants with a preference.

G. Interviews and Verification Process

1. As applicants approach the top of the waiting list, they will be contacted by mail and scheduled for an eligibility interview to complete the applicant file. Applicants, including mobility pool members, who fail to attend the scheduled interview, or who cannot be contacted to schedule an interview, will have their applications withdrawn, except under reasonable accommodations provisions for persons with disabilities as described in MDHA's Reasonable Accommodation Policy and Procedures, Appendix IV of this ACOP.
2. Pursuant to the Decree, MDHA will send a letter to any applicant or mobility pool member who does not respond within thirty (30) days to a notice calling him/her in for processing, notifying such applicant that he/she will be removed from the waiting list unless he/she provides a written response within thirty (30) days setting forth a legitimate explanation for his/her failure to respond. Legitimate reasons for failing to respond to notices include the following:
 - a. Verified situations related to a family member with a disability
 - b. Verified hospitalization or illness of head of household or family member
 - c. Verified absence from current dwelling
 - d. Extraordinary or humanitarian reasons approved the ALC Director or designee

Generally, MDHA will verify the family's eligibility for public housing benefits within the period of sixty (60) days before initial certification. Verification documents for initial certifications (admissions) and annual re-examinations must be no older than 120 days on the move-in date or the effective date of the re-examination.

3. The following items will be verified to determine qualification for admission to MDHA

- Family composition and type (Elderly/Disabled/near elderly /non-elderly);
- Annual Income;
- Assets and Asset Income;
- Deductions from Income;
- Preferences;
- Social security numbers of all family members;
- Applicant Screening Information; and
- Citizenship or eligible immigration status.

4. Verification of eligible immigration status shall be carried out pursuant to 24 CFR § 5.5.
5. Applicants reporting zero income will be asked to complete the *Monthly Family Expense* and *Income Contribution* forms to document how much they spend on: food, transportation, health care, child care, debts, household items, etc. and what the source of income is for these expenses. The *Income Contribution* form is a certification signed by the person who provides the income contribution and must be notarized.
6. Eligibility Interview:

The eligibility interview appointment letter includes a list of all the documents required by MDHA at the interview and the Personal Declaration form, or any other approved form for the same purpose.

- To the greatest extent possible, eligibility interviews are conducted in privacy. Reasonable accommodations will be provided for persons with disabilities who may require special services.
- Original documents such as birth certificates, social security cards, pay stubs, and receipts will be reviewed, photocopied and included in the applicant's file.
- During the applicant's formal interview, the eligibility interviewer will compare new information received with past information stated on the application and query the applicant regarding any discrepancies and/or require additional documentation.
- Any additional information or documentation specifically requested of the applicant at the eligibility interview must be provided within one (1) week of the interview date unless an extension is granted.
- The applicant family must complete all applicable information spaces on the Personal Declaration form. Misrepresentation of income, family composition or any other information affecting eligibility and selection criteria will result in the family being declared ineligible. In the event fraud is discovered after admission, the family may be subsequently evicted, even if the family meets current eligibility requirements at the time.
- After MDHA has reviewed all information with the applicant, all adult family members (see definition in Appendix I of this ACOP) at the time of the eligibility interview, are required to sign the Personal Declaration form and other necessary forms such as the *Authorization to Release Information*, prior to conducting background checks.

7. Personal Declaration Form

The Personal Declaration is a personal statement of information required to evaluate the eligibility for selection of the applicant. Information required on the Personal Declaration form relate to the following:

- Household composition
- Local preferences (if applicable)
- Emergency contacts
- Previous landlord references
- Background references
- Care of unit
- Family income
- Family assets
- Child-care expenses
- Disability assistance expenses
- Medical expenses
- Criminal background

8. Verifications

- a. For applicants, written verification from third parties are the most desirable forms of verification of the information provided on the *Personal Declaration Form* and other required forms. Third-party verification includes written, oral or electronic verification (internet, faxed or e-mailed information).
- b. MDHA will utilize the verification guidelines under PIH Notice 2004-1, Verification Guidance, and PIH 2006-41, Verification of Social Security and Supplemental Security Income benefits, as applicable, and any subsequent guidelines and regulations issued by USHUD.
- c. If attempts to obtain third-party written verification of income, assets and/or expenses are unsuccessful, MDHA will use (1) oral (telephone or in-person) verifications, (2) review of documents, and if no other form of verification is available, (3) applicant certifications.
- d. At least two (2) documented attempts must be made for written third party verification before obtaining oral (telephone or in-person) third party verifications. Within three (3) business days of sending the written verification, if the written verification is not received, MDHA will telephone the independent source and request that the information be completed and sent to MDHA by the following day. If the information is not received by close of business on the following day, MDHA will again call the independent source on the next day and request that the information be sent. The file must document the attempts made to obtain third party verification.
- e. Oral verifications will be used when written verification is not obtained within ten (10) business days from the date that the written verification was mailed, faxed or e-mailed directly to the independent source. Documentation shall be placed in the applicant or resident file and on computer system notes and shall indicate who provided the information and when, as well as the MDHA staff person who obtained the information, along with the confirmed verified information.

- f. If oral third party verification can not be obtained within two (2) business days, MDHA will review original documents provided by the applicant. MDHA must document in the file the reason(s) why third party verification was not available.
- g. Personal certifications will only be used as a last resort when all other verifications are not possible. When MDHA relies on applicant/tenant certification (notarized statement or affidavit), the file must be documented as to why third party verification was not available.
- h. In support of the applicant/tenant's declaration of income, MDHA may review original (authenticated) documents provided by the applicant or resident. All documents should be dated within the last 60 days of the interview. A photocopy will be placed in the file. Acceptable applicant or resident provided documents include: (1) consecutive and original pay stubs; (2) Social Security Administration award letter; (3) bank statements; (4) pension benefit statements; (5) TANF award letter; (6) other official and authentic documents from a Federal, State or local agency.
- i. Value of Assets: Each asset must be analyzed to obtain its net value (market/face value less redemption cost). When verifying the value of assets, for example, a bank account, use the current balance for savings account and the average balance for the last six (6) months for checking accounts. MDHA will accept original documents (bank statement) to verify assets from checking and savings accounts in lieu of obtaining written or oral third party verifications, if the balance does not exceed \$4,999 and MDHA is able to verify the asset through review of original documents (bank statement) provided by the applicant or resident.
- j. Income from Assets: Based on the total net value of family assets. When the total value of assets is \$5,000 or less, use the actual amount of income from assets. If the only asset is an interest bearing bank account, the actual income from the asset is the amount of interest earned shown in the last bank statement. When the total value of assets is over \$5,000, use the greater of:
- The actual amount of income from assets, or
 - The imputed income from assets based upon the established HUD passbook rate. The 50058 automatically calculates the passbook rate percentage value of the assets, compares it to the actual income, and picks the greater amount.
- k. Income from Employment (Wages): Verification of income from any employer must be submitted directly by the employer by mail or by facsimile. If the information is faxed, it must be confirmed by telephoning the employer and documented with date and time of call. Self-employment declarations must be submitted in writing and notarized.
- l. Income from Government Assistance: Any verification of income from the Social Security Office, Department of Children and Family Services, Veterans Office, or other governmental agency must have an official stamp or other identifying mark.
- m. If third party income verification is not otherwise available, a copy of the most recent federal income tax return shall be submitted, including any W-2 information,

or six (6) consecutive pay stubs or earnings statements. As stated above, notarized statements or affidavits are the least desirable forms of verifications and shall be accepted only when all other types of verification attempted have failed.

- n. MDHA will obtain verifications from previous landlords to verify the applicant's ability to pay rent and to comply with the lease terms, and will perform criminal and sex offender background checks on applicants and family members 16 years of age and over. Failure to comply shall result in removal from the waiting list, withdrawal of an offer, or termination of assistance.
- o. Prior to initial certification, applicants shall be informed that MDHA will subsequently verify the family's income information they have provided MDHA through USHUD's Enterprise Income Verification (EIV) system. EIV is a computer matching program that compares the income provided by the resident against income information supplied by state agencies on wages, unemployment compensation, and Social Security benefits.
- p. An applicant's intentional misrepresentation of information related to eligibility, preference for admission, housing history, allowances, family composition, income or rent will result in rejection. Unintentional mistakes that do not confer any advantage to the applicant will not be considered misrepresentations.

H. Screening Applicants for Admission

Any costs incurred to complete the application process and screening will be borne by MDHA.

1. All applicants shall be screened in accordance with HUD's regulations and with sound management practices. MDHA will screen applicants to demonstrate the applicant's ability to comply with essential provisions of the lease as summarized below:
 - to pay rent and other charges (e.g. utility bills) as required by the lease in a timely manner;
 - to care for and avoid damaging the unit and common areas;
 - to use facilities and equipment in a reasonable way;
 - to create no health, or safety hazards, and to report maintenance needs;
 - not to interfere with the rights and peaceful enjoyment of others, and to avoid damaging the property of others;
 - not to engage in criminal activity that threatens the health, safety or right to peaceful enjoyment of the premises by other residents or staff; and not to engage in drug-related criminal activity; and
 - to comply with necessary and reasonable rules and program requirements of USHUD and MDHA.
2. In accordance with the One Strike Rule, MDHA shall complete criminal background and sex offender checks on all household members 16 years of age and older for whom criminal records are available during the eligibility process and at any time MDHA deems it necessary, to ensure the safety and peaceful enjoyment of the premises of other residents.
3. MDHA will perform criminal background and sex offender checks for applicants at local and state levels.

4. Prior to conducting any criminal and sex offender background check, household members over 16 years of age, including the live-in aide, must sign the *Consent Form Authorizing Miami-Dade Housing to Obtain Criminal Background Records*.
5. Criminal and sex offender background checks will be conducted within five (5) days from the initial eligibility interview appointment, in accordance with Section J - Denial of Assistance, below.

I. Ability to Comply with Financial Obligations and Lease Requirements

1. Each applicant's ability and willingness to comply with the essential lease requirements will be verified and documented. Applicant screening shall assess the conduct of the applicant and other family members listed on the application, in present and prior housing.
2. In verifying the applicant's ability to meet financial obligations, especially rent, MDHA may perform verifications with at least one prior landlord. At the eligibility interview, applicants must provide current and prior addresses, as well as current and prior landlords' contact information.
3. The history of applicants' conduct and behavior must demonstrate that the applicant family can reasonably be expected not to:
 - a. Interfere with other residents in such a manner as to diminish their peaceful enjoyment of the premises by adversely affecting their health, safety, or welfare;
 - b. Adversely affect the physical environment or financial stability of the project;
 - c. Violate the terms and conditions of the lease.
4. MDHA may verify applicants' record of disturbance of neighbors, destruction of property or living and housekeeping habits at prior residences that may adversely affect the health, safety or welfare of other tenants or cause damage to the unit or development.
5. Payment of funds owed to MDHA or any other housing authority is part of the screening evaluation. MDHA will reject an applicant family, including mobility pool members, for unpaid balances owed to MDHA, or any other housing authority, by any member of the applicant family, or for money paid to an owner by MDHA, until the unpaid balance is paid in full, or a repayment agreement for funds owed to MDHA is executed.
6. MDHA's examination of relevant information respecting past and current habits or practices will include, but is not limited to, an assessment of the applicant and each family members:
 - a. Past performance in meeting financial obligations, especially rent and utility bills.
 - b. Record of disturbance of neighbors (sufficient to warrant a police call), destruction of property, or living or housekeeping habits that may adversely affect the health, safety, or welfare of other tenants or neighbors.
 - c. History of criminal activity on the part of any applicant family member involving crimes of physical violence to persons or property, or other criminal acts including

drug-related criminal activity that would adversely affect the health, safety, or welfare of other residents or staff or cause damage to the unit or development.

- d. A record of eviction from housing or involuntary termination from residential programs (taking into account date and circumstances).
 - e. An applicant's ability and willingness to comply with the terms of MDHA's lease, including but not limited to the community service requirement.
7. An applicant's intentional misrepresentation of information related to eligibility, preference for admission, housing history, allowances, family composition or rent will result in rejection. Unintentional mistakes that do not confer any advantage to the applicant will not be considered misrepresentations.

J. Denial of Assistance

- MDHA is required to consider applications for assistance by persons with criminal background on a case-by-case basis and deny housing assistance to persons with criminal background that makes them temporarily or permanently ineligible for assisted housing in accordance with the One Strike regulations.
- MDHA will deny admission when the screening process shows poor past performance in meeting financial obligations, specially rent, and history of inability to comply with the terms of previous leases, as verified by previous landlords.
- MDHA must notify the household of the proposed rejection, the reason for the denial of admission, and provide an opportunity to dispute the accuracy and relevance of the record. If the denial is because of criminal background, MDHA must provide the household member with copy of the criminal records. Criminal records for minors available to MDHA by operation of law will be released to the head of household, parent or legal guardian of the minor, upon request.
- MDHA may propose to deny assistance in the following instances whether the person had been arrested or convicted (see definitions in Appendix I of this ACOP).
 1. Ten (10) years from date of arrest for Criminal Activities under the One Strike Rule:
 - a. Drug-related, including but not limited to eviction or termination from federally assisted housing.
 - b. Violent-related, including but not limited to murder, arson, battery and assaults, including sex-related crimes not subject to lifetime registration under a state sex offender registration program.
 - c. Non-violent criminal activities that may threaten the health, safety or right to peaceful enjoyment of the premises by other residents. Examples are crimes that involve disturbing the peace, crimes against the property such as burglary, larceny and robbery, and crimes that impose a financial cost such as vandalism, bribery and fraud, including fraud in connection with federally assisted housing.
 - d. Alcohol abuse or pattern of abuse, if MDHA has reasonable cause to believe that the persons' abuse of alcohol may interfere with the health, safety, or right to peaceful enjoyment of the premises by other residents.

In determining denial of assistance related to drug or alcohol abuse, MDHA must take into consideration:

- Evidence of drug or alcohol rehabilitation, as indicated under Mitigating Circumstances below, and
- If the drug or alcohol abuse is related to a disability, as determined by MDHA's ADA Coordinator.

2. Five (5) Years for Non-criminal Activities:
 - a. Failing financial obligations (e.g., paying rent and utilities).
 - b. Inability to comply with the lease terms (e.g., record of disturbance of neighbors, destruction of property, living and housekeeping habits that may adversely affect the health, safety or welfare of other tenants or cause damage to the unit or development).
3. Permanently:
 - a. Methamphetamine manufacturers on premises of federally assisted housing.
 - b. Sex offenders subject to a lifetime registration under a state sex offender registration program.

In searching for sex offenders, MDHA will perform background checks in the state of Florida and all other states where the household members are known to have resided, as found in the Florida Department of Law Enforcement website: www.flde.state.fl.us.

K. Mitigating Circumstances

1. If negative information is received about an applicant, MDHA shall consider the time, nature, and extent of the conduct and factors that might indicate a reasonable probability of favorable future conduct. To be considered, mitigating circumstances must be verifiable.
2. Mitigating circumstances are facts relating to the applicant negative rental history or behavior, that, when verified, indicate: (1) the reason for the unsuitable rental history and/or behavior; and (2) that the reason for the unsuitable rental history and behavior is no longer in effect or is under control, and applicant's prospect for lease compliance is an acceptable one, justifying admission. Mitigating circumstances would overcome or outweigh information gathered in the screening process.
3. Examples of mitigating circumstances may include:
 - a. Evidence of successful rehabilitation. The household member who engaged in drug-related criminal activity or alcohol abuse has successfully completed a supervised drug or alcohol rehabilitation program approved by MDHA;
 - b. Circumstances leading to the eviction or criminal activity no longer exist (for example, the criminal household member has died or is imprisoned);
 - c. Evidence of the applicant family's participation in social service or other appropriate counseling service; or
 - d. Evidence of successful and sustained modification of previous disqualifying behavior.
4. If the applicant asserts that mitigating circumstances relate to a change in disability, medical condition or treatment, MDHA shall refer such information to MDHA's 504/ADA Coordinator to evaluate the evidence and verify the mitigating circumstance. MDHA shall also have the right to request further information to verify the mitigating

circumstance. Such inquiries will be limited to the information necessary to verify the mitigating circumstances or, in the case of a person with disabilities, to verify a reasonable accommodation (see MDHA's Reasonable Accommodation Policy and Procedures document under Appendix IV of this ACOP), which will be used by MDHA as the source document to process reasonable accommodation requests for persons with disabilities.

5. In its decision to deny assistance, MDHA may consider the seriousness of the case, and the effect of denial of assistance on other family members who were not involved in the action or failure to act. MDHA, if it admits such a family to the program, may impose as a condition of assistance, the requirement that family members who participated in or were culpable for the action or failure to act will not reside in the assisted unit, upon approval of the division director.
6. Consideration of mitigating circumstances does not guarantee that applicants will qualify for admission. MDHA will consider such circumstances in light of:
 - a. the ability to provide documentation to verify the mitigating circumstances and prospects for improved future behavior;
 - b. the overall performance with respect to all the screening requirements; and
 - c. the nature and seriousness of the criminal activity, especially drug related and criminal activity that appears in the applicant's record.

L. Qualified and Unqualified Applicants

1. Verified information will be analyzed and a determination made with respect to:
 - Eligibility of the applicant as a Family
 - Eligibility of the applicant with respect to income limits for admission
 - Eligibility of the applicant with respect to citizenship or eligible immigration status
 - Unit size required
 - Qualification of the applicant with respect to the selection criteria.
2. Applicants who do not respond within thirty (30) days to a notice of ineligibility to receive program benefits, or a notice to come in for processing, or do not cooperate with MDHA in providing all required information, will be notified in writing that his/her name will be removed from the Project-based Waiting List unless he/she requests an informal review by contacting MDHA within thirty (30) days of the notice.
3. The applicant shall be provided an opportunity for an informal review if requested within thirty (30) days of the notice. An applicant or mobility pool member may within one (1) year of being removed from the waiting list for not responding to notices calling him/her in for processing, request an administrative hearing seeking reinstatement to his/her original place on the waiting list. Mobility pool members removed from the program waiting list because of ineligibility, however, shall not be removed from the mobility pool list for the purpose of receiving offers from other programs for which mobility pool members may be eligible, including homeownership opportunities.
4. Eligible applicants, who are known to have a disability, but fail to meet the applicant selection criteria detailed in this Chapter, will be offered an opportunity to submit

documentation in support of their claims that mitigating circumstances related to disabilities or reasonable accommodations will make it possible for them to be housed in accordance with the screening procedures. MDHA's ADA/504 Coordinator will review such claims.

M. Occupancy Guidelines

Units shall be occupied by families of the appropriate size. This policy maintains the usefulness of the units, while preserving them from excessive wear and tear and under-utilization.

Minimum and Maximum-Number-of-Persons-Per Unit Standard

Number of Bedrooms	Minimum Persons per Unit	Maximum Persons per Unit
0	1	1
1	1	2
2	2	4
3	3	6
4	4	8
5	5	10
6	6	12

At the initial certification or during a change of dwelling, MDHA shall, to the greatest extent possible, and within the occupancy standards, allow the family the flexibility of bedroom size to best accommodate family members based on age and gender. For occupancy standards an adult is a person eighteen (18) years or older.

1. Two (2) persons per bedroom will be the standard for the smallest unit a family may be offered.
2. A single person family shall be allocated a zero (0) or one (1) bedroom unit, and spousal partners a one (1) bedroom sized unit.
3. The following principles govern the size of unit for which a family will qualify. Generally, two (2) people are expected to share one (1) bedroom, except that units will be so assigned that:
 - a. It will not be necessary for persons of different generations or opposite sex, other than those in spousal relationship, to occupy the same bedroom, although they may do so at the request of the family.
 - b. Exceptions to the largest permissible unit size may be made in case of reasonable accommodations for a person with disabilities.
 - c. Two (2) children of the opposite sex will not be required to share a bedroom, although they may do so upon written request from the family. Such situations may occur for families needing larger bedroom sizes (4, 5, 6 bedrooms) for which there are limited availability.
 - d. A family that consists of a pregnant woman shall only be allocated a maximum of a two (2) bedroom unit.

- e. MDHA will count a child in the occupancy standard who is temporarily away from the home because the child has been placed in foster care, kinship care, or is away at school.
 - f. A single head of household parent shall not be required to share a bedroom with his/her child, although they may do so at the request of the family.
 - g. A live-in aide may be assigned a bedroom. Single elderly or disabled residents with live-in aides will be assigned one (1) or two (2) bedroom units.
 - h. Individual housing units with very small or very large bedrooms or other specific situations that inhibit or encourage lower or higher levels of occupancy may be permitted to establish lower or higher occupancy levels so long as the occupancy levels shall not discriminate on the basis of familial status.
4. The largest unit size that a family may be offered would provide no more than one (1) bedroom per family member, taking into account family size and composition.
 5. If a family opts for a smaller unit size than would normally be assigned under the largest unit size standard (because, for example, the waiting list is moving faster for that bedroom size), the family will be required to sign a statement agreeing to occupy the unit assigned at their request until their family size or circumstances change.
 6. When a family is actually offered a unit, if they no longer qualify for the unit size they were originally assigned, they will be reassigned to the appropriate bedroom size, retaining their original ranking. This may mean that they may have to wait longer for a unit offer.

N. Record Maintenance

1. MDHA will keep the resident's application for admission in the resident's file.
2. All occupancy information collected during the ten-year term of the Decree shall be retained for at least five (5) years including data on current applicants and residents, and applicants who were never admitted.
3. ALC will maintain records of the circumstances of each dwelling unit offered to an applicant, including the location of the unit, the offer date, and whether the offer was rejected or accepted. This information may be maintained electronically.
4. MDHA will retain historical applicant and resident data from MDHA computer system for at least three (3) years after the expiration of the Adker Consent Decree.
5. Criminal record obtained by MDHA must be:
 - ✓ Maintained confidentially;
 - ✓ Not misused or improperly disseminated; and
 - ✓ Destroyed, once the purpose(s) for which the record was requested has been accomplished, including expiration of the period for filing a challenge to the PHA action.

6. Criminal penalty: The improper release of criminal records may result in conviction for a misdemeanor and imposition of a penalty of not more than \$5,000. Criminal penalty may be assessed to:
 - a. Any person, including an officer, employee, or authorized representative of MDHA or of any project owner, who knowingly and willfully requests or obtains any information concerning an applicant for, or tenant of, covered housing assistance under the authority of this section under false pretenses; or
 - b. Any person, including an officer, employee, or authorized representative of any PHA or a project owner, who knowingly and willfully discloses any such information in any manner to any individual not entitled under any law to receive the information.

7. Civil Liability: In addition to criminal penalties, MDHA may be held liable to any applicant or tenant affected by either of the following:
 - a. A negligent or knowing disclosure of criminal records information obtained under the authority of this section about such person by an officer, employee, or authorized representative of MDHA, if the disclosure is not authorized by USHUD's regulations; or
 - b. Any other negligent or knowing action that is inconsistent with USHUD's regulations.

III. Tenant Selection and Assignment Plan

This ACOP incorporates and implements the provisions of the Adker Decree, as previously referenced in Chapter I - Section C, on Applicant Processing, Tenant Selection, Placement and waiting lists management. Nothing contained herein is intended to change, amend or replace any provision of the Adker Decree. Wherever conflicts may occur between both documents, the provisions of the Adker Decree shall govern.

A. Organizing the Project-based Waiting List

It is MDHA's policy that each applicant shall be assigned his/her appropriate place on the Project-based Waiting List in sequence based upon:

1. Type and size of unit needed and selected by the family (e.g. general occupancy building, accessible or non-accessible unit, number of bedrooms);
2. A neutral lottery system that determines the applicant's ranking on the project-based waiting list
3. Preferences to ALFs and displaced persons due to governmental action, as detailed in Chapter II, Section F.7, will take priority over new admissions.

B. Choice of Public Housing or Section 8 Moderate Rehabilitation Program

1. The applicant must choose whether he/she wants to reside in either a Public Housing unit or in a Section 8 Moderate Rehabilitation unit. MDHA will provide a description of the two programs to the applicant in writing.
2. If the applicant selects the Moderate Rehabilitation program and the applicant is rejected by an owner after receiving three (3) offers, the applicant will be entitled to receive an offer for public housing, subject to meeting all public housing eligibility requirements.

C. Making Housing Offers to Eligible Applicants

1. To assure equal opportunity and nondiscrimination on grounds of race, color, sex, religion, age, national origin, disability, ancestry, marital or familial status and sex orientation, the following procedures will be used to make unit offers.
2. Until the expiration of the Decree, applicants on the Project-based, Waiting List shall receive desegregative offers (see definition in Appendix I of this ACOP), that is, offers exclusively to applicants whose race does not predominate at the development, where applicable, for vacancies in the following:
 - Public Housing, including Assisted Living Facilities, and County-owned Section 8 New Construction developments
 - Section 8 Moderate Rehabilitation developments
3. Subject to the Decree's desegregative offer requirement and MDHA's newly approved plan to fill vacancies, the first qualified applicant in sequence on the waiting list is made

unit offers of an appropriate size and type. Where possible, the offered units will be located in the central, northern and southern regions of Miami-Dade County.

- a. Up to twenty (20) eligible applicants are offered five (5) units (numbers may be altered depending on availability of units and other factors) after the units are ready for occupancy.
- b. The five (5) units shall be desegregative offers for at least five (5) of the twenty (20) applicants to whom the offer is made. Each applicant submits to MDHA a list of the units they will accept within five (5) business days.
- c. The unit will be given to the first eligible applicant who responds with an acceptance, based on the date and time the acceptance response is received; however, preference is given to desegregative acceptances. If the applicant does not accept one (1) of the offers or does not respond to the offers within five (5) business days, he/she will be removed from the waiting list.
- d. If an applicant accepts one (1) of the units offered during the offer period, but the unit was assigned to another applicant based on the date and time of the acceptance response, he or she will receive additional offers, regardless of whether they are desegregative offers.
- e. Subject to the process described above, any applicant who receives an offer shall be removed from the waiting list of the specific program for which the offer was made, except if the applicant demonstrates good cause (as defined in Section E of this Chapter) for rejecting the offer.
- f. An applicant shall not be removed from the waiting list for one program on the basis of the applicant's acceptance of an offer in another program. Applicants who are removed from the Project-based waiting list because they refuse unit offers without good cause may not be re-instated, but may reapply in the next open registration period.
- g. Offers of vacant units may be made to applicants that state a preference for a development in which their race does not predominate in advance of applicants higher up on the Project-based waiting list and who have not stated a preference for a particular desegregative development. Applicants may not modify their preferences more than once a year.
- h. An applicant who has accepted a tenant-based subsidy and subsequently receives an offer for project-based assistance during the first year of his/her lease, or an applicant who has accepted project-based assistance and subsequently receives an offer for a tenant-based subsidy during the first year of his or her lease, must comply with the term of his/her lease or arrange a mutually agreed upon termination of the lease with the owner, provided that during the period in which the applicant is fulfilling the term of the existing lease, the applicant shall retain his or her position on the waiting list for the other type of housing program.
- i. The desegregative offer process as described herein may be amended with the agreement of all parties to the Decree.
- j. In the selection of a family for a UFAS unit or a unit with accessible features, MDHA will give preference to current residents and then to applicant families that include a person with disabilities who can benefit from the unit features.

- k. If more than one (1) unit of the appropriate size and type is available, the first unit to be offered will be the unit that is or will be ready for move-in first. If two (2) units are ready for move-in on the same day, the first unit to be offered will be the unit that became vacant first.

D. Removing Applicant Names from the Project-based Waiting List

1. To ensure vacant units are filled in a timely manner, MDHA needs a waiting list that is accurate. While each applicant is responsible for keeping MDHA apprised of changes in address, telephone number, income or other circumstances, no applicant shall be removed from the waiting list except when one of the following situations occurs:
 - a. The applicant receives and accepts an offer of housing;
 - b. The applicant requests in writing that his/her name be removed from the waiting list;
 - c. The applicant is rejected, either because he/she is ineligible for assisted housing at the time of certification, or because he/she fails to meet the applicant selection criteria;
 - d. The application is withdrawn because: 1) MDHA attempted to contact the applicant and was unable to do so, 2) the applicant did not respond to the offer, 3) the applicant does not accept an offer, or 4) the applicant does not re-schedule or attend to the scheduled lease-up appointment, except for good cause as defined in Section E below.
2. Persons who fail to respond to MDHA's attempts to contact them because of verified situations related to the disability of a household member shall be entitled to reinstatement to the waiting list as a reasonable accommodation to the household member with disabilities, as determined by MDHA's ADA Coordinator, upon presentation of the Reasonable Accommodation Request and Verification Forms, in accordance with the Reasonable Accommodation Policy, Appendix IV of this ACOP. Such reinstatements shall be to their former waiting list positions.
3. Families whose applications are withdrawn or rejected may reapply for housing when the waiting list is open.
4. All rejected applicants are entitled to a complete explanation of the reason for their rejection and may request an informal review, at which time they may present reasons why they should be reinstated to the waiting list (See Chapter IX - Grievance Policy, of this ACOP).

E. Good Cause for Applicant Refusal of Unit Offer

If an applicant does not accept the unit and presents clear evidence ("good cause") that acceptance of the offer of a suitable vacancy will result in undue hardship not related to considerations of race, color, sex, religion, national origin, ancestry, marital or familial status or sexual orientation, the applicant will not be removed from the list.

1. Examples of "good cause" for refusal of an offer of housing are:

- a. The unit is not ready for move-in at the time of the offer of housing. If an applicant refuses a unit because it is not ready for move-in, the applicant will be offered the next unit that is ready for move-in.
- b. Inaccessibility to source of employment, education, or job training, children's day care, or educational program for children with disabilities, so that accepting the unit offer would require the adult household member to quit a job, drop out of an educational institution or job training program, or take a child out of day care or an educational program for children with disabilities.
- c. The family demonstrates that accepting the offer will place a family member's life, health or safety in jeopardy. The family must provide specific and compelling documentation such as restraining orders, other court orders, or risk assessments from a law enforcement agency. Reasons offered must be specific to the family. Refusals due to location alone do not qualify for this good cause exemption.
- d. A health professional verifies temporary hospitalization or recovery from illness of the principal household member, other household members (each as listed on final application) or live-in aide necessary to the care of the principal household member.
- e. The unit is inappropriate for the applicant's disabilities, or the family does not need the accessible features in the unit offered and does not want to be subject to the fifteen (15) days notice to move.
- f. An elderly or disabled family makes the decision not to occupy or accept occupancy in designated housing.
- g. If good cause is verified, the refusal of the offer shall not require the applicant to be removed from the waiting list or otherwise affect the family's position on the waiting list. The applicant will receive another housing offer upon unit availability.
- h. MDHA will maintain a record of units offered, including location, date, and circumstances of each offer, and each acceptance or refusal, including the reason for the refusal.

F. Administering the Applicant Waiting List

Applications for admission will be processed centrally. Initial intake, waiting list management, screening, and assignment of housing (including transfers) will be made from ALC. Offers may be made in person, or in writing.

G. Assisted Living Facilities

MDHA administers Assisted Living Facilities (ALFs) of zero (0) and one (1) bedroom units which combine the concepts of public housing and non-institutional facilities and provide programs and services for low-income elderly and frail persons. ALFs are regulated by Florida Statutes Chapter 400, Part III and Administrative Law 58A-5. Admission and continued occupancy of MDHA's ALFs are subject to the following requirements:

1. Applicants

- a. Project-based Waiting List applicants interested in residing in an ALF must qualify in accordance to Chapter II of this ACOP and the ALF Admission Criteria detailed in below.
- b. ALF interested and qualified applicants will be selected from the Project-based Waiting List for zero (0) or one (1) bedroom units, in the ranking order obtained by the lottery system of such list. The Waiting List Management provisions contained in Chapter II, Section C of this ACOP applies to ALFs' applicants.
- c. Unit offers to ALFs' interested and qualified applicants are subject to the Decree's requirement that MDHA make desegregative offers, where applicable.

2. ALF Admission Criteria

- a. Are Medicaid eligible (each individual). The individuals may receive the additional Optional State Supplement (OSS) income. The OSS check must be endorsed to the facility and the resident will be given a personal allowance on a monthly basis.
- b. Do not receive more than the specified ALF income limit per month, nor have more than the maximum funds allowed in a bank account (each individual) for ALFs. The income limit and maximum funds allowed might change annually;
- c. Are able to perform daily living activities without supervision or assistance;
- d. Are at risk of being prematurely placed in a nursing home;
- e. Do not require twenty-four (24) hour nursing supervision;
- f. Are not bedridden, and do not require licensed professional, mental health treatment; and
- g. Are free from communicable disease (except as indicated below) and are nonviolent. The term "communicable disease" does not include Acquired Immune Deficiency Syndrome (AIDS), human immunodeficiency virus or any other communicable diseases, which are considered a disability. Persons with said disabilities are afforded protection from discrimination under State Federal, and local anti-discrimination Laws.

3. Transfers to ALFs

Requests of transfers to an ALF of existing interested and qualified residents of Project-based developments are subject to the provisions under Chapter V - Transfer of this ACOP and the ALF Admission Criteria detailed in item # 2 above. Residents requesting transfers to an ALF will receive priority over applicants requesting to reside in an ALF.

4. ALFs Local Preference

ALFs' applicants and/or transferees are subject to the ranking preference established in Chapter II, of this ACOP.

IV. Leasing Policies

A. General Leasing Policy

1. All units must be occupied pursuant to the MDHA approved dwelling lease that complies with HUD's regulations.
2. The lease shall be signed by the head of household, spouse, and all other adult members of the household and by the site manager or other authorized representative of MDHA, prior to actual admission.
3. If a resident transfers from one MDHA unit to another, a new lease will be executed for the dwelling into which the family moves.
4. If at any time during the life of the lease agreement, a change in the resident's status results in the need for changing or amending any provision of the lease, either:
 - a. A new lease agreement will be executed, or
 - b. A Notice of Rent Adjustment will be executed, or
 - c. An appropriate rider will be prepared and made a part of the existing lease.
5. All copies of such riders or insertions are to be dated and signed by the resident and by the site manager or other authorized representative of MDHA.
6. Residents must advise MDHA if they will be absent from the unit for more than seven (7) consecutive days. Residents shall notify the site manager in writing, secure the unit, and provide a means for MDHA to contact the resident in an emergency. Failure to advise MDHA of an extended absence is grounds for termination of the lease.

B. Showing Units Prior to Leasing

1. Upon receipt of ALC offer letter, the applicant contacts the site manager to schedule an appointment to view the offered unit.
2. Once the unit is shown and the applicant accepts the unit and all required documentation is received from ALC, the site manager will execute a lease. If the applicant refuses the unit, a signed reason for refusal should be obtained from the applicant by ALC. ALC is responsible for making the "good cause" determination.
3. No lease will have an effective date before the unit is ready for occupancy.

C. Additions to the Household and Visitors

1. Only those persons listed on the most recent certification form and lease shall be permitted to occupy a dwelling unit;

- a. Except for natural births to, or adoptions by, family members, or court awarded custody or other operation of law, any family seeking to add a new member must request approval in writing before the new member moves in (Family members being added to the family composition must meet the criteria under Chapter II, Section C.5 - *Changes to Family Composition*, and the definition of Family under Appendix I).
 - b. When a resident requests approval to add a new person to the lease, MDHA will conduct pre-admission screening, including criminal background and sex offender checks, of any proposed new member 16 years of age and over, to determine whether the MDHA will grant such approval. Minor children for whom juvenile justice records are not made available or added through a formal custody award or kinship care arrangement are exempt from the pre-admission screening process, although the resident needs prior approval from MDHA to add children other than those born to, adopted by, or awarded by the court to the family.
 - c. All persons listed on the most recent certification form and the lease must use the dwelling unit as their sole residence.
2. Examples of situations where the addition of a family or household member is subject to screening are:
 - a. Resident plans to be married and requests to add the new spouse to the lease;
 - b. Resident desires to add a new family member to the lease, employ a live-in aide, or take in a foster child(ren) over the age for which juvenile justice records are available;
 - c. A unit is occupied by a remaining family member(s) under age eighteen (18), who is not an emancipated minor, and an adult, not a part of the original household, requests permission to take over as the head of the household.
 3. Residents who fail to notify MDHA of additions to the household or who permit persons to join the household without undergoing screening are in violation of the lease. Persons added without MDHA approval will be considered unauthorized occupants and the entire household will be subject to eviction.
 4. Visitors may be permitted in a dwelling unit so long as they have no previous history of unacceptable or negative behavior on MDHA premises that would be a lease violation.
 - a. Visits in excess of a total of fourteen (14) days per year, whether or not consecutive, are not permitted, unless the resident obtains the advance written consent of the Public Housing Director or designee.
 - b. Visitors remaining beyond this period shall be considered unauthorized occupants and the head of the household shall be guilty of a breach of the lease.

5. Roomers and lodgers shall not be permitted to move in with any family. Violation of this provision is ground for termination of the lease.
6. Residents will not be given permission to allow a former resident of MDHA who has been evicted to occupy the unit for any period of time. Violation of this requirement is grounds for termination of the lease.
7. Family members over age seventeen (17) or emancipated minors who move from the dwelling unit to establish new households shall be removed from the lease.
 - a. The resident shall report the move-out within thirty (30) calendar days of its occurrence.
 - b. These individuals may not be readmitted to the unit and must apply as new applicant households for placement on the waiting list.

D. Requirements for Posting Policies, Rules and Regulations

The following documents shall be maintained in the waiting area of every housing development management office, and/or posted on a large bulletin board:

- Admission and Continued Occupancy Policies (ACOP)
- Tenant Selection and Assignment Plan (included in ACOP)
- Directory of all housing developments including names, perimeter streets, number of units by bedroom size, number of units specifically designed for the elderly, addresses of management offices and office hours
- Income limits
- Utility allowances
- Dwelling Lease form
- Community Policies
- Current schedule of routine maintenance and other charges (included in Community Policies)
- Grievance Procedures (included in ACOP and Community Policies)
- Fair Housing poster
- "Equal Opportunity in Employment is the Law" poster
- Resident oriented notices
- Emergency telephone numbers for after hours and weekends
- Reasonable Accommodation Policies and Procedures document
- PHA Plan

E. Repayment Agreement of Amounts Owed to MDHA

MDHA has the discretion to enter into repayment agreements with residents for amounts owed to MDHA, if it is in the best interest of MDHA and the participant has not intentionally committed any act that led to the amount owed.

1. Standards for Repayment: If a repayment agreement is offered to a participant in lieu of full payment, it will be in writing and will be within the following guidelines:

- a. Down payment of at least twenty (20%) to be paid at time of signing the repayment agreement by money order or cashier's check.
- b. The balance is to be paid within twelve (12) consecutive monthly payments starting thirty (30) days from the date of down payment.

2. Exceptions:

- a. Any terms allowing more time for repayment or for a lower down payment must be approved by the Public Housing Division Director or designee.
- b. Strict adherence to the terms of the repayment agreement by the participant is necessary otherwise benefits may be terminated in accordance with this ACOP.

V. Transfer Policy

A. General Transfer Policy

1. Transfers will be made without regard to race, color, national origin, sex, religion, marital or familial status, ancestry, disability or sexual orientation.
2. Under certain circumstances, residents may be transferred to accommodate a disability.
3. Residents will not be transferred to a dwelling unit of equal size, except to alleviate hardship or other undesirable conditions, as determined by the Public Housing Director or designee.
4. Whenever feasible, transfers will be made within the resident's development or the resident's area.
5. A transfer between public housing developments is not considered a move-out.
6. Transfers are not subject to the Decree's desegregative offer requirement.
7. Residents must be in good standing.
8. Residents have the right to request a hearing (refer to MDHA Grievance Procedure (Article IX of this ACOP) if they are refused the right to transfer or if MDHA is requiring them to transfer and they do not want to do so.
9. Transfers are not to be made during the first year of tenancy.

B. Types of Transfers:

MDHA may encounter situations in which it is necessary to move residents from one unit to another.

1. Management Initiated Transfers

- a. **Emergency Transfers:** These transfers are required when conditions pose and immediate threat to live, health or safety of a family or one of its members. Such situations may involve but are not limited to unit or building defects or law enforcement concerns, including domestic violence cases.
 - Emergency transfers shall take priority over new admissions.
- b. **Occupancy Standards Transfers:** These transfers are necessary to correct underhoused or overhoused conditions and must be recommended by the site manager upon annual re-examination or interim re-determination, as required by changes in the family composition, in accordance with the Occupancy Guidelines found in Chapter II, Section M.

These transfers shall take priority over new admissions and are limited to be made when:

- The underhoused (overcrowded) condition is such that the household members over age of six (6) equal more than two (2) persons per bedroom.
- The overhoused condition is such that the family size includes fewer persons than the number of bedrooms in the unit.

2. Resident Initiated Transfers

- a. Reasonable Accommodation: Under certain circumstances, a resident's transfer request may be granted to accommodate a disability. The Reasonable Accommodation Policies and Procedures, Appendix IV of this ACOP, includes the request and verification forms required for this type of transfer.
 - All Reasonable Accommodation transfers shall take priority over new admissions. Transfers to accessible units will be done in accordance to Section C.4 below.
 - Prior to this type of transfer, every effort shall be made to accommodate the needs of disabled residents, including but not limited to, making necessary modifications to the existing unit and providing other alternative forms of reasonable accommodation as detailed in the Reasonable Accommodation Policies.
- b. Resident initiated transfers that are not related to Reasonable Accommodations are not allowed.

3. Assisted Living Facility (ALF) Transfers:

- a. These are transfers of interested and qualified residents of Public Housing developments to an ALF, either recommended by the site manager or requested by the resident.
- b. Transfers to ALFs shall take priority over new admissions to ALFs.
- c. Persons requesting ALF transfers must qualify according to the ALF Admission Criteria stated in Chapter III, Section G, and are subject to the ranking preference established in Chapter II, Section C of this ACOP.

C. Processing Transfers

A centralized transfer waiting list will be administered by ALC.

1. All transfers must be approved by the Public Housing Director or designee, before ALC admits them into the transfer waiting list.
2. Transfers to provide reasonable accommodation recommended for denial by the division director or designee must be reviewed by the 504/ADA Coordinator in accordance with MDHA's Reasonable Accommodation Policies and Procedures document (Appendix IV of this ACOP).
3. Transfers will be made in the following order of priority:

- 1st. Emergency
- 2nd. Reasonable Accommodation
- 3rd. Occupancy Standards

4. Transfers to Uniform Federal Accessibility Standard (UFAS) Units

- a. Transfers of residents with disabilities and placement of applicants with disabilities requiring UFAS -Accessible Units, or units with accessible features (as defined in Appendix I of this ACOP), will be centrally coordinated through the 504/ADA Coordinator's Office with the assistance of ALC.
 - b. When an accessible unit becomes available, the unit will first be offered to a current resident with disabilities in the same development who requires the accessibility features of the vacant, accessible unit and occupying a unit not having those features.
 - c. If there is no current resident in the same development who requires the accessibility features of the vacant, accessible unit, then the vacant, accessible unit will be offered to a resident with disabilities residing in another development who requires the accessibility features of the vacant, accessible unit.
 - d. If there is no current resident who requires the accessibility features of the vacant, accessible unit, then the vacant, accessible unit will be offered to an eligible, qualified applicant with disabilities on the waiting list who can benefit from the accessible features of the available, accessible unit.
 - e. If there is not an eligible, qualified resident or applicant with disabilities on the waiting list who wishes to reside in the available, accessible unit, then it will be offered to an applicant on the waiting list who does not need the accessible features of the unit. See 24 C.F.R. § 8.27. MDHA's *Conventional Public Housing Dwelling Lease* requires residents to relocate to a vacant, non-accessible unit within fifteen (15) days of notice by MDHA if there is an eligible applicant or existing resident with disabilities who requires the accessibility features of the unit.
5. When a head of a household, originally housed in a bedroom by him/herself, has or adopts a child, the family will not be approved for a transfer until the child is six (6) years of age. Exceptions: spouse or partner returns to the unit, marriage takes place, or family decides to remain in the unit and the unit is large enough (using the smallest-unit standard) to accommodate the number of persons now in the household.
6. Split-family transfers are not permitted. Separation of households will be processed as follows:
- a. Resident-Initiated Separation of Households: Families that decide to separate because of divorce or inability to live under the same roof must identify the family member(s) who are willing to establish a new household. Such party may submit an application to be placed on the waiting list during open registration periods. The household member(s) who will be leaving the unit must do so within thirty (30) days of notification by MDHA. The remaining family member(s) may also be required to transfer to a smaller unit if the unit becomes under-occupied after one household moves out and there exist families on the waiting list for that size unit. Whenever a

family cannot agree on which family member(s) remain in the unit, for example in a divorce case, MDHA will rely on the court decree.

- b. If upon recertification, MDHA finds that a family composition has grown beyond the maximum bedroom size unit available in MDHA, whether the family was transferred or not to the maximum sized bedroom unit, the family must identify member(s) who are willing to establish a new household. Such party may submit an application for housing assistance during the open registration period. The household member(s) who are leaving the unit must do so within thirty (30) days of notification by MDHA. The remaining family members may also be required to transfer to a smaller unit if the unit becomes under-occupied after one (1) household moves out and there exist families on the waiting list for that size unit.
 - c. MDHA may transfer a family to a larger unit in order to accommodate the addition of family members by birth. However, in order to maximize the use of scarce affordable housing and in consideration of applicants on the waiting list, transfers of families to separate units are not allowed.
7. The site managers must provide residents who wish to initiate a Reasonable Accommodation transfer with the necessary forms, which include the *Authorization to Release Information*, *Reasonable Accommodation Request*, and *Reasonable Accommodation Verification*, in accordance with the Reasonable Accommodation Policies and Procedures (Appendix VI of this ACOP).
 8. Eligible residents moving from one MDHA program to another are residents in transition between programs (not transfers). The Residents in Transition Policies and Procedures are found in MDHA's Policy and Procedures Manual.
 9. When a resident is allowed to transfer, the resident's name is placed on the transfer waiting list and will be given written notice to this effect.
 10. All exceptions and consideration of mitigating circumstances must be approved by the MDHA Director or designee.

D. Administrative Requirements

1. All residents approved for transfers must have a current rent account with no outstanding balance and must leave the unit in a satisfactory condition. Requests for exceptions to this requirement based on disability will be considered on a case-by-case basis.
2. A family who has been approved for a transfer will be made one (1) offer of an appropriate size unit. At the time the offer is made if the family rejects the offer, a second offer can be made only for good cause (see definition on Appendix I of this ACOP).
3. Once a transfer assignment is made, the resident is required to move within fifteen (15) days of being notified, or face eviction proceedings.
4. Residents will bear the cost of transfers to correct occupancy standards. However, where there is a hardship due to health or other factors, the site manager may recommend that families be reimbursed for out-of-pocket expenses for an occupancy standards transfer in an amount not to exceed a reasonable moving allowance

established by MDHA. Residents who seek reimbursement must provide proof of their out-of-pocket expenses to MDHA, i.e. receipts. The Public Housing Director or designee must approve the expense.

5. Costs associated with transfers that are mandated by MDHA (except occupancy standards) and transfers for reasonable accommodation will be paid in accordance with the Reasonable Accommodation Policies and Procedures (Appendix IV of this ACOP).

E. Good Record Requirement for Transfers

1. In general, and in all cases of all resident-requested transfers, residents will be considered for transfers only if the head of household and any other family members:
 - a. have not engaged in criminal activity that threatens the health and safety of residents and staff;
 - b. do not owe back rent or other charges, or evidence a pattern of late payment;
 - c. meet reasonable housekeeping standards and have no housekeeping lease violations; and
 - d. can have utilities turned on in the name of the head of household (applicable only to properties with tenant-paid utilities).

Requests for exceptions to these requirements based on disability will be considered by MDHA's 504/ADA Coordinator on a case-by case basis:

2. Absent a determination of exception, the following policy applies to transfers:
 - a. If back rent is owed, the resident will not be transferred until a payment plan is established or, if prior payment plans have failed, the back rent is paid in full.
 - b. A resident with housekeeping standards violations will not be transferred until he/she passes a follow-up housekeeping inspection.
 - c. The resident must be in good standing and in compliance with the Lease and Community Policies.

F. Relocation

Residents who are required to temporarily relocate to permit rehabilitation of their units must be provided with:

1. Written notice of the dates and duration of the temporary relocation.
2. Information on alternative housing available.
3. Reimbursement for all reasonable out-of-pocket expenses, including the cost of moving to and from the temporary housing and any increase in monthly rent/utilities costs, upon presentation of acceptable receipts.

Refer to the Public Housing Policies and Procedures Manual, *Relocation of Residents due to Modernization*, page 2.103, for detailed procedures.

VI. Eligibility for Continued Occupancy, Annual Reexaminations and Remaining Family Members

A. Eligibility for Continued Occupancy

Residents who meet the following criteria will be eligible for continued occupancy. Residents not in compliance with the criteria are subject to lease termination and eviction.

1. Qualify as a "Family" as defined in Appendix I of this ACOP.
2. Are in full compliance with the resident obligations and responsibilities as described in the dwelling lease.
3. Whose family members, age six (6) and older, each have Social Security numbers or have certifications on file indicating they have no Social Security number.
4. Who meet HUD standards on citizenship or immigration status or are paying a pro-rated rent.
5. Who are in compliance with MDHA's eight (8) hour per month community service requirements (applicable to public housing developments).

B. Remaining Family Members and Prior Debt

1. Remaining family members must meet all eligibility requirements.
2. Remaining family members age eighteen (18) years or older will be held responsible for arrearages incurred by the former head or spouse. MDHA will not hold remaining family members (other than the head or spouse) responsible for any portion of the arrearage incurred before the remaining member attained age eighteen (18).
3. Remaining family members under age eighteen (18) shall not be held responsible for the rent arrearages incurred by the former head of household.

C. Reexamination (Recertification)

Due to MDHA's large project-based portfolio of units, the recertification schedule is determined by the development in which the household resides, rather than by the tenancy anniversary. After the initial move-in certification, some residents may be re-certified within the first year of tenancy due to the recertification schedule established for the development. In order to have the information available to adjust the rent, the initial request for re-certification will be started at least one hundred and twenty (120) days before the scheduled effective re-certification date.

1. Regular Recertifications: MDHA shall, at least once a year, re-examine the family composition and incomes of all resident families. The families paying Flat Rent shall have their incomes reexamined every three (3) years, but shall still be subject to annual reexamination of the family composition and the community service requirement.
2. Special Recertifications: When it is not possible to estimate family income accurately, a temporary determination will be made with respect to income and a special

recertification will be scheduled every sixty (60) days until a reasonably accurate estimate of income can be made.

3. Interim recertification shall be conducted when:
 - a. There is a change in the head of household that requires a remaining family member to take on the responsibilities of a leaseholder
 - b. There is a change in the family composition, or when the family income increases or decreases \$200 or more per month
 - c. The family qualifies for an earned income disallowance and the 100% income disallowance period begins
 - d. The rent is to be adjusted because the family is entering the 50% earned income disallowance period
 - e. The rent is to be adjusted because the 50% earned income disallowance period ends (refer to Article XII, Section F of this ACOP).
4. Zero Income Families: Unless the family has income that is excluded for rent computation, families reporting zero income will have their circumstances examined every sixty (60) days until they have a stable income. Monetary or non-monetary contributions from persons not residing in the dwelling unit for any purpose other than the payment or reimbursement of medical expenses shall be considered income. Families claiming zero income must complete the Monthly Expense Report listing their monthly expenses and the source of funds to pay for those expenses.
5. Families claiming income from contribution must provide a notarized *Income from Contribution* form signed by the persons providing the contribution.

D. Recertification Procedures

1. At the time of recertification, all adult members of the household will be required to sign an application for continued occupancy, the community service certification, if applicable, and other forms required by USHUD and MDHA.
2. Income, allowances, Social Security numbers, and such other data as is deemed necessary will be verified, and all verified findings will be filed in the resident's file.
3. Verified information will be analyzed and a determination made with respect to:
 - a. Eligibility of the resident as a family or as the remaining member of a family;
 - b. Unit size required for the family (per *Occupancy Guidelines*, Chapter II, Section M);
 - c. Rent the family should pay; and
 - d. Compliance with the Community Service Requirements (public housing residents only).

4. MDHA will access criminal justice records, including sex offender checks, of household members 16 of age and over with the purpose of determining continued assistance under the program, at recertification and at any time MDHA deems it necessary.
5. Residents with seasonal or part-time employment of a cyclical nature will be asked for third party documentation of their employment including start and ending dates.
6. Income shall be computed in accordance with the definitions and procedures set forth in Federal regulations and this ACOP.
7. Families failing to respond to the initial annual recertification appointment will be issued a second and final recertification appointment. Failure to respond to the final request will result in the family being sent a notice of lease violation and referred to the Regional Manager for termination of the lease.
8. Recertification procedures also apply in the event residents are under the eviction or termination process. The recertification is not an offer of extension of the lease agreement and does not constitute a waiver of such eviction or termination proceeding.

E. Enterprise Income Verification and Third Party Verifications

Enterprise Income Verification (EIV) and third party verifications are the most desirable forms of verification of the information provided by the resident at recertification. Third party verifications are detailed in Chapter II, Section G.8 of this ACOP.

1. EIV system is the preferred form of income verification. If the EIV information matches the resident-provided income, or if not substantially different, then third party verifications are not necessary. Currently, a substantial difference requiring third party verification is defined as being greater than \$200 per month (\$2,400 per year), unless amended by MDHA.
2. If the EIV system is not available or if the information is substantially different to the resident-provided information, then written verification from third parties is the next most desirable form of verification.
 - The EIV information can not be accessed unless a current (unexpired) Authorization to Release Information (HUD Form 9886) is on file. This form must be signed by all adult family members and expires fifteen (15) months after it is signed.
 - Tenant income information derived from the EIV system is confidential and cannot be released to outside parties or unauthorized staff. This information is exempt from the Florida Sunshine Law and is required by HUD to be kept private under penalty of Federal law. Any EIV derived information is required to be kept guarded under lock and key and must be shredded and destroyed when no longer needed. Copies are not to be kept in tenant files to avoid risking the release of such information to anyone other than the client and authorized MDHA staff. Unauthorized disclosure or inspection of EIV data can result in a felony conviction punishable by a fine up to \$5000 and/or 5 years imprisonment, as well as civil penalties. (Privacy Act of 1974 as amended, 5 U.S.C § 552(a)).
3. In cases where EIV income data is substantially different than tenant-reported income, MDHA will utilize the following guidelines:

- a. Request written third party verification from the discrepant income source. For EIV Social Security Administration (SSA) benefit discrepancies, MDHA shall require the tenant to obtain a current original SSA benefit letter within ten (10) business days of the interview date.
 - b. Review historical income data for patterns of employment, paid benefits, and/or receipt of other income, when MDHA cannot readily anticipate income, such as in cases of seasonal employment, unstable working hours, and suspected fraud.
 - c. Analyze all data (EIV data, third party verification and other documents/information provided by the family) and attempt to resolve the income discrepancy.
 - d. Use the most current verified income data (and historical income data if appropriate) to calculate anticipated annual income.
4. MDHA may recommend terminating assistance on a case-by-case basis for fraud as opposed to tenant error (see definitions in Appendix I of this ACOP), including but not limited to forgery and pattern of unreported or under reported income. In verified differences of \$4,800 or more per year and when fraud has occurred, upon the regional manager's approval, MDHA shall refer the case to OIG or any other law enforcement organization with jurisdiction to investigate and prosecute fraud in assisted housing, prior to commencement of the eviction process.
 5. Except as specified in paragraph four (4) above, in verified differences of \$200 or more per month, MDHA shall require the family to enter into a repayment agreement for monies owed. Should the family refuse to enter in a repayment agreement or to fulfill its obligations under its repayment agreement, MDHA shall recommend termination of assistance, start the eviction process, and refer the case to OIG or other law enforcement organization with jurisdiction to investigate and prosecute fraud in assisted housing.

F. Action Following Recertification

1. If there is any change in rent, a Notice of Rent Adjustment is sent to the resident notifying the amount and the effective date of the new rent. If there is a change in the family composition, a lease addendum is executed by the head of household and the new family members.
2. If any change in the unit size is required, the resident will be placed on a transfer list in accordance with the transfer criteria described on Chapter V this ACOP and moved to an appropriate unit when one becomes available, subject to the requirements stipulated in the transfer policy section and approved by the Public Housing Director or designee, where required.

VII. Interim Rent Adjustments

A. Adjusting Rent between Regular Recertification

Rent is re-determined between annual recertifications when a resident undergoes a change in family composition or income.

1. Family composition changes. The resident must report and provide verification of those changes which involve the loss or gain of a family member. An increase due to additions to the family by birth, adoption, or by operation of law, or a decrease in family size may result in a change in the Tenant Rent. Family size changes must be reported within ten (10) days of the status change.
2. Family income changes
 - a. Residents must report within ten (10) days of occurrence a change in income as follows:
 - If the total family income increases \$200 or more per month
 - If the total income decreases \$200 or more for a period longer than one month
 - Other changes stipulated in the dwelling lease
 - b. The resident may request an interim adjustment of rent as a result of a decrease or loss of income that will be for a period longer than thirty (30) days. If as a result of any interim change the rent is decreased, the resident must report, and provide verification of, all subsequent changes in income and family composition as they occur until their next scheduled annual recertification. The resident's rent will be adjusted in accordance with Federal regulations.
 - c. As long as information regarding family status changes is reported in a timely manner by the family, increases in rent will be made effective the first day of the second month following the month in which the change is reported and proper verification completed. Decreases in rent will be made effective the first day of the month following the month in which the change is reported and proper verification completed.
3. Earned Income Disallowance (EID) (refer to Chapter XII, Section F of this ACOP):
 - a. The family qualifies for the disallowance of increase in earned income, and the first 12-month period of 100% income disallowance begins.
 - b. At the end of the first 12-month period of 100% income disallowance, an adjustment of the rent shall be made for the second 12-month period to factor a 50% income disallowance.
4. Misrepresentation by the resident
 - a. If it is found that the resident has misrepresented facts to MDHA so that rent being paid is less than should be charged, then the increase in rent shall be retroactive to the first of the month following the effective date of the change in income. In justifiable cases, MDHA may take such action as it deems advisable in accordance

with federal or Florida law, including but not limited to termination of assistance and eviction.

- b. Decreases in income resulting from welfare fraud or from welfare cuts for failure to comply with economic self sufficiency requirements are not eligible for rent reductions (imputed welfare income).

B. Hardship for Families Paying Minimum Rent

Interim reexaminations to temporarily adjust the rent will be made for families under hardship. A hardship exemption shall be granted to residents who can document that they are unable to pay the minimum rent of \$50 because of a long-term hardship (over ninety (90) days).

Examples under which residents would qualify for the hardship exemption to the minimum rent would be limited to the following:

- a. The family has lost eligibility for or is applying for an eligibility determination for a Federal, State or local assistance program;
- b. The family would be evicted as a result of the imposition of the minimum rent requirements;
- c. The income of the family has decreased because of changed circumstances, including loss of employment;
- d. A death in the family has occurred; or
- e. Other circumstances as determined by MDHA.

The minimum rent hardship exemption is retroactive to October 21, 1998. If any resident who qualified for the hardship exemption was charged a minimum rent since that time, the resident may be entitled to a retroactive credit.

VIII. Lease Termination Procedures

A. General Policy: Lease Termination

The Lease may be terminated by MDHA in compliance with USHUD regulations and in accordance with the provisions contained within the Public Housing and/or Chapter 83, Part 2, of the Florida Statutes.

The Lease may be terminated by the resident not earlier than at the end of the first year by giving thirty (30) days written notice and upon compliance with all applicable procedures to properly vacate the unit and to depart in good standing.

MDHA shall have the right to terminate or refuse to renew the Lease for failure by the resident to fulfill his/her obligations set forth in the Lease agreement and for serious or repeated violations by the resident of one (1) or more of the material terms of the Lease. The following causes for termination contained in the Lease include but may not be limited to:

1. Failure by the resident or any member of his/her household to fulfill his/her obligations outlined under the Articles of the Lease, the Community Policies, or Tenant Rules and Regulations, and any addenda or amendments to the Lease, Community Policies or Tenant Rules and Regulations.
2. For Public Housing residents, a violation by the resident or any member of his/her household of one (1) or more terms of the Lease.
3. The denial of service, disconnection or shutting off of utilities that the resident is responsible for paying.
4. Violation of the One Strike rule for any drug-related criminal activity, violent criminal activity, or non-violent criminal activity, whether on or off the premises, committed by the resident, any member of his/her household, a guest or a person under the control of the resident, that threatens the health, safety, or right to peaceful enjoyment of the premises by other residents or employees of MDHA. Any such criminal activity, even in the absence of an arrest or a conviction, shall be cause for termination of tenancy, and for eviction from the dwelling unit:
 - a. Drug-related criminal activity shall include: illegal possession, illegal manufacture, sale, distribution, use and/or possession with intent to manufacture, sell, distribute or use a controlled substance.
 - b. Violent criminal activity shall include: any criminal activity that has as one (1) of its elements the use, attempted use, or threatened use of physical force substantial enough to cause, or be reasonably likely to cause, non-trivial bodily injury or property damage.
 - c. A fugitive felon or parole violator after conviction of a crime or attempt to commit a crime is considered a person that threatens the health, safety and right to peaceful enjoyment of the premises by other residents or employees of MDHA.

5. If the non-violent criminal activity does not threaten the health, safety or right to peaceful enjoyment of the residents, after a warning has been issued, any subsequent warning regarding the same individual shall be considered a violation of the lease.
6. A record of alcohol abuse or pattern of abuse, when the record or pattern of abuse poses a direct threat to the health or safety of others shall be considered a violation of the lease.
7. Failure by the resident to report to any recertification interview or provide verification of any information required by MDHA.
8. Discovery of material false statements in connection with information provided at application or recertifications, or fraud committed by the resident in connection with any federally assisted housing program.
9. For Public Housing residents only, failure to comply with Federal, State or local public assistance program requirements related to work activities, community service and self-sufficiency requirements.
10. The issuance of one 14-day notice of termination for non-payment of rent in any twelve month period.
11. If the resident or any member of his/her household, a guest or a person under the resident's control, engages in the illegal use, or threatened use of or display of firearms, fire bombs or other weapons on MDHA property.
12. If the conduct of the resident, any member of his/her household, a guest or a person under the resident's control, is such that there is a likelihood that his or her presence on the premises may lead to personal injury or property damage.
13. For Public Housing residents, if school-age children do not attend school regularly and are absent more than fifteen (15) unexcused days within any 90-day period of a given school year except in instances of death, serious illness or injury, or the child who attains the age of sixteen (16) years files a formal declaration of intent to terminate school enrollment with the School Board.
14. Serious or repeated damage to the dwelling unit, creation of physical hazards in the unit, common areas, grounds, or parking areas.
15. Any fire on the premises caused by carelessness, failure to supervise children or unattended cooking.
16. If the resident, any member of his/her household, a guest or a person under the resident's control threatens, obstructs or interferes with a MDHA employee or any government official conducting official business on or around the premises.
17. The resident refuses to accept MDHA's proposed change(s) to the Lease.
18. If the resident's continued occupancy repeatedly interferes with, or is counter to County policies, or if the Lease has expired and has not been renewed.

B. Mitigating Circumstances

1. Prior to MDHA's decision to terminate assistance for criminal activity or for any activity that threatens the health, safety or right to peaceful enjoyment of the premises by other residents, MDHA may consider all circumstances relevant to a particular case, such as the seriousness of the offending action, the extent of participation by the leaseholder in the offending action, the effects that the eviction would have on family members not involved in the offending activity and the extent to which the leaseholder has shown personal responsibility and has taken all reasonable steps to prevent or mitigate the offending action.
 - a. Upon determination by the Public Housing Director or designee, MDHA may require a tenant to exclude a household member in order to continue to reside in the assisted unit, where that household member has participated in or been culpable for the action or failure to act that warrants termination.
 - b. If MDHA's Public Housing Director or designee determines that the tenant may continue to reside in the unit by excluding the household member who participated in or was culpable for the action or failure to act warranting termination, MDHA will terminate tenancy if another household member commits a criminal activity warranting termination within five (5) years of the first offending activity.
 - b. Upon determination by the Public Housing Director or designee, MDHA, in its decision whether to terminate tenancy for illegal drug use by a household member who is no longer engaging in such use, or for alcohol abuse or pattern of alcohol abuse by a household member who is no longer engaging in such abuse, may consider whether such household member is or has successfully completed a supervised drug or alcohol rehabilitation program, or has otherwise been rehabilitated successfully. For this purpose, MDHA shall require the household member to submit evidence of the current participation in, or successful completion of, a supervised drug or alcohol rehabilitation program or evidence of otherwise having been rehabilitated successfully.

C. Notice Requirements

If the MDHA proposes to terminate the Lease, the termination of the Lease shall be by Federal and State law as follows or as may be amended in the future:

1. MDHA shall give the applicable written notice of termination (14-day Notice of Termination for Non-payment of Rent), if said termination is caused by resident's failure to pay rent. Such notice shall not be sent until the rent is delinquent in accordance with the Lease.
2. MDHA shall give seven (7) days written notice of termination for serious violations of the Lease.
3. MDHA shall give thirty (30) days written notice of termination in any other case or cause.
4. The notice of termination to the resident shall state the reasons for termination; shall inform the resident of his/her right to make such reply, settlement, and/or request for a hearing in accordance with the Grievance Policy, Chapter IX if this ACOP.

D. Recordkeeping Requirements

A written record of every termination and/or eviction shall be maintained by MDHA, and shall contain the following information:

1. Name of resident, race and ethnicity, number and identification of unit occupied;
2. Date of the Notice of Lease Termination and any other state or local notices required, which may be on the same form and run concurrently;
3. Specific reason(s) for the Notice(s), with section of the lease violated, and other facts pertinent to the issuing of the Notice(s) described in detail;
4. Date and method of notifying resident; and
5. Summaries of any conferences held with resident including dates, names of conference participants and conclusions.

Such records may be maintained electronically.

IX. Grievance Policy

Applicants of Public Housing have the right to obtain an informal review and current residents have the right to request an administrative hearing, when required by federal regulations, regarding MDHA's action or failure to act which has an adverse effect on the individual resident's rights, duties, welfare or status.

A. Applicant's Informal Reviews

Applicants denied program participation or removed from the waiting list shall be entitled to an informal review conducted by MDHA. Applicants will be notified of such determination in writing, generally at the time of their initial certification appointment.

The process described in MDHA's Reasonable Accommodation Policy and Procedures document (Appendix IV of this ACOP) will be followed for applicants denied reasonable accommodation requests. Further, this document describes the process that must be followed by the hearing officer if he/she becomes aware during the informal review that an applicant's ineligibility determination occurred because of the applicant's disability.

It is an applicant's responsibility to notify ALC when there is a change in address.

1. Processing Removals

- a. An applicant who is determined ineligible for housing program benefits, shall be notified in writing that his/her name will be removed from the waiting list unless he/she requests an informal review by contacting MDHA within thirty (30) days of the notice. The applicant or mobility pool member whose mail is returned by the post office will be automatically withdrawn from the waiting list.
- b. Applicants or mobility pool members who have been removed from the waiting list for failing to respond to notices calling him/her in for processing may, within one (1) year of being removed from the waiting list, request an informal review seeking reinstatement to his/her original place on the waiting list.
- c. If MDHA proposes to deny admission on the basis of a criminal record, MDHA will provide the family member with the criminal record and the head of household with a copy of the criminal record upon request either before or at the informal review and provide an opportunity to dispute the accuracy and relevance of that record. The applicant or mobility pool member will have thirty (30) calendar days to dispute the accuracy and relevance of the record in writing. If MDHA does not receive the dispute within the allotted time, the applicant or mobility pool member will be denied participation and his/her name removed from the waiting list.

2. Requesting an informal review

Applicants may request an informal review in writing to the address or fax number indicated on the adverse action letter. The request must be made within thirty (30) days from the date of the notice. MDHA will schedule the review for the next available date and forward written notification to the applicant.

3. Informal Review Procedures

- a. The informal review will be conducted by designated ALC staff that shall listen to testimony or other evidence that the applicant may wish to present.
- b. The informal review's decision will be made in writing, within thirty (30) calendar days of the review.
- c. The decision of the informal review shall be final. In extenuating circumstances, the MDHA Director or designee may review and modify the decision of an informal reviewer.. The informal review's decision, however, shall not abridge any other rights the applicants have under law.
- d. Applicants who have not completed application forms as instructed in the Housing Application Instructions will not be processed and their names will not be placed on the waiting list. Applicants in this situation will not be offered an informal review.

B. Procedure for Obtaining an Administrative Hearings

- 1. Residents of Public Housing developments, who desire a hearing, must submit a written request to the MDHA's representative within five (5) business days of receiving a notice of proposed adverse action. The written request must specify:

- a. The reason(s) for the grievance or content of MDHA's proposed action;
and
- b. The action or relief sought.

The process described in MDHA's Reasonable Accommodation Policy and Procedures (Appendix IV of this ACOP) will be followed for residents denied reasonable accommodation requests. Further, this document describes the process that must be followed if the hearing panel becomes aware that the reason for the termination of assistance or other adverse action occurred because of the resident's disability.

- 2. In the event of a dispute regarding rent amount, before the hearing is scheduled the resident shall pay an escrow deposit in the same amount of rent due and payable as of the first day of the preceding the month in which the act or failure to act took place. The complainant should thereafter deposit the same amount monthly in the escrow account until the complaint is resolved by decision of the hearing officer or hearing panel.
 - a. The escrow deposit requirement may be waived by MDHA in extenuating circumstances, and where required by financial hardship exemption from minimum rent (refer to Chapter XII, Item E.4 of this ACOP), or welfare benefits reduction in calculation of family income, for the portion of the rent attributable to the imputed welfare income (see definition on Appendix I of this ACOP).
 - b. Unless so waived, the failure to make such payments shall result in a termination of the rights to grievance procedure and all sums will immediately become due and payable under the lease.
- 3. A hearing may be held via telephone conference in situations where a health condition or portability prevents any of the parties from attending the hearing in person. Hearings held by telephone conferences are not allowed simply for the convenience of any of the

parties. Any other reasons for telephone conference hearings shall be at the discretion of the hearing office supervisor.

C. Applicability and Exclusions

The grievance procedure shall be applicable to all individual grievances, with the following exceptions:

1. Any termination of tenancy or eviction that involves:
 - a. Any violent or drug-related criminal activity on or off MDHA owned, managed or controlled housing, office, warehouse or other property;
 - b. Any criminal activity (including non-violent) that threatens the health, safety, or right to peaceful enjoyment of the premises by other residents or employees of MDHA;
 - c. Any criminal activity that resulted in felony conviction of a household member.

Before eviction from the dwelling unit, the state law requires the tenant to be given the opportunity for a hearing in court which provides the basic element of due process (see definition on Appendix I of this ACOP).

2. Disputes between tenants not involving MDHA.
3. Class grievances.
4. Negotiating policy changes.
5. Discrepancies in wages shown in data provided by the Enterprise Income Verification (EIV) system. Such discrepancies must be clarified through third party verifications to employers. For EIV Social Security Administration (SSA) benefit discrepancies, MDHA should request the resident to obtain a current, original SSA benefit letter within 10 business days of the interview day.

D. Hearing Panel

1. The Hearing Panel consists of three (3) persons:
 - a. A MDHA employee appointed by the MDHA Director or designee, but such employee may not be the public housing or Section 8 New Construction site manager or a member of his/her staff from the development at which the resident submitting the grievance resides;
 - b. A resident representative nominated by the appropriate Regional Chairperson for the Overall Tenant Advisory Council (OTAC); and
 - c. A resident representative nominated by the Resident Council of the development in which the complainant resides.

If OTAC or the Resident Council fails to nominate their respective panel member, the MDHA Director or designee may select a resident or a staff member but not the site manager or his/her staff at the development where the complainant resides.

E. Hearing Process

1. The parties may be represented by legal counsel or another person chosen as a representative.
2. Prior to the hearing, the resident may examine and copy at his/her expense all documents, records, and regulations of MDHA that may be relevant to the hearing, unless otherwise prohibited by law. In the event, MDHA does not provide the resident with a copy of his or her file prior to the hearing, MDHA is prohibited from relying on the contents of the file at the hearing as set forth in the federal regulations.
3. If the resident fails to appear at a scheduled hearing, except for verifiable good cause, the resident is in automatic default and the decision rendered by the Grievance Panel in his/her absence shall be final.
4. At the hearing, the resident must first show entitlement to the relief sought. Thereafter, MDHA has the burden of justifying MDHA's action, or failure to act, at which the complaint is directed.
5. Oral or documentary evidence pertinent to the facts and issues raised by the complainant may be received without regard to admissibility under the rules of evidence applicable to judicial proceedings.
6. The MDHA employee appointed to the Hearing Panel by the MDHA Director, acting as the Chairperson of the Hearing Panel, shall require MDHA, the resident, Resident Counsel, and other participants or spectators to conduct themselves in an orderly fashion. Failure to comply with the directions of the Chairperson may result in exclusion from the proceedings; in a decision adverse to the interest of the disorderly party; and granting or denial of the relief sought, as appropriate.

F. Decision of the Hearing Panel

1. The decision of the Hearing Panel shall be based solely and exclusively upon the facts presented at the hearing and upon applicable County and Federal regulations and requirements. This decision shall be in writing by the chairperson of the Hearing Panel specifying the reasons thereof, within fourteen (14) calendar days of the hearing. A copy of the decision must be forwarded to the resident and another copy to the management office to be filed in the resident's records.
2. A decision by the Hearing Panel in favor of MDHA, or which denies the relief sought by the resident in whole or in part, shall not constitute a waiver of or affect in any manner whatever, the resident's rights to trial de novo or judicial review in any judicial proceeding which may thereafter be brought in the matter.
3. The decision of the Hearing Panel shall be final. In extenuating circumstances, upon the resident's written request for review, the MDHA Director may modify the decision of a Hearing Panel. The Hearing Panel's decision, however, shall not abridge any other rights the participants have under law.

4. The Hearing Panel must reach a unanimous decision. When all members of the panel are not in agreement, the chairperson of the hearing panel must refer the case to the Public Housing Director or designee for the final decision, who may request additional information and/or interview with the resident, if deemed necessary.

X. Utilities and Maintenance Charges

A. Utilities

This section establishes the procedures for utility allowances for resident-purchased utilities in public housing developments. Utilities are defined as electricity, gas, water and sewer. Telephone and cable television are not considered utilities under this policy.

1. Standard for utility consumption allowances:
 - a. MDHA shall establish for each development, by bedroom size, a consumption allowance which will afford a reasonable consumption of utilities by an energy conservative household of modest circumstances consistent with the requirement of a safe, sanitary and healthful living environment. The consumption allowance shall be a uniform monthly amount based on an average monthly utility requirement for a year.
2. Review and revision of allowance:
 - a. Annual review: MDHA shall review the utility allowances annually or in accordance with federal regulatory requirements and shall adjust the amount of utility allowance if necessary to reflect changes in utility rates and/or utility consumptions.
 - b. Interim revision due to rate changes: MDHA may revise its utility allowances for resident-purchased utilities between annual reviews if there is a rate change (including fuel adjustments). MDHA is required to do so if a rate change, by itself or together with prior rate changes not adjusted for, results in a change of 10% or more from the rates on which such allowances were based.
 - c. Schedule of Utility Allowances: Schedules of utility allowances for each development are posted on the bulletin board in each development office and will be made available to the resident upon request.
 - d. Relief from excess consumption: Residents may request relief from excess utility consumption if the request is based on medical needs of the elderly, ill or disabled resident or for special factors affecting utility usage not within the control of the resident.

B. Maintenance Charges

1. This section establishes the procedures for maintenance charges in Public Housing and Section 8 New Construction developments.
 - a. Schedules of maintenance charges are posted in the development offices and will be made available to residents upon request.
 - b. Residents will be charged for material and services at the price list in effect at the time of repair for intentional damages or damages caused by negligence of the residents.

- c. MDHA will notify the resident by mail or in person of any maintenance charges for which he/she will be billed, and his/her rights to request a hearing under the grievance procedure.
- d. At the resident's request for a hearing, the charges will not become due until the grievance process has been completed.

2. Move-Out Charges:

- a. Upon the move out inspection, residents will be held responsible for all damages beyond normal wear and tear to the unit and appliances.
- b. Damages beyond normal wear and tear not repaired will be charged to the resident's security deposit and if necessary the resident's account at the time of move-out. The price list in effect at the move-out will be utilized to price labor and materials.

XI. Flat Rents

Flat Rents are market-based rents. Flat Rents vary by unit size and type and also by development location. Flat Rents represent the actual market value of MDHA's Public Housing units. ALC must offer new admissions to Public Housing developments a choice of paying a flat or income-based rent at the time of admission. Further, once each year, at the annual recertification, all Public Housing residents are offered the choice of paying the Flat Rent or income-based rent. The Flat Rent does not apply to residents of Section 8 New Construction developments.

A. Development of Flat Rents

MDHA will take into consideration the following information in developing its Flat Rent schedule:

- Rents of non-assisted rental units in the immediate neighborhood
- Size of MDHA's units compared to non-assisted rental units from the neighborhood
- Age, type of unit and condition of MDHA's units compared to non-assisted rental units from the neighborhood
- Land use in the surrounding neighborhood
- Amenities (childcare, laundry facilities, playgrounds, community rooms, social services, education/job training programs, etc.) at MDHA's properties and in the surrounding neighborhood
- Crime in MDHA's developments and the surrounding neighborhood
- Quality of local schools serving each MDHA development
- Availability of public transportation at each MDHA development and
- Availability of accessible units for persons with mobility impairments

B. Annual Update of Flat Rents

MDHA shall review the Flat Rent structure annually and adjust the rents as needed. When a Public Housing resident chooses Flat Rent, his/her rent shall be adjusted only at the next regular recertification rather than at the point the Flat Rent may change.

C. Recertification of Families on Flat Rents

Public Housing residents paying Flat Rents are required to recertify income every three (3) years, rather than annually. However, such residents are still required to participate in an annual recertification for any changes in the family composition, to ensure that unit size is still appropriate, and to check compliance with the community service requirements, if applicable.

D. Hardship of Families Paying Flat Rents

Families who have elected to pay flat rent are eligible to switch to a lower income-based rent, if the family has experienced a verified:

- a. loss in income because of changes in circumstances, including loss or reduction of employment, death in the family, or reduction in or loss of earnings or other assistance;
- b. Increase in expenses because of changes in circumstances such as increased medical costs, childcare, transportation, education, or similar items.

XII. Determining Income and Income-Based Rent

A. Annual Income

Annual income is the anticipated total income from all sources, including net income derived from assets, received by the family head and spouse (even if temporarily absent) and by each additional family member including all net income from assets for the 12-month period following the effective date of initial determination or recertification of income, exclusive of income that is temporary, nonrecurring, or sporadic as defined below, or is specifically excluded from income by other federal statute. Annual income includes but is not limited to:

1. The full amount, before any payroll deductions, of wages and salaries, overtime pay, commissions, fees, tips and bonuses, and other compensation for personal services;
2. The net income from operation of a business or profession, including any withdrawal of cash or assets from the operation of the business. Expenditures for business expansion or amortization of capital indebtedness shall not be used as deductions in determining the net income from a business. An allowance for the straight line depreciation of assets used in a business or profession may be deducted as provided in the Internal Revenue Service (IRS) regulations. Withdrawals of cash or assets will not be considered income when used to reimburse the family for cash or assets invested in the business;
3. Interest, dividends, and other net income of any kind from real or personal property. Expenditures for amortization of capital indebtedness shall not be used as deductions in determining net income. An allowance for the straight line depreciation of real or personal property is permitted. Withdrawals of cash or assets will not be considered as income when used to reimburse the family for cash or assets invested in the property. If the family has net family assets in excess of \$5,000, annual income shall include the greater of the actual income derived from all net family assets or a percentage of the value of such assets based on the current passbook savings rate as determined by USHUD;
4. The full amount of periodic payments received from Social Security, annuities, insurance policies, retirement funds, pensions, disability or death benefits, and other similar types of periodic receipts (See paragraph B (14). below for treatment of delayed or deferred periodic payment of social security or supplemental security income benefits);
5. Payments in lieu of earnings, such as unemployment and disability compensation, worker's compensation, and severance pay (See paragraph B (3) below concerning treatment of lump sum additions as family assets);
6. All welfare assistance payments (Temporary Assistance to Needy Families, General Assistance) received by or on behalf of any family member;
7. Periodic and determinable allowances, such as alimony and child support payments, and regular cash and non-cash contributions or gifts received from agencies or persons not residing in the dwelling made to or on behalf of family members; and
8. All regular pay, special pay, and allowances of a family member in the Armed Forces. (See paragraph B (7). below concerning pay for exposure to hostile fire.)

B. Items Not Included in Annual Income

Annual Income does not include the following or as may be amended by federal regulations:

1. Income from the employment of children (including foster children) under the age of 18 years;
2. Payments received for the care of foster children or foster adults (usually individuals with disabilities, unrelated to the resident family, who are unable to live alone);
3. Lump sum additions to family assets, such as inheritances, insurance payments (including payments under health and accident insurance, and worker's compensation), capital gains, onetime lottery winnings, and settlement for personal property losses (but see paragraphs A (3) and (4) above if the payments are or will be periodic in nature); (See paragraph (14). below for treatment of delayed or deferred periodic payments of Social Security or Supplemental Security Income benefits).
4. Amounts received by the family that are specifically for, or in reimbursement of, the cost of medical expenses for any family member;
5. Income of a live-in aide, provided the person meets the definition of a live-in aide (See Appendix I of this ACOP);
6. The full amount of student financial assistance paid directly to the student or the educational institution;
7. The special pay to a family member serving in the Armed Forces who is exposed to hostile fire;
8. Certain amounts received that are related to participation in the following programs:
 - a. Amounts received under USHUD funded training programs (e.g. Step-up program: excludes stipends, wages, transportation payments, child care vouchers, etc. for the duration of the training);
 - b. Amounts received by a person with disabilities that are disregarded for a limited time for purposes of Supplemental Security Income and benefits that are set aside for use under a Plan to Attain Self-Sufficiency (PASS);
 - c. Amounts received by a participant in other publicly assisted programs that are specifically for, or in reimbursement of, out-of-pocket expenses incurred (special equipment, clothing, transportation, child care, etc.) to allow participation in a specific program;
 - d. Effective June 1, 2004 and while in effect, exclude from annual income the \$600 transitional assistance subsidy (credit) for elderly and disabled applicants and tenants enrolled in the Medicare Discount Card transitional assistance program,
 - e. A resident services stipend. A resident services stipend is a modest amount (not to exceed \$200/month) received by a public housing resident for performing a service for MDHA, on a part-time basis, that enhances the quality of life in public housing.

Such services may include but are not limited to, fire patrol, hall monitoring, and resident initiatives coordination. No resident may receive more than one such stipend during the same period of time;

- f. Incremental earnings and/or benefits resulting to any family member from participation in qualifying state or local employment training program (including training programs not affiliated with the local government), and training of family members as resident management staff. Amounts excluded by this provision must be received under employment training programs with clearly defined goals and objectives, and are excluded only for a limited period as determined in advance by the PHA;
9. Temporary, non-recurring, or sporadic income (including gifts);
 10. Reparation payments paid by foreign governments pursuant to claims filed under the laws of that government by persons who were persecuted during the Nazi era;
 11. Earnings in excess of \$480 for each full-time student eighteen (18) years old or older (excluding the head of the household and spouse);
 12. Adoption assistance payments in excess of \$480 per adopted child;
 13. The incremental earnings and benefits to any Public Housing resident (excluding Section 8 New Construction developments) whose 1) annual income increased due to employment of a family member who was unemployed for one (1) or more years previous to employment; or 2) annual income increases as the result of increased earnings by a family member during participation in any economic self-sufficiency or other job training program; or 3) annual income increases due to new employment or increased earnings of a family member during or within six (6) months of receiving state-funded assistance, benefits or services, will not be included during the exclusion periods (see Section F of this Chapter for additional details).
 14. Deferred periodic payments of supplemental security income and social security benefits that are received in a lump sum payment;
 15. Amounts received by the family in the form of refunds or rebates under state or local law for property taxes paid on the dwelling unit;
 16. Amounts paid by a state agency to a family with a developmentally disabled family member living at home to offset the cost of services and equipment needed to keep the developmentally disabled family member at home;
 17. Amounts specifically excluded by any other federal statute from consideration as income for purposes of determining eligibility or benefits under a category of assistance programs that includes assistance under the United States Housing Act of 1937. A notice will be published by USHUD in the Federal Register identifying the benefits that qualify for this exclusion. Updates will be published and distributed when necessary.
 18. The following is a list of benefits excluded by other federal statute:
 - a. The value of the allotment provided to an eligible household for coupons under the Food Stamp Act of 1977 [7 USC 2017 (h)];

- b. Payments to volunteers under the Domestic Volunteer Service Act of 1973 [42 USC 5044 (g), 5088]. Examples of programs under this Act include but are not limited to:
- The Retired Senior Volunteer Program (RSVP), Foster Grandparent Program (FGP), Senior Companion Program (SCP), and the Older American Committee Service Program;
 - National Volunteer Antipoverty Programs such as VISTA, Peace Corps, Service Learning Program, and Special Volunteer Programs;
 - Small Business Administration Programs such as the National Volunteer Program to Assist Small Business and Promote Volunteer Service to Persons with Business Experience, Service Corps of Retired Executives (SCORE), and Active Corps of Executives (ACE).
- c. Payments received under the Alaska Native Claims Settlement Act [43 USC.1626 (a)];
- d. Income derived from certain submarginal land of the United States that is held in trust for certain Indian tribes [(25 USC. 459e);
- e. Payments or allowances made under the Department of Health and Human Services' Low-Income Home Energy Assistance Program [42 USC 8624 (f)];
- f. Payments received under programs funded in whole or in part under the Job Training Partnership Act [29 USC 1552 (b)] ;
- g. Income derived from the disposition of funds of the Grand River Band of Ottawa Indians [Pub. L. 94-540, 90 Stat 2503-04];
- h. The first \$2,000 of per capita shares received from judgment funds awarded by the Indian Claims Commission or the Court of Claims (25 USC 1407-08), or from funds held in trust for an Indian Tribe by the Secretary of Interior [25 USC 117b, 1407]; and
- i. Amounts of scholarships funded under Title IV of the Higher Education Act of 1965 including awards under the Federal work-study program or under the Bureau of Indian Affairs student assistance programs [20 USC 1087 uu]. Examples of Title IV programs include but are not limited to: Basic Educational Opportunity Grants (Pell Grants), Supplemental Opportunity Grants, State Student Incentive Grants, College Work Study, and Byrd Scholarships.
- j. Payments received from programs funded under Title V of the Older Americans Act of 1965 [42 USC 3056 (f)]. Examples of programs under this act include but are not limited to: Senior Community Services Employment Program (CSEP), National Caucus Center on the Black Aged, National Urban League, Association National Pro Personas Mayores, National Council on Aging, American Association of Retired Persons, National Council on Senior Citizens, and Green Thumb.
- k. Payments received after January 1, 1989 from the Agent Orange Settlement Fund or any other fund established in the In Re Agent Orange product liability litigation;
- l. Payments received under the Maine Indian Claims Settlement Act of 1980 (Pub. L. 96- 420, 94 Stat. 1785);

- m. The value of any child care provided or arranged (or any amount received as payment for such care or reimbursement for costs incurred for such care) under the Child Care and Development Block Grant Act of 1990 (42 USC 9858q);
- n. Earned income tax credit refund payments received on or after January 1, 1991 (26 USC 32 (j));
- o. Payments by the Indian Claims Commission to the Confederated Tribes and Bands of Yakima Indian Nation or the Apache Tribe of Mescalero Reservation;
- p. Allowances, earnings and payments to AmeriCorps participants under the National and Community Service Act of 1990;

C. Anticipating Annual Income

If it is not feasible to anticipate income for a 12-month period, MDHA may use the annualized income anticipated for a shorter period, subject to an interim adjustment at the end of the shorter period. For example, this method would be used for teachers who are only paid for ten (10) months, or for tenants receiving unemployment compensation.

D. Adjusted Income

Adjusted Income is the income upon which rent is based. Adjusted income means Annual Income less the following deductions and exemptions:

1. For all Families

- a. Child Care Expenses - A deduction of amounts anticipated to be paid by the family for the care of children under thirteen (13) years of age for the period for which Annual Income is computed, but only when such care is necessary to enable a family member to be gainfully employed, to seek employment or to further his/her education. Amounts deducted must be unreimbursed expenses and shall not exceed: (a) the amount of income earned by the family member released to work; or (b) an amount determined to be reasonable by PHA when the expense is incurred to permit education or to seek employment.
- b. Dependent Deduction - An exemption of \$480 for each member of the family residing in the household, other than the head of household, or spouse, live-in aide, foster adult or foster child, who is under eighteen years of age or who is eighteen years of age or older and disabled, or a full-time student.
- c. Work-related Disability Expenses – A deduction of un-reimbursed amounts paid for attendant care or auxiliary apparatus expenses for family members with disabilities where such expenses are necessary to permit a family member(s), including the disabled member, to be employed. In no event may the amount of the deduction exceed the employment income earned by the family member(s) freed to work. Equipment and auxiliary apparatus may include but are not limited to:
 - Wheelchairs
 - Lifts
 - Reading devices for the visually impaired

- Equipment added to cars and vans to permit their use by the disabled family member.
 - Included would be the annualized cost differential between a car and the cost of a van required by the family member with disabilities.
- d. For non-elderly families and elderly or disabled families without medical expenses: the amount of the deduction equals the cost of all un-reimbursed expenses for work-related disability expense less three percent of annual income, provided the amount so calculated does not exceed the employment income earned.
- e. For elderly or disabled families with medical expenses: the amount of the deduction equals the cost of all unreimbursed expenses for work-related disability expense less three (3) percent of annual income (provided the amount so calculated does not exceed the employment income earned) plus medical expenses as defined below.
2. For Elderly and Disabled Families only:
- a. Medical Expense Deduction - A deduction of unreimbursed medical expenses, including insurance premiums, anticipated for the period for which annual income is computed. Medical expenses include but are not limited to:
- Services of physicians and other health care professionals
 - Services of health care facilities
 - Health insurance premiums (including the cost of Medicare)
 - Prescription and non-prescription medicines
 - Transportation to and from treatment
 - Dental expenses
 - Eyeglasses
 - Hearing aids and batteries
 - Attendant care (unrelated to employment of family members),
 - Payments on accumulated medical bills.
 - Effective June 1, 2004 and while in effect, for residents who have the Medicare Prescription Drug Discount Card, consider the market (pre-discount) price of eligible drugs, not the discounted price. Also include the enrollment fee (up to \$30) of the Medicare Prescription Drug Discount Card program, if not paid by Medicare. (PIH Notice 2004-11).
- b. To be considered by PHA for the purpose of determining a deduction from income, the expenses claimed must be verifiable.
- c. For elderly or disabled families without work-related disability expenses: The amount of the deduction shall equal total medical expenses less three (3) percent of annual income.
- d. For elderly or disabled families with both work-related disability expenses and medical expenses: the amount of the deduction is calculated as described in paragraph D.1.c .above.
3. Elderly/Disabled Household Exemption - An exemption of \$400 per household. See definitions in Appendix I of this ACOP.

E. Computation of Rent

1. The first step in computing rent is to determine each family's Total Tenant Payment (TTP). If the family is occupying a unit that has tenant-paid utilities, the utility allowance is subtracted from the TTP. The result of this computation, if a positive number, is the tenant rent. If the TTP less the utility allowance is a negative number, the result is the utility reimbursement, which is paid to the tenant.
2. TTP is the highest of:
 - a. 30% of adjusted monthly income; or
 - b. 10% of monthly income; but never less than the
 - c. Minimum Rent; and never more than the
 - d. Flat Rent, if chosen by the family (where applicable)
3. Tenant rent is computed by subtracting the utility allowance for tenant supplied utilities (if applicable) from the TTP. In developments where MDHA pays all utility bills directly to the utility supplier, tenant rent equals TTP.
4. The minimum rent shall be \$50 per month; however, a hardship exemption shall be granted to residents who can document that they are unable to pay the \$50 because of a long-term hardship (over ninety (90) days). Refer to Chapter VII, Section B of this ACOP.
5. At initial certification and at each subsequent annual recertification, the resident shall be offered a choice of paying either the income -based rent or the Flat Rent applicable to the unit they will be occupying.

F. Earned Income Disallowance

The Earned Income Disallowance (EID) is the exclusion from the calculation of the family's income, the income increase attributable to new employment or increased earnings, over the income received prior to qualifying for the disallowance. The EID is not applicable to residents of Section 8 New Construction developments.

1. The EID applies to any Public Housing resident whose:
 - a. annual income increases due to employment of a family member who was unemployed for one (1) or more year previous to employment; or
 - b. annual income increases as the result of increased earnings by a family member during participation in any economic self sufficiency or other job training program; or
 - c. annual income increases due to new employment or increased earnings of a family member during or within six (6) months of receiving state funded assistance, benefits or services.
2. For purposes of the EID, the following definitions apply:
 - a. State-funded assistance, benefits or services means any state program for temporary assistance for needy families funded under Part A of Title IV of the Social Security Act, as determined by MDHA in consultation with the local agencies administering Temporary Assistance for Needy Families (TANF) and Welfare-to-Work programs. The TANF program is not limited to monthly income maintenance,

but also includes such benefits and services as one-time payments, wage subsidies and transportation assistance – provided that the total amount over a six-month period is at least \$500.

- b. During the 12-month period beginning when the member first qualifies for a disallowance, MDHA must exclude from annual income any increase in income as a result of employment. For the twelve (12) cumulative months following the first exclusion period, 50% of the income increase shall be excluded.
 - c. Regardless of how long it takes a resident to work for twelve (12) cumulative months (to qualify for the first exclusion) or the second twelve (12) cumulative months (to qualify for the second exclusion), the maximum period for the disallowance (exclusion) is forty eight (48) months.
 - d. The disallowance of increased income under this section is only applicable to current residents and will not apply to applicants who have begun working prior to admission, unless their earnings are less than would be earned working ten hours per week at minimum wage, under which they qualify as unemployed.
 - e. The definition of previously unemployed also includes a person who has earned not more than could be earned working ten (10) hours per week for fifty (50) weeks at the established minimum wage.
3. The periods of income disallowance are as follows:
- a. 100% disallowance of increased earnings: The initial 12-month cumulative full exclusion period begins on the date the qualifying family member experiences an increase in income attributable to employment or increased earnings. For tracking and administrative purposes, MDHA can begin the EID on the first day of the month following the effective date of employment.
 - b. 50% disallowance of increased earnings: The second 12-month cumulative exclusion period begins after the initial period ends.
 - c. 48-month lifetime limitation: The EID concludes at the end of the second 12-month cumulative period or after 48 months of the initial 12-month cumulative period, whichever come first.
 - d. After the EID periods end, the full income is included towards the rent calculation.

XIII. FAIR HOUSING AND EQUAL OPPORTUNITY

A. Non-discrimination Policy

1. MDHA complies with all federal, state, and County antidiscrimination laws including, but not limited to, the Fair Housing Act; Section 504 of the Rehabilitation Act of 1973; and the Americans with Disabilities Act.
2. No person shall, on the basis of race, color, sex, religion, national or ethnic origin, familial or marital status, sexual orientation, ancestry, age, pregnancy, or disability be excluded from participation in, be denied the benefits of, or be otherwise subjected to discrimination under programs operated and/or funded by MDHA.
3. MDHA will provide applicants and participants with federal/state/local information regarding discrimination and any recourse available to them if they believe they may be victims of discrimination.
4. MDHA will display the Fair Housing poster at ALC, Public Housing and Section 8 New Construction site offices. Upon eligibility determination, applicants will be provided with the Housing Discrimination Complaint form and information pertaining to procedures to be followed if the applicant believes he/she has experienced illegal discrimination.

B. Processing Non-Discrimination Complaints and Reasonable Accommodation Requests

1. All applicable Fair Housing Information and Discrimination Complaint forms will be made available at MDHA's 504/ADA Coordinator's office and/or by the 504/ADA Coordinator mailing copies of information to person requesting same. In addition, all appropriate written information and advertisements will contain the appropriate written information, and advertisements will contain the appropriate Equal Opportunity language and logo.
2. MDHA's 504/ADA Coordinator will assist any family that believes they have suffered illegal discrimination by providing copies of the federal and local housing discrimination forms and the addresses of the applicable offices. Also, MDHA's 504/ADA Coordinator will facilitate conciliation of discrimination complaints upon the request of complainants, to the greatest extent feasible.
3. MDHA will cooperate with USHUD in conducting monitoring and compliance reviews and complaint investigations, pursuant to all applicable civil rights statutes and regulations, Executive Orders, and all civil rights related program requirements.
4. Reasonable accommodation requests are processed through the 504/ADA Coordinator's office (refer to Section E of this Chapter).

C. Effective Communication Policy

MDHA has an Effective Communication Policy to ensure effective communication with applicants, residents, program participants, employees, and persons with disabilities. Such policy is Appendix II of this ACOP.

D. Emergency Evacuation Assistance Program Procedures

In case of emergency, MDHA will take all necessary steps to address specific needs of its residents in consistency with the Miami-Dade County Emergency Evacuation Assistance Program, as described in Appendix III of this ACOP.

Additionally, MDHA's Emergency Management Manual will continue to be reviewed to ensure that it contains all necessary provisions required for persons with disabilities in emergency conditions.

E. Reasonable Accommodation Policy and Procedures

MDHA's Reasonable Accommodation Policy and Procedures, as referenced through this ACOP, is Appendix IV of this ACOP.

XIV. Domestic Violence

A. Overview

Under the Violence Against Women Act (VAWA), MDHA is required to implement internal policies to include provisions for protection of victims of domestic violence, dating violence, sexual assault, sexual battery and stalking (domestic violence). For definitions of terms under this chapter, refer to Appendix I of this ACOP.

MDHA has notified its applicants and residents about the protections afforded by VAWA, and has provided them with HUD form 50066, *Certification of Domestic Violence, Dating Violence, or Stalking* form to be used by alleged victims of domestic violence.

B. Admission and Continued Occupancy Criteria

1. An applicant cannot be denied admission or assistance solely because the person has been a victim of domestic violence.
2. Residents or tenants who are victims of domestic violence must be handled as an exception to the federal One Strike Rule under documented incident of actual or threatened domestic violence.
3. Domestic violence does not qualify as a serious or repeated violation of the lease for terminating assistance, tenancy, or the occupancy rights of the victim.
4. MDHA may allow for the perpetrator of domestic violence to be removed from the lease, while the remaining family members stay in the assisted unit, upon approval of the Public Housing Division Director.
5. Proven victims of domestic violence will be considered for emergency transfers.
6. Subject to funding availability, the issuance of a Section 8 voucher may be offered to the victimized family.

C. Evidence Required as Proof of Domestic Violence

When confronted with cases of domestic violence, MDHA must provide the alleged victim with HUD form 50066, *Certification of Domestic Violence, Dating Violence, or Stalking* and request documentation to accompany the victim's statement, which may include:

- A listing of the approximate dates when each incident occurred, discussion of the applicant's fears and injuries and the effect that each abusive incident has had on the applicant and her/his family.
- Restraining or civil protection orders.
- Medical records.
- Police reports, records of telephone calls or visits to the victim's address. This may include telephone calls to the police registering a complaint, a log of police runs made to the residence, copies of all tapes and reports written by officers responding to a call.

- Criminal court records if a batterer was arrested or convicted of any act of domestic violence or destruction of property relating to the victim (certified copies); a victim's own statement to police or prosecutors, which can be obtained from the prosecutor's office.
- Statements of workers from a domestic violence shelter or other domestic violence programs attesting to the time the victim spent in the shelter and the reason as linked to incidents of abuse.
- Statement from counselors, if victim attended counseling.
- Reports, statements from police, judges and other court officials, clergy, social workers and other social service agencies.
- Other credible evidence as corroborated by law enforcement or domestic violence providers.

D. Considerations for Victims of Domestic Violence

MDHA must consider:

- a. The nature and severity of each case and exercise discretion on whether or not family members or their guests may threaten the health, safety, or right to peaceful enjoyment of the premises by others.
- b. The effects of denial or termination of assistance on other family members who were not involved in the offense.
- c. The conditions barring the culpable household member from residing in or visiting the unit.
- d. The circumstances relevant to an eviction or termination of tenancy based on the extent to which the person has shown personal responsibility to prevent the offending action, and the time that has elapsed since their arraignment for that crime.
- e. The range of evidence as proof of domestic violence, which may include, but is not limited to victim's statement, testimony or affidavit outlining the facts of the violence or cruelty in each incident, utilizing form HUD-50066.

E. Protection of Victims of Domestic Violence

1. MDHA shall refer victims of domestic violence to the State of Florida Office of the Attorney General to apply for participation in the Address Confidentiality Program for Victims of Domestic Violence. Once the victim has applied, the address, telephone number and social security number are exempt from public review, except when the information is required by a law enforcement agency.
2. In determining if eviction is appropriate, MDHA must consider the safety and well-being of victims, as well as the health, safety and peaceful enjoyment of other residents who may be affected by incidents or domestic violence.

3. MDHA must develop linkages and referrals to appropriate counseling and law enforcement entities.
4. The information under the *Certification of Domestic Violence* will remain confidential and will be used by MDHA only to provide the victims with the exceptions and protections under VAWA.
5. MDHA must ensure that private information of victims of domestic violence is protected in accordance with the Records Management provisions found in Chapter II, Section N.

**MIAMI-DADE HOUSING AGENCY
ADMISSIONS AND CONTINUED OCCUPANCY POLICY**

APPENDIX I

Definitions

Adult

A person who is eighteen (18) years of age or older, or who has been convicted of a crime as an adult under any Federal, State or tribal law.

Applicant

Means a person or family that has applied for housing assistance.

Arrested

Seized and held under authority of the law. Captured and held briefly.

Black

African-Americans and all other individuals who are black irrespective of their national origin.

Child/Minor

Means a member of the family other than the family head or spouse who is under eighteen (18) years of age.

Class Members

All past, present and future black residents of Miami-Dade County's Public Housing program including Section 8 New Construction for the duration of the Adker Decree.

Complainant

Any resident who files a grievance with the MDHA site manager of the development where the resident's unit is located.

Continuity of Assistance

A family is considered continuously assisted if it has been receiving housing assistance under any program of the U.S. Housing Act of 1937 without experiencing an extended interruption during the occupancy of the assisted unit. An interruption of four (4) months between the assisted occupancy of one unit and the assisted occupancy of another unit is considered discontinued assistance.

Convicted

Found or proved guilty of an offense or crime by the verdict of a court. A person who served a sentence of imprisonment.

Criminal Records

All criminal arrest records, including but not limited to sex offender records and registration records. The term "criminal records" does not include records unavailable to MDHA by operation of law, including sealed or expunged records, exempt records under Florida's Public Records Act, or other records unavailable to MDHA under state and federal laws.

Deconcentration of Income

The admission of higher income families (50-80% of area median income) to developments where lower income families (30% of area median income) predominate and vice versa.

Displaced persons

Include persons who can document that they have been displaced by a natural disaster declared by the President of the United States, displaced, through no fault of their own, by governmental action, or displaced by domestic violence.

Due Process

An eviction action or a termination of tenancy in a State or local court in which the following procedural safeguard are required:

1. Adequate notice to the tenant of the grounds for terminating the tenancy and for eviction;
2. Right of the tenant to be represented by counsel;
3. Opportunity for the tenant to refute the evidence presented by the PHA including the right to confront and cross-examine witnesses or equitable defense which the tenant may have;
4. A decision of the merits.

Earnings and benefits

Means the incremental earnings and benefits resulting from a qualifying employment training program or subsequent job.

Dating Violence

The violence between individuals who have or have had a continuing and significant relationship of a romantic or intimate nature. The existence of such a relationship shall be determined based on the consideration of the following factors:

1. A dating relationship must have existed within the past 6 months;
2. The nature of the relationship must have been characterized by the expectation of affection or sexual involvement between the parties; and
3. The frequency and type of interaction between the persons involved in the relationship must have included that the persons have been involved over time and on a continuous basis during the course of the relationship.
4. The term does not include violence in a casual acquaintanceship or violence between individuals who only have engaged in ordinary fraternization in a business or social context.

Dependent

A member of the family (excluding foster children, foster adults, or live-in aides) other than the family head or spouse, who is under eighteen (18) years of age, or is a person with disabilities, or is a Full-time Student.

Desegregative Housing Offer

An offer of a unit that is vacant, appropriate for the household size and type, and meets applicable housing quality standards in a development where not more than 65% of the population is the same race as the household.

Disabled Family

A family whose head, spouse, or sole member is a person with disabilities; or two (2) or more persons with disabilities living together; or one (1) or more persons with disabilities living with one or more live-in aides.

Disability Assistance Expenses

Reasonable expenses that are anticipated, during the period for which Annual Income is computed, for attendant care and auxiliary apparatus for a Disabled Family member and that are necessary to enable the disabled member to be employed, provided that the expenses are neither paid to a member of the family nor reimbursed by an outside source.

Displaced Family

A family in which each member, or whose sole member, is a person displaced by governmental action, or a person whose dwelling has been extensively damaged or destroyed as a result of a disaster declared or otherwise formally recognized pursuant to Federal disaster relief laws.

Domestic violence

Per USHUD definition, is the "actual or threatened physical violence directed against one or more members of the applicant's family by a spouse or other members of the applicant's household." The State of Florida defines domestic violence as any assault, aggravated assault, battery, aggravated battery, sexual assault, sexual battery, stalking, aggravated stalking, kidnapping, false imprisonment, or any criminal offense resulting in physical injury or death of one family or household member by another who is or was residing in the same single dwelling unit.

Drug-related Criminal Activity

Illegal manufacture, sale, distribution, or use of a drug, or possession of a drug, with the intent to manufacture, sell, distribute or use the drug.

Elderly Family

A Family whose head, spouse, or sole member is a person who is at least sixty two (62) years of age; or two or more persons who are at least sixty two (62) years of age living together; or one or more persons who are at least sixty two (62) years of age living with one or more live-in aides.

Elderly Person

A person sixty-two (62) years of age or older.

Eligibility Income

This is Annual Income amount which is compared to USHUD approved Income Limits to determine if an applicant family is eligible for admission to the housing program.

Fair Housing Center

An establishment to act as a mobility counselor and an information clearinghouse for mobility pool members and applicants who are seeking desegregative housing opportunities in public and assisted housing.

Family

Family includes but is not limited to:

- A family with or without children (the temporary absence of a child from the home due to placement in foster care shall not be considered in determining family composition and family size);
- An elderly family;
- A near-elderly family;
- A disabled family;
- A displaced family;
- The remaining member of a tenant family; and

- A single person who is not an elderly or displaced person, or a person with disabilities, or the remaining member of a tenant family.
- A single person or a group of persons who reside together and who are related by blood or marriage, or who exhibit a stable familial relationship. MDHA will accept documentation proving that adult, domestic partners have a stable relationship (e.g. they have lived together for at least one year).

Family Income

Family Income means the Annual Income derived from all sources of the family members expected to reside in the dwelling unit and upon which rent is to be based.

Full-Time Student

A person registered for and carrying a subject load that is considered full-time for day students under the standards and practices of the educational institution attended. An educational institution includes a vocational school with a diploma or certificate program, as well as an institution offering a college degree.

Fraud

Deceit or trickery deliberately practiced to gain some advantage dishonestly. Fraud is an intentional deception and is not committed accidentally.

Good Cause

As used in the Adker Consent Decree with respect to refusal of a housing offer, 'good cause' shall mean that an applicant who is offered a unit can demonstrate through objective evidence that a move into the unit offered would result in a hardship related to the ability of the applicant or a member of the applicant's family to retain his or her employment or retain particular day care or medical services uniquely suited to the affected individual's needs. In addition, a hardship may relate to the person's inability to conveniently use the facility because of his or her disability and a lack of the necessary accessibility features. Additional examples of good cause are included in this policy.

Grievance or complaint

Any dispute with respect to the Agency's action or failure to act in accordance with lease requirements, and/or federal regulations which result or may result in denial, significant reduction or termination of benefits to the complainant.

Head of Household

The family member who is 18 years or older and held responsible and accountable for the family, normally considered to be the official tenant of record or the lessee.

Hearing

An informal proceeding at which a resident's grievance or complaint relating to MDHA's adverse action or decision, is heard in order to insure that the complainant's rights were not violated

Homeless Family

Any person or family who:

- Lacks a fixed, regular, and adequate night time residence; and
- Has a primary night-time residence that is:
 1. A supervised publicly or privately operated shelter designed to provide temporary living accommodations (including welfare hotels, congregate shelters, and transitional housing);

2. An institution that provides a temporary residence for individuals intended to be institutionalized; or
3. A public or private place not designed for, or ordinarily used as, a regular sleeping accommodation for human beings.

A homeless family does not include any individual imprisoned or otherwise detained pursuant to an Act of the Congress or a State law.

Homeownership Opportunities

After October 28, 1998 any homeownership opportunities shall mean any homeownership units developed, purchased, or redeveloped by Miami-Dade County solely or as a joint venture with any other entity.

Income Eligibility for Admission

At least 40% of families admitted to the Public Housing program in each fiscal year effective October 21, 1998 must have incomes that do not exceed 30% of Area Median Income (AMI). In each fiscal year MDHA may reduce the targeted public housing admissions to the extent that MDHA provides tenant-based Section 8 assistance above the targeted 75% to families that do not exceed 30% of AMI. The public housing target, however, may not be reduced below 30% of admissions.

Income Limits

Income limits are those published by USHUD for admission of Low-Income and Very-Low-Income families to federally subsidized housing developments.

Interim Adjustments or Re-determination of Rents

Changes in rent between admission and subsequent annual re-examinations due to a change in family composition or income.

Live-in Aide

A person eighteen (18) years of age or older who resides with one (1) or more elderly persons, or near-elderly persons, or persons with disabilities who:

- Is determined to be essential to the care and well-being of the persons;
- Is not obligated for the support of the persons; and
- Would not be living in the unit except to provide the necessary supportive services.
- The live-in aide's income is not counted when determining family income.

Local Preference

Any preference, to the extent authorized by law, the Agency may establish for use in selecting among applicants. The local preference may only be adopted after MDHA has conducted a public hearing to establish preferences that respond to local housing needs and priorities.

Lower Income Family

A family whose Annual Income does not exceed eighty percent (80%) of the median family income for the area, as determined by USHUD with adjustments for smaller and larger families.

Medical Expenses

Those medical expenses, including medical insurance premiums that are anticipated during the period for which annual income is computed, and that are not reimbursed by insurance or other sources.

Minimum Rent

Statutory requirement that each family assisted under Public Housing programs pay a monthly minimum rent or Total Tenant Payment (TTP) of an amount currently between \$25.00 and \$50.00.

Mobility Pool

Class members of the Adker Consent Decree who meet all of the following criteria:

- (i) A former or current official tenant of record in a MDHA public housing unit who signed a lease on or before June 4, 1998; or
- (ii) A current or future official tenant of record who is 18 years or older and head of household of a MDHA public housing unit, and who signs a lease after June 4, 1998 but prior to the expiration of the Adker Decree;
- Is currently eligible for federally-assisted housing; and
- Has not opted out of participation in the mobility pool and who is eligible pursuant to the regulation at 24 CFR 982.552.

Monthly Income

One-twelfth of Annual Income

Monthly Adjusted Income

One-twelfth of Adjusted Annual Income

Near-Elderly Family

A family whose head of household, spouse, or sole member is a person who is at least 50 years of age but below the age of 62; or two or more persons, who are at least 50 years of age but below the age of 62, living with one or more live-in aides.

Net Family Assets

Net cash value after deducting reasonable costs that would be incurred in disposing of real property, savings, stocks, bonds, and other forms of capital investment, excluding interests in Indian trust land and excluding equity accounts in USHUD homeownership programs. The value of any business or family assets disposed of by an applicant or tenant for less than fair market value during the two years preceding the date of application for the program or reexamination, shall be included in the determination of Net Family Assets.

New Affordable Desegregative Rental Housing

After October 28, 1998 any affordable desegregative rental housing developments developed, purchased or redeveloped by Miami-Dade County solely or as a joint venture with any other entity. This includes the redevelopment of public housing.

Non-Black

All individuals who are not 'Black' as defined above in subsection 1-4 including, but not limited to, Caucasians and Caucasians of Hispanic ethnicity, American Indians and Asians.

Non-Elderly Family

Two (2) or more persons who are not elderly but live together and are related by blood, or marriage, or operation of law, or give evidence of a stable relationship which has lasted over a period of at least one year. All Family Income and resources are available to meet the family's needs.

Non-Violent Criminal Activity:

Any criminal activity that is not a Violent Criminal Activity or a Drug-related Criminal Activity, as defined herewith, but that is such that it may threaten the health, safety or right to peaceful enjoyment of the premises by other residents. Non-violent criminal activities include but are not limited to fraud, bribery, vandalism, burglary, larceny, robbery, etc.

Offer

The term 'offer' is used in the context of project-based assistance and means an offer of a unit that is vacant, appropriate for the household in size and type, and meets applicable housing quality standards.

Participating Privately Owned Assisted Housing

Housing receiving federal assistance under one of the following statutory provisions for which the owner has agreed, upon invitation from USHUD, to participate in the activities of the Housing Center:

- Section 221(d)(3) of the National Housing Act;
- Section 101 of the Housing and Urban Development Act of 1965;
- Section 236 of the National Housing Act;
- Section 202 of the National Housing Act;
- Section 811 of the Cranston-Gonzalez National Affordable Housing Act; or
- Section 8 of the United States Housing Act

Person With Disabilities

Under federal discrimination law, an individual is disabled if he/she has a physical or mental impairment that substantially limits one or more major life activities; has a record of such impairment; or is regarded as having such impairment. This definition does not include any individual who is a drug addict and is currently using illegal drugs, or an alcoholic, who poses a direct threat to the health, safety and right to peaceful enjoyment of the premises by other residents.

Reasonable Accommodation

A reasonable accommodation is a change, modification, alteration, or adaptation in a policy, procedure, practice, program, facility or unit that provides a person with a disability the opportunity to participate in, or benefit from, a program (housing or non-housing), service or activity.

Re-examination/Re-certification Date

The date on which any rent change is effective as required by the annual re-examination of eligibility for continued occupancy.

Sexual Assault

The threat of oral, anal, or vaginal penetration by, or union with, the sexual organ of another or the anal or vaginal penetration of another by any other object, without consent.

Sexual Battery

The actual oral, anal, or vaginal penetration by, or union with, the sexual organ of another or the anal or vaginal penetration of another by any other object, without consent.

Single Person

A person living alone or intending to live alone and who does not qualify as an Elderly Family, Disabled Family, Displaced Person, or as the remaining member of a tenant family.

Stalking

The willful malicious, and repeated following, harassing, or cyber stalking of another person, and/or the making of a credible threat with the intent to place that person in reasonable fear of death or bodily injury of the person, or the person's child, sibling, spouse, parent, or dependent.

Tenant Error

Occurs when the tenant, by action or inaction, breaches a lease, regulation or program requirement, because of a misunderstanding of rules. Tenant errors are considered unintentional program violations as compared to fraud (see definition).

Tenant Rent

The amount payable monthly by the Family as rent to the Housing Agency. Where all utilities (except telephone) and other essential housing services are supplied by the Agency, Tenant Rent equals the Total Tenant Payment (TTP). Where some or all utilities (except telephone) and other essential housing services are not supplied by the Agency and the cost thereof is not included in the amount paid as rent to the Agency, Tenant Rent equals Total Tenant Payment less the Utility Allowance.

Total Tenant Payment

Total Tenant Payment for any dwelling unit shall be the highest of the following, rounded to the nearest dollar:

- Thirty percent (30%) of Monthly Adjusted Income;
- Ten percent (10%) of Monthly Income;
- The monthly portion of a Family's Welfare Assistance from a public agency specifically designated by such agency to meet the Family's housing costs; or
- The MDHA statutory minimum rent which is currently \$25.

Uniform Federal Accessibility Standards (UFAS) Unit

A dwelling unit that is designed, constructed, altered or adapted to comply with Uniform Federal Accessibility Standards (UFAS) and is located in accessible route.

Units with Accessible Features

A unit which has been altered in a manner that has some accessible features that assists persons with disabilities (see also UFAS unit).

Utility Allowance

If the cost of utilities (except telephone) for an assisted unit is not included in the Tenant Rent but is the responsibility of the family occupying the unit, the Utility Allowance is the amount equal to the estimate made of the monthly costs of a reasonable consumption of such utilities for the unit, consistent with the requirements of a safe, sanitary, and healthful living environment based on an annual review of utility rates. The estimate made must be approved by USHUD. The resident may also request relief from excess utility consumption (see Section 4-1 (B) (iv) regarding the excess consumption policy).

Utility Reimbursement

The amount, if applicable, by which the utility allowance for the unit exceeds the Total Tenant Payment for the Family occupying the unit.

Very Low Income Family

A family who's Annual Income does not exceed fifty percent (50%) of the median family income for the area, as determined by USHUD, with adjustments for smaller and larger families.

Violent Criminal Activity

Any criminal activity that has as one of its elements the use, attempted use, or threatened use of physical force substantial enough to cause, or be reasonable likely to cause, serious bodily injury or property damage.

Waiting List

The list of applicants who are waiting to be verified eligible for admittance to housing programs administered by MDHA and offered the benefit as it becomes available. To the extent authorized by law and the Decree, the list is maintained in order of priorities and preferences.

MIAMI-DADE HOUSING AGENCY

EFFECTIVE COMMUNICATION POLICY

ADMISSIONS AND CONTINUED OCCUPANCY POLICY

APPENDIX II

MIAMI-DADE HOUSING AGENCY EFFECTIVE COMMUNICATION POLICY

It is the policy of the Miami-Dade Housing Agency (MDHA) to ensure that communications with applicants, residents, program participants, employees, and members of the public with disabilities are as effective as communications with others.

MDHA, including its employees, agents, contractors and private management companies/agents, shall furnish appropriate auxiliary aids and services, where necessary, to afford individuals with disabilities, including individuals with hearing, visual or cognitive disabilities, an equal opportunity to participate in, and enjoy the benefits of, the programs, services and activities conducted by MDHA.

AUXILIARY AIDS AND SERVICES:

"Auxiliary aids and services" include, but are not limited to: (1) qualified sign language interpreters, note-takers, transcription services, written materials, telephone handset amplifiers, assistive listening devices, assistive listening systems, telephones compatible with hearing aids, closed caption decoders, open and closed captioning, telecommunications devices for deaf persons (TDDs), videotext displays, or other effective methods of making aurally delivered materials available to individuals with hearing impairments; and, (2) qualified readers, taped texts, audio recordings, Brailled materials, large print materials, or other effective methods of making visually delivered materials available to individuals with visual impairments.

REQUEST FOR EFFECTIVE COMMUNICATION:

When an auxiliary aid or service is required to ensure effective communication, MDHA will provide an opportunity for an individual with a disability to request the auxiliary aid or service of his or her choice. MDHA will give primary consideration to the choice expressed by the individual. "Primary consideration" means that MDHA will honor the choice, unless it can show that another equally effective means of communication is available; or, that use of the means chosen would result in a fundamental alteration in the nature of its service, program, or activity or in an undue financial and administrative burden.

The individual will submit his/her request for auxiliary aids or services to the appropriate MDHA staff person designated below. All requests shall be dated and time-stamped upon receipt by the appropriate MDHA staff person.

Within forty-eight (48) hours of receipt of the individual's request, the designated MDHA staff person will consult with the individual with the disability when the preferred type of auxiliary aid or service is not available or not required, and the staff person is attempting to ascertain whether an alternative means of communication will ensure effective communication.

**MIAMI-DADE HOUSING AGENCY
EFFECTIVE COMMUNICATION POLICY**

Within five (5) business days following receipt of the effective communication request(s), the designated MDHA staff person will provide the requesting individual with notification of the proposed auxiliary aid or service to be provided.

The ADA Coordinator will maintain copies of all requests for effective communication and, including final disposition, for the duration of this Agreement.

Individual requests for Effective Communication will be directed to the following MDHA officials:

Resident Requests:

MDHA resident requests for auxiliary aids or services should be made to the Site Manager at the resident's development.

Applicant Requests:

Applicants for MDHA housing should make requests for auxiliary aids and services to MDHA's Applicant and Leasing Center ((305) 638-6464 phone, (305) 638-6014 TDD) or the ADA Coordinator ((305) 644-5187 phone, (305) 644-5343)..

Other Requests:

Requests from members of the public who wish to participate in programs, services and/or activities of MDHA shall submit their request(s) for auxiliary aids and services as directed in MDHA notices, appointment notifications, forms, or brochures. They may also submit requests for auxiliary aids to the MDHA 504/ADA Coordinator.

However, individuals with disabilities who request auxiliary aids or services for public events such as public hearings, Board hearings, public meetings, etc., shall make their requests no later than five (5) days prior to the event.

GRIEVANCE PROCEDURES:

If the requesting individual with a disability is not satisfied with the MDHA's response to the individual's request(s) for an auxiliary aid or service, the individual may file a formal grievance, including appropriate supporting documentation, if any, with MDHA's Section 504/ADA Coordinator. The grievance may be communicated orally or in writing.

However, all oral grievances must be reduced to writing and maintained in MDHA's files. In addition, MDHA shall provide assistance to any individual who requests assistance in filing a grievance, including assistance in reducing the individual's grievance to writing. All grievances shall be dated and time-stamped.

**MIAMI-DADE HOUSING AGENCY
EFFECTIVE COMMUNICATION POLICY**

Within seventy-two (72) hours of receipt, MDHA's Section 504/ADA Coordinator will respond to the individual's grievance.

The Section 504/ADA Coordinator will provide his/her formal decision, in writing, within ten (10) business days after receipt of the grievance.

If the individual is dissatisfied with the MDHA Section 504/ADA Coordinator's determination, the individual may pursue remedies under MDHA's HUD-approved Grievance Procedures.

MIAMI-DADE HOUSING AGENCY

EMERGENCY EVACUATION ASSISTANCE PROGRAM

ADMISSIONS AND CONTINUED OCCUPANCY POLICY

APPENDIX III

Memorandum



Date:	September 8, 2004
To:	Distribution
From:	Madeline Clodfelter Chief, Administrative Support Services Division
Subject:	Special Needs

The Miami-Dade County's Emergency Evacuation Assistance Program (EEAP) is designed for special needs people living at home who need assistance with evacuation. Miami-Dade residents who qualify for this service must pre-register with the EEAP. For a Miami-Dade resident to qualify, he or she must on a daily basis require skilled nursing care, assistance with daily living, or have life-saving medical equipment dependent on electricity. Residents of assisted living facilities (ALF) or nursing homes do not qualify.

These services are intended for those residents that have registered. If County residents call at the last minute, all attempts will be made to assist them, but the people on the registry will have priority.

TO REGISTER:

You can call the Miami-Dade Answer Center at 305-468-5900 [TDD 305-468-5402], and request an application to be mailed, or download an application from the Miami-Dade Portal at <http://www.miamidade.gov>, under Emergency Management. Also for your convenience, attached are the applications in English, Spanish, and Creole. Please have the eligible residents complete one of the attached applications. Vital medical information will help OEM determine the eligibility for the program and the types of services needed. The applicant must have their doctor sign the form and return it to the following address:

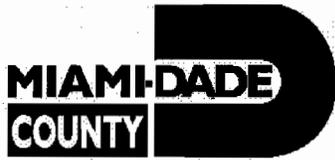
Miami-Dade Office of Emergency Management
9300 NW 41 Street
Miami, FL 33178

If eligible, the applicant will be assigned to an appropriate facility, and a determination will be made on the transportation type. OEM will then notify the applicant in writing of their assigned location.

Attachments

Distribution

Alphonso K. Brewster
Rudy Perez
H. Patrick Brown
John Topinka
Regional Managers
William Calderin



Delivering Excellence Every Day

Miami-Dade County Emergency Evacuation Assistance Program

Applicant Instructions and Information

The Emergency Evacuation Assistance Program is designed for people with special needs living at home that need assistance with evacuation. Eligible applicants have a medical condition that requires specialized sheltering not available in a hurricane evacuation center. Residents of assisted living facilities or nursing homes do not qualify.

The registry may be used for any emergency requiring evacuation, such as flooding, hurricanes or hazardous material spills, such as gas leaks. Resources are limited and those persons registered will have priority when an emergency arises. **Do not wait until an evacuation begins to request being added to the registry.**

Shelters will only be available as a last resort for people who have no other place to go. If you need to evacuate, you should first seek shelter with relatives, friends or community organizations. Special Needs Shelters do not offer the same level of care or equipment available at health care facilities. Only basic care and assistance are available. Cots and beds are provided on a limited basis. A caregiver should accompany you and remain with you during your stay in the shelter.

Supplies and food at Special Needs Shelters are limited. You must bring a disaster kit that includes bedding, medications and personal supplies (food, water, and medical equipment). It is highly recommended that you eat a meal prior to leaving your home and bring special dietary foods with you.

All sections of this application must be completed. Your health care provider must complete and sign a portion of this application prior to submitting it to our office. If more than one person in your household needs assistance during evacuations, each person must complete a separate application. Special instructions will be mailed to you once your application has been processed. Read these instructions carefully and keep them in a safe place. Prepare wisely and stay alert to the media for evacuation times during emergencies.

You will be contacted on an annual basis to re-certify your need for this program. You do not need to complete an application every year. If you have questions or need further information, please call the Special Needs Hotline at (305) 513-7700. Return the completed application to:

**Emergency Evacuation Assistance Program
9300 NW 41 Street
Miami, FL 33178**

This application is available in English, Spanish, Creole and Braille (upon request). If you need disaster preparedness tips, contact the Answer Center by dialing 3-1-1 or calling (305) 468-5900 (TTY/TDD users call (305) 468-5402). You may also visit our website for more information: www.miamidade.gov/oem

Application for the Emergency Evacuation Assistance Program

Please read the instructions and information provided before completing the form. **This form must be completed in full or it will be returned to you.**

Please print clearly.

Date of Application: ___/___/___

Last Name: _____ First Name: _____ MI: _____ Sex: ___M ___F

Date of Birth: ___/___/___ Social Security Number: _____-_____-_____

Type of Residence: House/Duplex Apt/Condo (What floor? ___) Mobile Home/Trailer
 Group Home Nursing Home

Address: _____ Apt/Lot #: _____

City: _____ Zip Code: _____

Mailing Address (if different from above): _____

Telephone: Home: (____) _____ (TTY/TDD line Yes)

Alternate Phone: (____) _____

Primary Language: _____

Name of nearest friend or relative (not living with you): _____

Home phone: (____) _____ Alternate phone: (____) _____

I certify that one companion will accompany me to the special needs shelter.

Companion's name: _____

What type of assistance do you require on a daily basis? (Check all that apply)

- | | |
|---|--|
| <input type="checkbox"/> personal care (dressing/toileting) | <input type="checkbox"/> mobility (walking/transferring) |
| <input type="checkbox"/> guidance (blind/visual impairment) | <input type="checkbox"/> feeding |
| <input type="checkbox"/> communicating:
(<input type="checkbox"/> deaf <input type="checkbox"/> nonverbal) | <input type="checkbox"/> wound care
If yes, what type of wound: _____ |
| <input type="checkbox"/> skilled medical or mental health care:
(<input type="checkbox"/> intermittent <input type="checkbox"/> continuous) | <input type="checkbox"/> taking medication
<input type="checkbox"/> airway suctioning |

Do you require oxygen? Yes No If yes, how many hours a day? _____

Oxygen Provider: _____

Do you use medical equipment requiring electricity? Yes No (intermittent continuous)

Specify equipment requiring electricity: _____

Do you require dialysis? Yes No If yes, how many times a week? _____

Are you receiving hospice or home health care? Yes No

Agency: _____ Phone: _____

Do you require that transportation to a shelter be provided for you? Yes No

I use: Wheelchair (I can transfer myself: Yes No) Walker/Cane
 Crutches Guide dog/Service animal

I am bed bound: Yes No

I weigh over 300 pounds: Yes No

I have the following conditions: (Check all that apply)

- | | | |
|---|--|--|
| <input type="checkbox"/> Alzheimer's Disease
<input type="checkbox"/> early <input type="checkbox"/> moderate <input type="checkbox"/> advanced | <input type="checkbox"/> Cardiac
<input type="checkbox"/> stable <input type="checkbox"/> unstable | <input type="checkbox"/> Cerebrovascular Accident (CVA) |
| <input type="checkbox"/> Chronic Obstructive Pulmonary Disease (COPD) | <input type="checkbox"/> Cystic Fibrosis | <input type="checkbox"/> Diabetes
<input type="checkbox"/> Insulin dependent
<input type="checkbox"/> Non-insulin dependent |
| <input type="checkbox"/> Dementia | <input type="checkbox"/> Emphysema | <input type="checkbox"/> Muscular Dystrophy |
| <input type="checkbox"/> Hip replacement
<input type="checkbox"/> less than six months
<input type="checkbox"/> more than six months | <input type="checkbox"/> Knee replacement
<input type="checkbox"/> less than six months
<input type="checkbox"/> more than six months | <input type="checkbox"/> Neuro-muscular disorders
<input type="checkbox"/> early <input type="checkbox"/> moderate <input type="checkbox"/> advanced |
| <input type="checkbox"/> Parkinson's Disease
<input type="checkbox"/> early stages <input type="checkbox"/> advanced | <input type="checkbox"/> Psychosis
<input type="checkbox"/> controlled <input type="checkbox"/> uncontrolled | <input type="checkbox"/> Seizures
<input type="checkbox"/> controlled <input type="checkbox"/> uncontrolled |

Other: _____

Name of person filling out form: _____ Telephone Number: (____) _____

_____ *This section must be completed by Health Care Provider. Please print.* _____

Health Care Provider: _____ Phone: (____) _____

Primary Diagnosis: _____

Secondary Diagnosis: _____

To the best of my knowledge and belief, the information provided on this form is correct and complete.

Health Care Provider's Signature: _____ Date: _____

Provider's License Number: _____

Applicant Signature & Health Insurance Portability and Accountability Act (HIPAA)

I certify that this information is correct. I understand that based on this application and the data I have provided, the Miami-Dade Office of Emergency Management (MDOEM) will determine which emergency evacuation assistance, if any, this program may be able to provide. I understand that assistance will only be provided for the duration of the emergency and that alternative arrangements should be made in advance in the event I am not able to return to my home. **I also understand that I am responsible for transportation charges for my evacuation and any costs associated with my stay at a hospital or other medical facility if I am admitted.** I grant permission to medical providers and transportation agencies and others as necessary to provide care and disclose any information required to respond to my needs.

HIPAA Privacy Rule: By signing this Authorization, I hereby allow the use or disclosure by MDOEM of my medical information pertaining to my health or me, as defined in the regulations promulgated under the Health Insurance Portability and Accountability Act of 1996, the HIPAA Privacy Rule, to be used for my evacuation to the appropriate shelter or facility.

(Continued on back page)

I understand that information used or disclosed pursuant to this Authorization may be subject to disclosure by the recipient for the purposes of evacuation, sheltering, transportation and any medical care pursuant to these services.

I understand that I have the right to revoke this Authorization at any time except to the extent that MDOEM has already acted in reliance on the Authorization. To revoke this Authorization, I understand that I must do so by written request to the Miami-Dade County Office of Emergency Management, 9300 NW 41 St, Miami, FL 33178, Attention: Special Needs Registry Coordinator.

I understand that if I choose to revoke this Authorization, I will no longer be part of the Special Needs Registry and will not be evacuated.

Signature of Applicant: _____

Date: _____

**EMEOEM
Office of Emergency Management
9300 NW 41 Street
Miami, FL 33178**

MIAMI-DADE HOUSING AGENCY

REASONABLE ACCOMMODATION POLICIES AND PROCEDURES

ADMISSIONS AND CONTINUED OCCUPANCY POLICY (ACOP)

APPENDIX IV

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INTRODUCTION:

Policy Statement:

Miami-Dade Housing Agency (MDHA) is committed to ensuring that its policies and procedures do not deny individuals with disabilities the opportunity to participate in, or benefit from, nor otherwise discriminate against individuals with disabilities, on the basis of disability, in connection with the operations of MDHA's programs, services and activities. Therefore, if an individual with a disability requires an accommodation such as an accessible feature or modification to a MDHA policy, MDHA will provide such accommodation unless doing so would result in a fundamental alteration in the nature of the program, or an undue financial and administrative burden or would be neither reasonable nor necessary. In such a case, MDHA will make another accommodation that will not result in a financial or administrative burden or be either unreasonable or unnecessary.

A reasonable accommodation is a change, modification, alteration or adaptation in policy, procedure, practice, program, or facility that provides a qualified individual with a disability the opportunity to participate in, or benefit from, a program (housing or non-housing) or activity.

MDHA will post a copy of these Reasonable Accommodation Policies and Procedures in the applicant, resident and program participant waiting areas of the MDHA Applicant and Leasing Center, Mobility Pool Center, Section 8 Offices, Regional Offices of the MDHA; the offices of MDHA's private management companies; and, the management office in each public housing development. In addition, individuals may obtain a copy of these Reasonable Accommodation Policies and Procedures, upon request, from Applicant and Leasing Center Eligibility Interviewers, Public Housing Site Managers, Section 8 Leasing and Contract Specialists, and MDHA's ADA Coordinator.

For those who do not qualify as a person with a disability as defined by the Fair Housing Amendments Act, Section 504 of the Rehabilitation Act of 1973, and the Americans with Disabilities Act, but who have a need for an accommodation because of a physical or mental impairment, MDHA may still provide an accommodation to meet that need contingent upon reasonableness and availability of resources.

Legal Authority:

MDHA is subject to Federal, state and local civil rights laws and regulations. This Reasonable Accommodation Policy is based on the following statutes or regulations:

See Section 504 of the Rehabilitation Act of 1973 (Section 504)¹; Title II of the Americans with Disabilities Act of 1990 (ADA)²; the Fair Housing Act of 1968, as amended (Fair Housing Act)³; the Architectural Barriers Act of 1968⁴, and the respective implementing regulations for each Act, State of Florida Statutes Sections 760.20-760.37, and Chapter 11A, *et. seq.* of the Code of Miami-Dade County.

Monitoring and Enforcement:

¹ 29 U.S.C. § 794; 24 C.F.R. Part 8.

² 42 U.S.C. §§ 12101 *et seq.*

³ 42 U.S.C. §§ 3601-20; 24 C.F.R. Part 100.

⁴ 42 U.S.C. §§ 4151-4157.

MDHA's ADA Coordinator is responsible for monitoring MDHA's compliance with the laws stated herein and this policy. Individuals who have questions regarding this policy, its interpretation or implementation should contact the ADA Coordinator in writing, by telephone, or by appointment, as follows:

Danny Howe, ADA Coordinator
1401 N.W. 7th Street, Building F
Miami, Florida 33125
(305) 644-5187 phone
(305) 644-5113 fax
Florida Relay Service: (800) 955-8771 (TDD/TYY)

Individuals may contact the ADA Coordinator regarding any complaints regarding their reasonable accommodation request.

In addition, individuals may exercise their right to appeal MDHA's decision through the local offices of the following agencies:

United States Department of Housing and Urban Development
Office of Fair Housing and Equal Opportunity
909 S.E. 1st Avenue
Miami, FL 33131
(305) 536-4479
TDD/TTY: (305) 536-4743

United States Department of Justice
99 N.E. 4th St.
Miami, FL 33132

General Policy Information:

The requirement to provide reasonable accommodation is intended to provide, for persons with disabilities, equal opportunity to participate in all housing programs administered by MDHA through modification of policies, procedures, or structures. This policy is not intended to provide greater program benefits to persons with disabilities than to non-disabled residents, program participants or applicants. It may mean, however, that persons with disabilities will sometimes be treated differently, in order to ensure equal access to programs and services.

Reasonable accommodation methods or actions that may be appropriate for a particular program and individual may be found to be inappropriate for another program or individual. The decision to approve or deny a request for a reasonable accommodation is made on a case-by-case basis and takes into consideration the disability and the needs of the individual as well as the nature of the program or activity in which the individual seeks to participate.

Information and documentation regarding the policy of reasonable accommodations will be given to applicants, residents and program participants during the admission and occupancy cycle, including but not limited to during the recertification process, and upon request (see "Notification to Applicants, Residents, and Program Participants Regarding Reasonable Accommodation Requests", page 10). Forms and other documents used for applicants, residents and program participants will, to the extent feasible, be written in plain, intelligible

language. When appropriate, MDHA will provide documents in accessible formats, provide auxiliary aids, or, upon request, communicate with a third party designated by the applicant or resident.

Reasonable accommodations are made in response to individual requests from a qualified person with disabilities. The request may be made in any manner that is convenient for the person with disabilities. Accommodations will be unique to the individual with disabilities; individuals with the same disability may not need, or desire, the same level of accommodation. There is no standard approach. What works for one person may not work for another in the same situation.

MDHA will not provide supportive services, e.g., counseling, medical, or social services that fall outside the range of services offered to residents. Further, MDHA will make modifications in order to enable a qualified applicant/resident with disabilities to live in the housing, but is not required to offer housing of a fundamentally different nature. The test is whether, with appropriate modifications, the applicant/resident can live in the housing that MDHA offers; not whether the applicant/resident could benefit from some other type of housing that MDHA does not offer.

DEFINITIONS:

Applicant: A person who successfully follows all of the required steps identified by MDHA as necessary for becoming a participant in one of MDHA's housing programs (for example: the Public Housing, Section 8 Housing Choice Voucher, or Section 8 Moderate Rehabilitation programs).

Assistive Animals: Animals that are used to give assistance to persons with disabilities and are necessary as a reasonable accommodation. Assistive animals are also referred to as service animals, support animals or therapeutic animals.

Major Life Activities: These include caring for oneself, performing manual tasks, walking, seeing, hearing, speaking, breathing, learning and working. This is not an exhaustive list; other life activities can also be major.

Mitigating Circumstances: Situations in which a requested reasonable accommodation enables an applicant, resident, or program participant to become lease compliant.

Resident: A person who successfully follows all of the required steps identified by MDHA as necessary for residing in a dwelling administered under MDHA's Public Housing Program.

Person with Disabilities: A person who 1) has a physical or mental impairment that substantially limits one or more major life activities, 2) has a record of such impairment, or 3) is regarded as having such impairment.

Physical Or Mental Impairment: A variety of conditions, diseases, illnesses, disfigurements and disorders including hearing/orthopedic/visual/speech impairments, alcoholism, emotional illness, drug addiction (other than addiction caused by current, illegal use of a controlled substance), cerebral palsy, cancer, or HIV infection, if the impairment substantially limits one or more major life activities.

Program Participant: A person who successfully follows all of the required steps identified by MDHA as necessary for participating in MDHA's Section 8 Housing Choice Voucher or Section 8 Moderate Rehabilitation programs).

Reasonable Accommodation: a change, adaptation or modification to a policy, program, service, or workplace which will allow a qualified person with a disability to participate fully in a program, take advantage of a service, or perform a job. Reasonable accommodations may include, for example, those which are necessary in order for the person with a disability to use and enjoy his or her dwelling, including public and common use spaces.

Verification source: a qualified professional (not necessarily a physician) having knowledge of a person's disability who can verify the person's disability and need for a reasonable accommodation.

AUXILIARY AIDS AND EXAMPLES OF REASONABLE ACCOMMODATIONS:

To facilitate communication with persons with disabilities, MDHA shall furnish appropriate auxiliary aids. "Auxiliary aids" means services or devices that enable persons with impaired sensory, manual or oral skills to have an equal opportunity to participate in, and to enjoy, the benefits of programs and activities. However, MDHA is not required to provide individually prescribed devices, such as readers for personal use or study, personal hearing aids, walkers, canes, wheelchairs, or other devices of a personal nature. In determining what auxiliary aids are necessary, MDHA shall give primary consideration to request(s) of the individual with disabilities.

Types of auxiliary aids and reasonable accommodations that MDHA, when necessary and appropriate, readily supplies to applicants, residents and program participants include but are not limited to:

1. Allowing transfers to another dwelling upon verification by a qualified verification source of a disability-based need for the transfer.
2. Providing additional explanation of program rules and requirements.
3. Offering documents, in accessible formats (e.g., large type, computer disk or Braille) and in plain language.
4. Permitting rent payments and required communications to be mailed rather than delivered in person.
5. Providing accessible housing to applicants and residents.
6. Providing another housing offer if an applicant, resident or program participant can demonstrate good cause that the rejection of the initial housing offer, for example, was because of the disability of an applicant, resident or program participant's household member.
7. Making a dwelling unit, part of a unit or public and common use elements accessible.
8. Providing auxiliary aids, such as pencil and paper for those with speech difficulties, Telecommunication Device for the Deaf (TDD), Assisted Listening Device (ALD), a qualified sign language interpreter, or a reader, when necessary for effective communication between MDHA and an applicant, resident or program participant.
9. Sending mail or making phone calls to a person designated as a contact person by the person with disabilities.
10. Allowing the use of assistive animals.
11. Considering the impact of "mitigating circumstances" regarding the rejection of an applicant for housing or when terminating the lease or terminating housing assistance to an applicant, resident, or program participant. If the applicant/resident/program participant requests such consideration or if more information is required, MDHA will ask the applicant/resident/program participant to verify:

- a. that the applicant/resident/program participant has a disability;
 - b. that the specific situation(s) that led to application rejection or lease/housing assistance termination is/are caused by or occurred because of the disability or that the disability substantially contributes to the specific situation(s) that led to application rejection or lease/housing assistance termination;
 - c. that the proposed accommodation can reasonably be expected to prevent the recurrence of the situation(s) that led to application rejection or lease/housing assistance termination.
12. Reinstating applications of persons with disabilities, if the reason they did not submit their applications or respond to housing offers in the required time was reasonably related to their disability. Decisions will be made on a case-by-case basis, considering whether, because of the person's disability, the person was prevented from responding in time and considering reasons for reinstating of applications normally allowed for people without disabilities.
13. Reinstating applications of persons with disabilities, if the reason they did not submit their applications or respond to housing offers in the required time was failure on the part of MDHA to provide effective communication.
14. Allowing a live-in aide to reside in an appropriately-sized dwelling unit.
15. Installing strobe type flashing lights and other such equipment for a family member with a hearing impairment.
16. Permitting an outside agency or family member to assist an applicant, resident or program participant in meeting screening criteria or meeting essential lease obligations.

Aids, benefits, and services, to be equally effective, are not required to produce identical results for individuals with disabilities and non-disabled persons, but to afford individuals with disabilities equal opportunity to obtain the same result, to gain the same benefit, or to reach the same level of achievement.

FUNDAMENTAL ALTERATIONS TO THE PROGRAM OR UNDUE FINANCIAL AND ADMINISTRATIVE BURDEN:

MDHA will deny reasonable accommodation requests which would require a fundamental alteration in the nature of its programs, services or activities, or which would create an undue financial and administrative burden or which are neither reasonable nor necessary. Determining a requested accommodation to be a fundamental alteration does not eliminate MDHA's compliance responsibilities. If a requested action would result in a fundamental alteration or undue financial and administrative burden, MDHA may take another action that would not result in a fundamental alteration but would nevertheless ensure that the person would have an equal opportunity to receive the program benefits and services. MDHA's determinations with respect to fundamental alterations will be made on a case- by-case basis.

ESSENTIAL OBLIGATIONS OF TENANCY:

To help identify fundamental operations in the programs, six essential obligations of tenancy are listed below:

1. To pay rent and other charges under the lease in a timely manner;
2. To care for and avoid damaging the unit and common areas; to use facilities and equipment in a reasonable way; to create no health or safety hazards and to report maintenance needs;
3. Not to interfere with the rights and enjoyment of others and not to damage the property of others;
4. Not to engage in criminal activity that threatens the health, safety or right to peaceful enjoyment of other residents or staff; not to engage in drug-related criminal activity on or off the premises (for Public Housing, Section 8 Moderate Rehabilitation, Section 8 Housing Choice Voucher (Section 8 Voucher), and all applicable related programs);
5. To comply with all applicable US HUD regulations, and MDHA rules, and program requirements and documents, (including the MDHA Public Housing Conventional Lease and Community Policies and Section 8 HAP Contract) and to comply with health and safety codes; and
6. Actions that would change the essential obligations of tenancy.

TYPES OF ACTIONS CONSIDERED TO BE A FUNDAMENTAL ALTERATION:

Types of activities that would be considered to be a fundamental alteration to the program include but are not limited to:

1. Actions that require substantial modifications to, or elimination of, essential lease provisions, community policy provisions, or program eligibility or screening requirements based on the obligations of tenancy (e.g., admission of an unqualified family or family member);
2. Actions that require MDHA to add supportive services; e.g., counseling, medical, or social services, that fall outside the range of existing services offered by MDHA;
3. Actions that require MDHA to offer housing or benefits of a fundamentally different nature from the type of housing or benefits that MDHA offers; or
4. Actions that substantially impair MDHA's ability to meet its essential obligations as a landlord, as defined in the MDHA Conventional Public Housing Dwelling Lease (MDHA Lease). MDHA's obligations under the MDHA Lease include management, administration, maintenance, or other services required for the operation of the program or upkeep of the property.

REASONABLE ACCOMMODATION PROCEDURES:

Initial Reasonable Accommodation Procedures:

1. MDHA's *Reasonable Accommodation Request* form will be provided to all applicants as an attachment to MDHA's application when the waiting list is opened.
2. During any point in the application process, applicants may make written requests using the Reasonable Accommodation form or if they are unable to complete the form, make a verbal request for reasonable accommodations to the following address and/or by calling the phone number indicated below:

Attention: Manager, Applicant and Leasing Center (ALC)
Miami-Dade Housing Agency - ALC
2925 N.W. 18th Ave.
Miami, FL 33142
(305) 638-6464
Florida Relay TDD/TTY: (800) 955-8771

Prior to eligibility interviews, applicants will send completed reasonable accommodation forms, and make all related requests and inquiries to, the ALC Manager. Also during this period, the ALC Manager or designee will send all necessary forms, and process all reasonable accommodation forms, requests and inquiries.

Notification to Applicants, Residents, and Program Participants Regarding Reasonable Accommodation Requests:

MDHA's Reasonable Accommodation Policies and Procedures, which includes the Reasonable Accommodation Request and Notice of Nondiscrimination on the Basis of Disability, will be posted in appropriate MDHA business offices listed on page 1. The Notice of Right to a Reasonable Accommodation, Reasonable Accommodation Request, and Reasonable Accommodation Information forms will also be provided at eligibility determination, move-in and recertification by the Site Manager (Public Housing) or MDHA Contract and Leasing Specialist (Section 8) or their designees. When the designated employee (see "Making a Reasonable Accommodation Request", page 11) provides these forms, the recipient must sign the Acknowledgement of Receipt of Reasonable Accommodation Documents form, a copy of which must be placed in the recipient's file.

Forms and letters have been developed for an applicant, resident or program participant to request a reasonable accommodation. These forms are listed in the Appendix and are explained in later sections of this policy.

Although the process for requesting a reasonable accommodation is standardized, each request will be treated uniquely. The results will be unique to the individual, the property, and/or circumstances involved. Whenever possible, reasonable accommodation decisions will be made in a timely manner, and both denials and agreements to make accommodations will be documented in writing. If applicable, forms and notifications will be provided to the applicants, residents or program participants in an accessible format (such as Braille, large print, or audio tape) upon request.

Any meetings required by this policy will be held at an accessible location. Auxiliary aids will be provided upon request, where necessary to afford an individual with disabilities an equal opportunity to participate in, and enjoy the benefits of MDHA's programs and/or activities. Auxiliary aids are services or devices that enable persons with impaired sensory, manual, or speaking skills to have an equal opportunity to participate in, and enjoy the benefits of, MDHA's programs or activities and include, but not limited to, qualified sign language interpreters, telecommunication devices for deaf persons (TDD's), Braille materials, audio recordings, materials in large print, note takers, or assistive listening devices. If auxiliary aids are requested by any person, including but not limited to an applicant, resident or program participant, such accommodations shall be made available. This requirement is contingent upon the requestor having given prior notification to MDHA, e.g., on the application form in the case of an applicant, before any meetings held by MDHA, etc. A person requiring an auxiliary aid shall make their request to MDHA by providing a minimum of five (5) days advance notice. In most instances, this will allow sufficient time to provide these accommodations.

Appointments letters, notices of meetings, brochures and other MDHA communications inform applicants, residents and program participants of their rights to auxiliary aids and how to contact the MDHA staff person to whom these requests should be made. All MDHA staff persons receiving requests for auxiliary aids will record these requests on the "Auxiliary Aids Request" form.

If MDHA is not able to accommodate a disabled person who has requested an auxiliary aid, MDHA will take appropriate action, including, but not limited to, rescheduling any meetings.

The Miami-Dade County contract for sign language interpreter services has a 48-hour advance cancellation requirement. In order to ensure compliance with this cancellation policy and prevent charges in full if the requirement is not met, the requestor will be required to notify staff or the County no less than 72 hours in advance if he/she anticipates not being able to attend the scheduled activity.

MDHA will schedule sign language interpreters when a request is received at least five (5) days prior to any scheduled activity.

Making a Reasonable Accommodation Request:

Applicants, residents and program participants may make a reasonable accommodation request at any time. If the applicant/resident/program participant is unable to complete any of the following reasonable accommodation forms (Request Forms): *Reasonable Accommodation Request*, *Live-in Aide Agreement*, or *Release of Disability-Related Special Needs in Case of Emergency Evacuation* (Public Housing Only) forms, the request will still be considered. If the applicant/resident/program participant is unable to complete any of the Request Forms, the Eligibility Interviewer, Site Manager, Contract and Leasing Specialist, or other designated employee must offer assistance and, upon consulting with the applicant, resident or program participant, complete the Request Forms to the best of his or her ability for record-keeping purposes. The designated employee must review the completed Request Forms, as appropriate, with the applicant, resident, or program participant. The designated employee must ensure that all reasonable accommodation requests are written on the applicable forms, no matter how the requests are communicated. The designated employee shall not give any assurances to the applicant, resident, or program participant that the request for reasonable accommodation will be granted or denied, but shall convey to the applicant, resident, or program participant that the requests will be reviewed and a final determination will be made at

a later date described within this policy. If the accommodation is reasonable, MDHA will consider the request.

The general procedures for making a reasonable accommodation request (subsequent to application process) are as follows:

1. At the eligibility determination phase, the Eligibility Interviewer, Contract and Leasing Specialist or other designated employee shall provide the *Notice of Right to a Reasonable Accommodation, Reasonable Accommodation Request* (which includes an attachment entitled "Examples of Reasonable Accommodations") and *Reasonable Accommodation Information* forms. The designated employee must obtain the signature of the applicant on the *Acknowledgement of Receipt of Reasonable Accommodation Documents* form indicating that he or she has received these forms. That form must be kept in the applicant's file. The Eligibility Interviewer, Contract and Leasing Specialist or other designee is the person to whom requests should be submitted at this phase. The designated employee shall also read a script entitled *Reasonable Accommodation Script* (see Appendix section, form number 14) that clearly and simply indicates what a reasonable accommodation is and the fact that an applicant, resident or program participant has a right to a reasonable accommodation. The designated employee shall ask all applicants if they want to designate a contact person if needed to assist them because of their disability.
2. The Site Manager, Contract and Leasing Specialist or designated employee will notify all Public Housing residents/Section 8 program participants of their right to request a reasonable accommodation by providing them with the *Notice of Right to a Reasonable Accommodation, Reasonable Accommodation Request, and Reasonable Accommodation Information* forms during move-in and recertification. They will also be notified that they may obtain additional *Reasonable Accommodation* forms from the designated employee at any time.
3. Applicants, residents, and program participants will submit all requests for reasonable accommodation to the designated employee as appropriate (see paragraphs 1 and 2 above) on the Request Forms and will obtain the Request Forms from those employees. Applicants, residents, and program participants will also obtain the Authorization for Release of Information from the designated employees as appropriate (see paragraphs 1 and 2) and return completed copies of these release forms to those same employees. If applicants, residents or program participants cannot use or complete a form because of their disability, the designated employee will still respond to their requests for reasonable accommodation and assist the applicant, resident or program participant in completing and using the form.
4. MDHA shall assure that all medical records or any other documents related to the medical condition of the applicant, resident or program participant are protected from disclosure pursuant to all applicable federal and state laws, including but not limited to the Health Insurance Portability and Accountability Act of 1996 and Chapter 119 of the Florida Statutes (Public Records Law). All documents regarding the medical condition of applicants, residents, and program participants must be stored in secure, locked cabinets in the offices of the Applicant and Leasing Center Tenant Selection Supervisor, Public Housing Regional Manager or Section 8 Tenant Selection Supervisor (as applicable). Medical documents must never be stored with applicant or tenant files. Access to medical documents and information is restricted solely to those employees

who must have access to that information in order to provide a reasonable accommodation. This may include the ADA Coordinator, Applicant and Leasing Center Chief (for applicants), Regional Managers (for Public Housing residents), and Tenant Selection Supervisors (for applicants and Section 8 program participants).

5. Within two (2) business days of receipt of the Request Form, the Eligibility Interviewer (for applicants), Site Manager (for Public Housing residents), Contract and Leasing Specialist (for Section 8 Moderate Rehabilitation applicants and for Section 8 program participants) or other designated employee will fax a copy of the Request form and the following Verification Forms (as applicable) to the verification source indicated on the Request Form to verify disability and document the need for the reasonable accommodation: *Reasonable Accommodation Verification*, *Letter to Verification Source for a Reasonable Accommodation Request*, and *Live-in Aide Agreement/Live-in Aide Verification*. The fax notifies the verification source that the completed Verification form must be returned to the designated employee within ten (10) business days and that failure to do so may result in the request being denied.
6. Within two (2) business days of receipt of the Request Form the designated employee will also forward this form to the ADA Coordinator for monitoring purposes.
7. The designated employee places a follow up call to the verification source within one (1) business day of faxing the documents to confirm receipt of the documents. If the forms have not been returned to the designated employee within five (5) days of being sent, the designated employee faxes a reminder to the verification source that the completed Verification form must be returned to the designated employee within five (5) business days and that failure to do so may result in the request being denied. If the Verification form is returned within ten (10) business days of being sent, proceed to step 8 (below). If the verification source does not return the Verification form within ten (10) business days of being sent, the designated employee forwards this information to the Applicant and Leasing Center Tenant Selection Supervisor, Public Housing Regional Manager, Section 8 Tenant Selection Supervisor or other designated supervisor who must forward the documents to the ADA Coordinator with their recommendation for denial.
8. Within two (2) business days of receipt of the completed Verification Form and any supporting documentation, the designated employee will forward the applicant's, resident's, or program participant's Request Form, Verification Form, and any supporting documentation to the designated supervisors in a sealed envelope.
9. The following forms may be used by the designated supervisor (see item 6, above) to communicate with applicants, residents or program participants and verification sources regarding Request and Verification Forms: *Letter to an Applicant, Resident, or Program Participant for a Meeting About Reasonable Accommodation* (if applicable), *Request for More Information or Verification Regarding a Reasonable Accommodation Request*, or *Letter to Verification Source for a Reasonable Accommodation Request* (as applicable).
10. Should the designated supervisor determine that the Verification Form is incomplete or lacking in adequate detail, the designated supervisor will fax the form to the verification source within two (2) business days of receipt. The fax will indicate the necessary changes, and advise the verification source that the necessary changes must be incorporated and the corrected form must be returned within ten (10) business days. The fax also informs the verification source that failure to return the corrected form within

the allotted time may result in the request being denied. The designated supervisor will place a follow-up phone call within one (1) business day of sending the fax to confirm receipt. The designated supervisor will send a reminder fax within five (5) business days of sending the fax should the documents fail to be returned within that time, again informing the verification source that failure to return the corrected form within the allotted time (five (5) days) may result in the request being denied. If the verification source returns the corrected Verification Form within ten (ten) business days, proceed to the decision processes outlined in items 11 and 12 below. Should the verification source fail to return the corrected Verification Form within the allotted ten (10) business days, the designated supervisor will forward all Request and Verification Forms and any other applicable documents to the ADA Coordinator with recommendation that the reasonable accommodation request be denied for lack of proper verification, but that the request will be reconsidered should the requestor wish to resubmit it.

11. All decisions of the designated supervisors to grant reasonable accommodations will be communicated in writing (or in the appropriate, accessible format as previously indicated) to the applicant, resident or program participant and the ADA Coordinator within ten (10) business days of their receipt of correctly completed Request and Verification Forms via the *Approval/Denial of Reasonable Accommodation Request* form. The *Approval/Denial of Reasonable Accommodation Request* (Approval/Denial) form also advises the requestor of a projected date (if that can be estimated at the time of approval) by which MDHA intends to provide the accommodation and indicates a phone number for the requestor to call in case of questions. If necessary, the ADA Coordinator is available for consultation on these matters. All requests for reasonable accommodation that are approved by the designated supervisors will be implemented or the process of implementation will begin within fourteen (14) days. If the implementation or the initiation of implementation should be longer, the requestor will be notified in writing within fourteen (14) days with an estimated date of completion.
12. All recommendations by the designated supervisor to deny reasonable accommodation requests must be reviewed by the ADA Coordinator prior to being released to the requestor. The designated supervisor will transmit his or her recommendations to deny reasonable accommodation requests to the ADA Coordinator within ten (10) business days of their receipt of the Request and Verification Forms. All decisions of the ADA Coordinator to grant or deny reasonable accommodation requests will be communicated in writing via the *Approval/Denial of Reasonable Accommodation Request* form (or in the appropriate, accessible format) to the applicant, resident, or program participant within thirty (30) business days receipt of the designated supervisor's recommendation, the Request and Verification Forms, and all other supporting documentation. Should the requestor wish to contest any adverse action pursuant to the Reasonable Accommodation Grievances and Appeals section (see page 17), he or she may do so by requesting a Reasonable Accommodation Grievance or Appeal Hearing (Hearing). The *Approval/Denial of Reasonable Accommodation Request* form provides information regarding MDHA's grievance/appeals procedure. If the person who wishes to contest an adverse action is unable to do so by written means because of his or her disability, MDHA will consider alternate means by which the person may communicate the appeal. Should the requestor wish to contest the Reasonable Accommodation Grievance or Appeal Hearing Committee's decision, he or she may do so by following the *Miami-Dade Grievance Process, Americans with Disabilities Act of 1990* referenced on page thirty-six (33) of these policies.

13. See the "Reasonable Accommodation Grievances and Appeals" section on page 17 for additional information.

All forms must be date- and time-stamped by the MDHA employees who receive them.

Determining Whether to Provide the Accommodation:

1. The first step in determining whether to provide the accommodation is to verify whether the party requiring the accommodation meets the definition of an Individual with Disabilities. The designated supervisors will determine this by using the applicable Verification Form(s) received from verification source.
 - a. If NO, MDHA is not obligated to make a reasonable accommodation, and may deny the request. All final decisions to deny are made by the ADA Coordinator.
 - b. If YES, go to step 2.
 - c. If more information is needed, the designated supervisor will notify the verification source and/or applicant/resident/program participant (as applicable) about this request, using the standard *Request for More Information or Verification Regarding a Reasonable Accommodation Request* form, or a meeting or discussion will be requested to obtain additional information using the *Letter to an Applicant, Resident, or Program Participant for a Meeting About Reasonable Accommodation*.
2. The second step is to verify that the requested accommodation is related to the disability (for example, if a person (who was the only household member) had a disability but no mobility impairment, and requested a wheelchair-accessible dwelling, the requested accommodation would not be related to the disability). The designated supervisor will determine this by using the applicable Verification Form(s) received from verification source.
 - a. If NO, MDHA is not obligated to make the accommodation, and may deny the request. All final decisions to deny are made by the ADA Coordinator.
 - b. If YES, go to step 3.
 - c. If more information is needed, the designated supervisor will notify the verification source and/or applicant/resident/program participant (as applicable) using the *Request for More Information or Verification Regarding a Reasonable Accommodation Request* form, or request a meeting or discussion using the *Letter to an Applicant, Resident, or Program Participant for a Meeting About Reasonable Accommodation*.
3. Is the requested accommodation reasonable? The Guidelines For Determining Reasonableness listed below will be followed by the designated supervisor in determining the reasonableness of the request.
 - a. If YES, MDHA will approve the request for reasonable accommodation. A written description of the accommodation will be included in the approval letter.

- b. If NO, MDHA may deny the request or may suggest/offer another alternative accommodation if appropriate. The denial or suggestion/offer will be made in writing (in an accessible format, if requested). All denials must be submitted to the ADA Coordinator for review prior to release to the requestor.
- c. If more information is needed, the designated supervisor must either write for more information and notify the verification source and/or applicant/resident/program participant (as applicable) using the standard *Request for More Information or Verification Regarding a Reasonable Accommodation Request* forms, or request a meeting or discussion using the *Letter to an Applicant, Resident, or Program Participant for a Meeting About Reasonable Accommodation*.

Guidelines for Determining Reasonableness:

1. The purpose of the Verification Forms is to verify:
 - a. That the requestor is a person with disability;
 - b. That the requested accommodation is related to the applicant's, resident's, or program participant's disability; and
 - c. That the requested accommodation would (or will) provide the applicant/resident/program participant with an equal opportunity to use and enjoy MDHA housing programs.
2. MDHA retains the right to investigate alternatives to the requested accommodation, and/or alternative methods of providing the requested accommodation.
3. If an alternate accommodation satisfies the needs of the person with disabilities and is equally effective, MDHA may select the accommodation that is most convenient and cost-effective. MDHA will take the preferences of the applicant/resident/program participant into consideration in making such a determination. An alternative accommodation may include a change in procedure or policy, rather than a structural change, when the policy or procedure change would be equally effective. Under any circumstance, the requestor would still have a right to request an additional accommodation should the alternate accommodation proves unsatisfactory. The requestor retains the right to request an additional accommodation as needed.
4. If the requested accommodation constitutes a fundamental alteration to any MDHA program, and there are no other appropriate solutions, the request will be denied, and the designated supervisor recommending denial of the request must provide documentation to the ADA Coordinator explaining why the request would constitute a fundamental alteration. The ADA Coordinator shall conduct an independent review to determine if approval or denial of the request is appropriate.
5. If the requested accommodation creates an undue financial and/or administrative burden, and there are no other appropriate solutions, the designated supervisor recommending denial of the request must provide documentation to the ADA Coordinator explaining why the request would constitute an undue financial and/or

administrative burden. The ADA Coordinator shall conduct an independent review to determine if approval or denial of the request is appropriate.

Reasonable Accommodation Grievances and Appeals:

If an applicant, resident or program participant disagrees with a reasonable accommodation decision, he or she may request a Reasonable Accommodation Grievance and Appeal Hearing by submitting a request which may be written, oral or by any other means of communication accessible by the requestor. The name, address and phone number of the contact person for scheduling a Reasonable Accommodation Grievance and Appeal Hearing is:

Daniel Howe, ADA Coordinator
1401 N.W. 7th Street, Building F
Miami, Florida 33125
(305) 644-5187 (office)
Florida Relay Service: (800) 955-8771 (TDD/TTY)

MDHA's Reasonable Accommodation Grievance and Appeal Hearing Committee shall convene the grievance or appeal hearing within thirty (30) business days of the receipt date of the request. The Reasonable Accommodation Grievance and Appeal Hearing Committee is composed of the members of the Section 504/ADA Policy Committee appointed by the MDHA Director. The Section 504/ADA Policy Committee members are MDHA Division Directors and other applicable staff whose responsibilities include matters related to Section 504/ADA. No MDHA employee who was involved in the initial decision(s) regarding a reasonable accommodation request that is the subject of a hearing shall sit on MDHA's Reasonable Accommodation Grievance and Appeal Hearing Committee during the hearing related to that request.

The applicant, resident or program participant may bring documents, witnesses and/or representatives to the Reasonable Accommodation Grievance and Appeal Hearing in order to contest the manner in which a reasonable accommodation is proposed to be (or was) implemented, the denial of a reasonable accommodation request, or any other applicable disability-related decision made by the ADA Coordinator.

Should the requestor wish to contest the Reasonable Accommodation Grievance and Appeal Hearing Committee's decision, he or she may do so by following the Miami-Dade County ADA Grievance Process (referenced on page thirty-six (33)).

Discontinuation of Reasonable Accommodation:

MDHA will not change or discontinue a reasonable accommodation, or a particular method of providing such accommodation, without giving notice. Notice of the change or discontinuation of a reasonable accommodation will be given to the applicant, resident or program participant with disabilities and it will include a request for the resident to indicate if the change would not meet his or her needs, and notification that the resident has the right to appeal the decision to change or discontinue the accommodation.

Application and Waiting List:

The application and/or application instruction forms for all Public Housing, Section 8 Housing Choice Voucher and Section 8 Moderate Rehabilitation programs shall include the following:

1. Notice that if the applicant is unable to complete the application due to disability, or needs the form in an alternate format, he or she may request such assistance.
2. Notice of the manner in which the applicant should request the required assistance as described in the item above.
3. A question prompting the applicant to indicate whether he or she or a member of the household has a disability.
4. A question prompting the applicant to indicate any special features a household member requires in a rental unit because of disabilities.

In the Public Housing and Moderate Rehabilitation programs, priority for a vacant unit with accessibility features will be given first to current residents who require those features, and then to applicants requiring the same. If there is no other resident or applicant on the waiting list needing units with accessibility features, MDHA may house the next eligible, non-disabled applicant in the unit. MDHA will also inform the applicant that pursuant to MDHA's policy and MDHA's Public Housing Lease, if another resident or eligible applicant requires the accessible features of the accessible unit, and another unit is available, then the non-disabled family/individual residing in the unit with accessible features must transfer to another unit within fifteen (15) days receipt of notice to move.

Notwithstanding MDHA's policies, residents who require a transfer as a reasonable accommodation are not prohibited from transferring within the first year of residency.

In addition, MDHA may grant an exception to its Occupancy Policies (set forth in the Section 8 Administrative Plan (Admin Plan) and the Public Housing Admissions and Continued Occupancy Plan (ACOP)) by providing a larger unit as a reasonable accommodation to a family member with disabilities.

MDHA may allow an applicant or program participant family to have an extra bedroom to accommodate a family member who requires certain medical equipment or for other verifiable reasons. The need for such equipment must be verified by a qualified health care professional as a necessary reasonable accommodation.

MDHA may grant reasonable accommodations by reinstating applicants with disabilities, who fail to respond within the required time frame to inquiries regarding updating the waiting list, if the reason they did not respond is reasonably related to their disability. MDHA may grant reasonable accommodations by reinstating applicants with disabilities for other reasons on a case-by-case basis.

Mitigating Circumstances:

General failure to comply with lease terms or other program policies may lead to termination or denial of assistance.

The ACOP and Admin Plan indicate that MDHA Public Housing residents or family members and Section 8 program participants shall comply with all lease terms including but not limited to:

- Any violent criminal activity,
- Any drug-related criminal activity, or
- Other activities in violation of the lease.

MDHA staff may become aware that an applicant's ineligibility determination, or a resident's or program participant's termination of assistance determination, occurred because of his or her disability. This knowledge may be acquired during an informal review for applicants or during an informal hearing for residents or program participants. This section addresses this issue.

If an applicant, resident or program participant has a history of behavior or displays behavior that may result in a violation of the MDHA Lease or in violation of program regulations or policies, the MDHA Tenant Selection Supervisor (Supervisor), Regional Manager or other designated employee may make an initial determination that the applicant is ineligible or that the resident or program participant should be terminated.

The notices of ineligibility (for applicants) or termination of assistance (for residents and program participants) inform applicants of their right to request an informal review or residents and program participants of their right to an informal hearing.

During the informal review or hearing, if the applicant, resident or program participant informs the Hearing Officer that a requested reasonable accommodation may enable the applicant to become lease compliant, the Hearing Officer will forward the reasonable accommodation request to the ADA Coordinator and continue the informal review until the ADA Coordinator renders his or her determination.

Applicants may appeal the ADA Coordinator's determination according to the processes described in the Reasonable Accommodation Grievance and Appeals section on page 17.

Disability-Related Activities and Reasonable Accommodations Unique to the Section 8 Program:

MDHA will do or allow the following:

1. MDHA will encourage participation in the Section 8 Voucher program by owners, including encouragement of participation by owners having accessible units.
2. The MDHA Section 8 Contract and Leasing Specialist (Specialist) or designee will furnish a current listing of available accessible units known to MDHA to all families that include a person with a disability and, if necessary, otherwise assist the family in locating an available accessible dwelling unit in an accessible environment, to the extent feasible.

3. The Specialist or designee will take into account the special problem of ability to locate an accessible unit in an accessible environment when considering requests by eligible individuals with disabilities for extensions of Section 8 Vouchers.
4. The Specialist or designee will allow Section 8 Voucher holders to request a reasonable accommodation, in the form of an extension of the issued Voucher beyond 120 days, by following the standard reasonable accommodation request procedure. Approvals of voucher term extensions beyond 120 must be consistent with the Admin Plan.
5. MDHA may, if necessary as a reasonable accommodation for an individual with a disability, approve a family's request for an exception payment standard amount under the Housing Choice Voucher Program so that the program is readily accessible to and usable by individuals with disabilities. See 24 C.F.R. §§ 8.28 and 982.504(b)(2).
6. Upon request by an applicant, participant, or their representative, MDHA will ask the HUD Field Office for an exception payment standard up to 120% of the Fair Market Rent (FMR). However, the applicant, participant or the representative, must provide documentation of the need for the exception payment standard to MDHA.
7. In exceptional cases, MDHA may ask the Assistant Secretary for Public and Indian Housing of HUD for an exception payment standard amount over 120% of the FMR, provided the applicant, participant or the representative provides the appropriate supporting documentation.
8. Upon request, the Supervisor or designee may allow a higher utility allowance as reasonable accommodation for a person with disabilities, if appropriate.
9. The Supervisor or designee shall deny participation of units when the owner is the parent, child, grandparent, grandchild, sister or brother of any member of the participant family, unless the Supervisor or designee determines that approving the unit would provide reasonable accommodation for a family member who is a person with disabilities. The process by which a participant family may request such accommodation is described on pages 11 through 15. All initial recommendations to deny reasonable accommodation requests must be reviewed by the ADA Coordinator for final determination.
10. Annual recertifications shall be conducted at the offices of the MDHA Private Rental Housing Division. If a housing program participant is unable to come to the office for the recertification due to disability, the Supervisor or designee may allow, on a case-by-case basis, and at the request of the program participant, the program participant to be reexamined either by mail or by an at-home visit.
11. The Supervisor or designee will take into consideration the interests of persons who are disabled in making decisions as to which family member shall assume the application if the family divides.
12. Permitting requests for extensions of Section 8 Vouchers may be allowed if there is a difficulty in locating a unit with suitable accessible features or otherwise appropriate for the family.

MDHA PUBLIC HOUSING ASSISTIVE ANIMAL POLICY:

Assistive animals are also referred to as service animals, support animals or therapeutic animals. They give assistance to persons with disabilities and are necessary as a reasonable accommodation.

Animals **do not** have to be trained to be assistive animals. An animal not trained to be an assistive animal, yet prescribed to provide emotional support to improve a person's symptoms caused by chronic mental illness, is also an example of an assistive animal. In addition, a seeing-eye dog or a dog trained to assist a hearing impaired person would also be examples of assistive animals.

MDHA will not charge a pet deposit for an assistive animal kept in accordance with all MDHA policies and housed in a development or building owned by Miami-Dade County and administrated by MDHA. All residents are, however, responsible for reimbursing the appropriate parties should their assistive animal cause damage to the unit, the common areas and elements or to any other the property of the residents in a development or building owned by Miami-Dade County and administrated by MDHA, including but not limited to the property occupied by other residents of the public housing development or other property owned by Miami-Dade County and administrated by MDHA.

MDHA will also not apply its animal weight policy or any other policy which will unreasonably deny a disabled applicant, resident or program participant, who requires an assistive animal, the full use and enjoyment of his or her dwelling or the common areas.

The MDHA Regional Manager or designee will use the following steps when considering a request for an assistive animal as a reasonable accommodation:

1. Public housing applicants who have received public housing offers, and public housing residents may use the *Reasonable Accommodation* form to request an assistive animal as a reasonable accommodation.
2. Public housing applicants who have received public housing offers, and public housing residents use the *Reasonable Accommodation Verification* to obtain verification that the person for whom the assistive animal is requested is a person with a disability as defined in Section 504, the ADA and the Fair Housing Act regulations and that the requested animal is needed to assist with the disability.
3. Refer to the information in the section entitled "Making a Reasonable Accommodation Request" on pages 11 through 15 of these policies and procedures for the steps in processing these and other reasonable accommodation requests.
4. Compliance with the assistive animals policies will be required to the extent feasible without violating the individual's rights to have an assistive animal.
5. The assistive animal owner shall be responsible for the animal's care and the animal must be kept according to MDHA's Lease and Community Policies.
6. If the animal or its care subsequently poses a public health problem or results in a lease violation, the problem will be addressed, under the terms of the MDHA Lease and

Community Policies. In such a case, the MDHA Site Manager or designee may send the resident a Notice of Lease Violation.

Residents may contact Danny Howe, ADA Coordinator at (305) 644-5187 (phone) or (305) 644-5343 (TDD/TTY) with any questions regarding this matter.

SECTION 8 ASSISTIVE ANIMAL POLICY:

Section 8 owners are required to comply with all applicable federal, state and local laws that protect the rights of the disabled. Accordingly, where Section 8 tenants require assistive animals as a reasonable accommodation, Section 8 owners may not require the owners of assistive animals to pay pet deposits, neuter their animals, or adhere to limits on the weight, size, and number of assistive animals.

Section 8 tenants may contact Danny Howe, ADA Coordinator at (305) 644-5187 (phone) or (305) 644-5343 (TDD/TTY) with any questions regarding this matter.

LIVE-IN AIDES:

A live-in aide is a person eighteen (18) years of age or older who resides with one or more elderly (at least sixty-two (62) years of age), near-elderly (at least fifty (50) years of age but below sixty-two (62) years of age), or disabled (see the definition of a person with disabilities on page 4) person(s) and who is determined to be essential to the care and well-being of the person; is not obligated for the support of the person; and would not be living in the unit except to provide the necessary supportive services. A relative may be considered a live-in aide, but must meet all the criteria listed herein. Persons with children or spouses may, on a case-by-case basis, be allowed to serve as Live-in Aides.

Requests for live-in aides are subject to the foregoing policies. The two forms discussed below replace the Reasonable Accommodation Request and Reasonable Accommodation Verification forms (respectively) for purposes of requesting a live-in aide as a reasonable accommodation.

1. The *Live-in Aide Agreement* is the form on which:
 - a. The head of household shall request the live-in aide. The requestor may make this request for him or herself, or for a household member.
 - b. The requestor provides the designated employee with information related to the request and the live-in aide.
 - c. The requestor shall provide the designated employee with the name and contact information of the verification source from whom the requestor is obtaining verifications and other information essential for obtaining a live-in aide.

2. The *Live-in Aide Verification* is the form on which:
 - a. The verification source verifies that the person for whom the Live-in Aide is being requested qualifies for, and requires, the live-in aide. The verification source must also verify that the live-in aide is qualified to provide the appropriate services to the household member.

The designated employee faxes the *Live-in Aide Verification* form to the verification source to help ensure the form is filled out by the designated verification source.

The designated employee may approve a written request for a live-in aide upon receipt of verification documentation including, but not limited to, completed *Live-in Aide Agreement* and *Live-in Aide Verification* forms. If the designated employee approves, or the ADA Coordinator denies, the request for a live-in aide, he or she will inform the requestor by means of the Approval/Denial of Reasonable Accommodation Request form.

The live-in aide may live in the unit solely to care for the family member and qualifies for occupancy only for as long as the individual requires the supportive services and is living in the unit. MDHA shall deny occupancy of the unit to the live-in aide after the tenant, resident or program participant, for whatever reason, is no longer living in the unit.

A relative may be considered as a live-in aide but must meet all the criteria outlined in this section and must be qualified to provide care for the family member. The tenant and the live-in

aid shall acknowledge that the live-in aide does not have any right to the unit and does not qualify for continued occupancy as a remaining family member by signing the *Live-in Aide Agreement* (which shall become an addendum to the tenant's/resident's lease).

The ADA Coordinator may deny the live-in aide request of a person who does not meet the admission criteria described in the Admin Plan and the ACOP. The process by which applicants, residents and Section 8 program participants may appeal a denial of a live-in aide request, or any other adverse decisions related to disabilities, is described in the Reasonable Accommodation Grievances and Appeals section (see page 17).

TRANSFERS:

The reasonable accommodation policies mentioned throughout this document apply to transfers based on a request for reasonable accommodation. Transfers based on a request for reasonable accommodation in Section 8 Moderate Rehabilitation and Public Housing programs shall be documented in the same manner (as indicated throughout this policy) as other reasonable accommodation requests are documented (e.g. a *Reasonable Accommodation Request* form must be filled out). The only additional requirement is that, in addition to the aforementioned, the Public Housing requestor must complete and submit a Request for Transfer form.

In Public Housing, MDHA shall not require, or recommend as an alternative, that a resident with a disability must accept a transfer instead of providing some other reasonable accommodation. However, if a public housing resident with a disability requests dwelling unit modifications that involve structural changes, including, but not limited to widening entrances, rooms, or hallways, and there is a vacant, comparable, appropriately-sized UFAS-compliant unit in that resident's development, an adjacent development, or a development to which the resident has expressed a willingness to move, MDHA may offer to transfer the resident to the vacant unit in her/her development or adjacent development instead of providing structural modifications. However, if that resident rejects the offered transfer, MDHA shall make modifications to the resident's unit unless doing so would be structurally impracticable or would result in an undue financial and administrative burden or would result in a fundamental alteration to a MDHA program, service or activity. MDHA shall inform applicants, residents and Section 8 program participants whether their transfers, structural modifications, and all other reasonable accommodations are granted by means of the Approval/Denial of Reasonable Accommodation Request form.

If the resident accepts the transfer, MDHA will work with the resident to obtain moving expenses from social service agencies or other similar sources. If that effort to obtain moving expenses is unsuccessful within thirty (30) days of the assignment of the dwelling unit, PHA shall pay the reasonable moving expenses, including utilities fees and deposits. MDHA will select the moving service vendors and disburse payments to them. Nothing contained in this paragraph is intended to modify the terms of MDHA's Tenant and Assignment Plan and any resident's rights hereunder.

FORMER USERS OF ILLEGAL DRUGS:

Under the Fair Housing Act, Section 504 of the Rehabilitation Act, and the Americans with Disabilities Act, a former user of illegal drugs (recovered or now in recovery) is considered to be a person with disabilities and is protected against discriminatory treatment, but persons engaged in current illegal use of controlled substances are not protected.

The term "person with a disability" includes an individual who:

1. Has successfully completed a supervised drug rehabilitation program and is no longer engaging in the illegal use of drugs, or has otherwise been rehabilitated successfully and is no longer engaging in such use;
2. Is participating in a supervised rehabilitation program and is no longer engaging in such use; or
3. Is erroneously regarded as engaging in such use, but is not engaging in such use.

Anti-discrimination laws protect individuals who have a history of illegal use of a controlled substance or addiction and do not engage in the current illegal use of a controlled substance if they can otherwise meet the definition of a person with a disability.

When an individual claims recovery, the designated employee will require the person to present evidence of recovery from a qualified, neutral third party. The designated employee may require a family member who has engaged in the illegal use of drugs to present evidence of successful completion of a treatment program as a condition to being allowed to reside in a unit owned and managed by MDHA or as a condition to being allowed to participate in other MDHA housing programs. If it is determined that the individual "has recovered or is in recovery" and is thus a "person with a disability," the designated employee will consider requests for reasonable accommodations.

The designated employee will require the individual to provide documentation that would convince a reasonable person that the applicant/resident is not a current user of illegal drugs.

Documentation that an applicant/resident/program participant is not a current user of illegal drugs could include:

1. Verification from a reliable drug treatment counselor or program administrator, or other party acceptable to the designated employee, indicating:
 - a. that the applicant/resident/program participant is/has been in treatment;
 - b. that there is a reasonable probability of success in refraining from the use of illegal drugs;
 - c. that the applicant/resident/program participant is complying/has complied with the requirements of the treatment program; that the applicant/resident/program participant is not currently a user of illegal drugs; and
 - d. the period of time the applicant/resident/program participant has not been using drugs (this verification may include documentation of the results of urinalyses over a period of time); and/or

2. Verification from a probation or parole officer:
 - a. that the applicant/resident/program participant has met or is meeting the terms of probation or parole;
 - b. is not currently a user of illegal drugs;
 - c. and for what period of time the applicant/resident/program participant has not been using illegal drugs (this verification may include documentation of the results of urinalyses over a period of time); and/or
3. Verification from a third party/parties, indicating:
 - a. that the applicant/resident/program participant is not currently using illegal drugs and
 - b. for what period of time the applicant/resident/program participant has not been using illegal drugs;
4. Description of the relationship between the third party/parties and the applicant/resident/program participant (verifications will not be accepted from the applicant's/resident's relatives); and
5. Description of how the third party/parties know(s) the status of whether the applicant/resident/program participant is currently using illegal drugs.

When an applicant/resident/program participant has a history of drug rehabilitation/treatment followed by recidivism, or is currently in treatment (as opposed to having completed treatment), more documentation may be necessary to convince a reasonable person that the applicant/resident/program participant is not a current user of illegal drugs.

The applicant/resident/program participant may be required to show in what ways:

1. His or her current situation, and
2. His or her claim to be a former illegal user of a controlled substance, and
3. His or her claim to be able to comply with the essential terms of the MDHA Lease or other housing program requirements is different from previously unsuccessful efforts to stop illegally using a controlled substance.

In all situations in which an applicant/resident claims to be a person with a disability due to former illegal drug use, the designated employee will determine the reliability and validity of information/verifications provided with the request for reasonable accommodation. The designated MDHA employee will make a determination approving or denying the reasonable accommodation request and a determination of eligibility for housing assistance accordingly.

ALCOHOLISM:

MDHA will not discriminate against any person solely because he or she is a person with the disability of alcoholism. The designated employee will, however, deny admission to an applicant, terminate assistance to a participant or terminate the tenancy of a resident, who MDHA has reasonable cause to believe will behave in a manner that will interfere with the health, safety, or right to peaceful enjoyment of the premises by other residents, other tenants, or MDHA personnel. The term "reasonable cause to believe" shall be determined on a case-by-case analysis. MDHA may evaluate whether a person poses – or would pose – a direct threat to the health or safety of others.

MDHA will make determinations of direct threat based on the following guidelines described in the following statement from the May 17, 2004 *Joint Statement of the Department of Housing and Urban Development and the Department of Justice, Reasonable Accommodations Under the Fair Housing Act*:

A determination that an individual poses a direct threat must rely on an individualized assessment that is based on reliable objective evidence (e.g., current conduct, or a recent history of overt acts). The assessment must consider: (1) the nature, duration, and severity of the risk of injury; (2) the probability that injury will actually occur; and (3) whether there are any reasonable accommodations that will eliminate the direct threat. Consequently, in evaluating a recent history of overt acts, a provider must take into account whether the individual has received intervening treatment or medication that has eliminated the direct threat (*i.e.*, a significant risk of substantial harm). In such a situation, the provider may request that the individual document how the circumstances have changed so that he no longer poses a direct threat. A provider may also obtain satisfactory assurances that the individual will not pose a direct threat during the tenancy. The housing provider must have reliable, objective evidence that a person with a disability poses a direct threat before excluding him from housing on that basis.

MDHA will apply the same standard of performance and behavior to an individual with alcoholism as it applies to others. If any unsatisfactory performance or behavior is related to the disability of an applicant/resident/program participant, the behavioral manifestations of the condition may be taken into consideration in determining whether the applicant/resident/program participant is qualified. If unable to meet the tenancy requirements, the applicant/resident/program participant may be denied housing on that basis, provided any request for reasonable accommodation has been considered. The process by which applicants, residents and Section 8 program participants may appeal a denial of housing or program participation, or any other adverse decisions related to disabilities, is described in the Reasonable Accommodation Grievances and Appeals section (see page 17).

EMERGENCY EVACUATION:

This section only applies to the MDHA Public Housing program.

Public Housing program applicants (who have received public housing offers) and residents with disabilities must ultimately be responsible for their own safety. Thus, they may choose not to live above the ground floor because of possible inability to escape a fire. They must, however, be allowed to decide whether living in an upper-floor dwelling unit outweighs whatever safety concerns may exist.

At move-in orientation and during recertification, the Site Manager or designee informs Public Housing program residents that with their consent, the Site Manager will provide information to the fire and police departments that identifies residents who will have special needs in case of an emergency evacuation. The Site Manager will only share this information with these parties if consent is given.

The site manager or designee will provide each resident with a copy of the *Release of Disability-Related Special Needs in Case of Emergency Evacuation* (Release) form at move-in and recertification. The Site Manager will maintain these forms confidentially in the Site Office files. These forms will also be maintained confidentially at the Regional Offices in case the Site Offices are inaccessible due to an emergency.

In emergency situations, and only insofar as is reasonably feasible, Regional Managers (if applicable), Site Managers or designees will inform fire and/or police departments as to which residents have special emergency evacuations needs.

Buildings with more than four units or with units above the first floor shall have evacuation plans identifying escape routes and procedures to be followed in case of emergency, including procedures for notifying persons who are deaf or blind and for evacuating persons who can not climb stairs or may be disoriented. It is recommended that the evacuation plan be worked out with the local fire department.

OTHER MIAMI-DADE HOUSING AGENCY PROGRAMS AND SERVICES:

MDHA administers a number of programs and services (e.g. various programs for home repair/improvement loans, home purchasing loans, construction loans, etc.) in addition to those previously mentioned in this policy. MDHA will endeavor to ensure any person with disabilities who requests reasonable accommodation related to any MDHA programs and/or services are provided all such accommodations as is their right under federal, state, and local laws and regulations.

MIAMI-DADE COUNTY ADA GRIEVANCE PROCESS:

Should MDHA applicants, residents or program participants choose, they may follow the grievance process outlined in Attachment Three of Miami-Dade County Administrative Order Number 10-10 (see Appendix, *Miami-Dade Grievance Process, Americans with Disabilities Act of 1990*) instead of the process described in the "Reasonable Accommodation Grievances and Appeals" section on pages 17 of the MDHA Reasonable Accommodation Policies and Procedures. The Miami-Dade County grievance process serves "...as the County's mechanism to respond to complaints of discrimination on the basis of a disability in County programs and services under the Americans with Disabilities Act of 1990 (ADA)."

ACKNOWLEDGEMENTS:

MDHA wishes to acknowledge the assistance of the United States Department of Housing and Urban Development; the Housing Authority and Community Services Agency of Lane County (HACSA), Springfield, Oregon; the Massachusetts Department of Housing and Community Development; the Miami-Dade County Attorneys Office and the Miami-Dade County Office of ADA Coordination, whose contributions were instrumental to the creation of this policy.

Resource materials used as guidance in developing this policy and responding to reasonable accommodation requests and issues include:

- The Fair Housing Amendments Act
- Americans With Disabilities Act, Title II Technical Assistance Manual
- Section 504 of the Rehabilitation Act of 1973
- Policy On Reasonable Accommodation for the Housing Authority and Community Services Agency of Lane County (HACSA) , Springfield, Oregon
- Forms developed by the Massachusetts Department of Housing and Community Development
- May 17, 2004 Joint Statement of the Department of Housing and Urban Development and the Department of Justice, Reasonable Accommodations Under the Fair Housing Act

APPENDIX

Documents included in the Appendix are:

1. Notice of Nondiscrimination on the Basis of Disability
2. Notice of Right to a Reasonable Accommodation
3. Reasonable Accommodation Request and Examples of Reasonable Accommodations
4. Reasonable Accommodation Verification
5. Live-in Aide Agreement
6. Live-in Aide Verification
7. Auxiliary Aids Request
8. Authorization for Release of Information
9. Letter to an Applicant, Resident or Program Participant for a Meeting About Reasonable Accommodation
10. Request for More Information or Verification Regarding a Reasonable Accommodation Request
11. Letter to Verification Source for a Reasonable Accommodation Request
12. Approval/Denial of Reasonable Accommodation Request
13. Release of Disability-Related Special Needs in Case of Emergency Evacuation
14. Reasonable Accommodation Script
15. Acknowledgement of Receipt of Reasonable Accommodation Documents
16. Reasonable Accommodation Information
17. Miami-Dade Grievance Process, Americans with Disabilities Act of 1990

**MIAMI-DADE HOUSING AGENCY
NOTICE OF NONDISCRIMINATION
ON THE BASIS OF DISABILITY**

Miami-Dade Housing Agency (MDHA) does not discriminate on the basis of disability in the admission or access to, or treatment or employment in, its programs or activities.

Daniel Howe, MDHA's ADA Coordinator, has been designated to coordinate compliance with the non-discrimination requirements of Section 504 of the Rehabilitation Act of 1973,(Section 504), the Americans with Disabilities Act (ADA), the Federal, State and local Fair Housing Acts, the United States Department of Housing and Urban Development Section 504 and Fair Housing Act Regulations, and the ADA regulations implemented by the United States Equal Employment Opportunity Commission and the United States Department of Justice.

Mr. Howe's contact information is as follows:

Office address: 1401 N.W. 7th Street, Building F, Miami, FL 33125

Phone: (305) 644-5187

Fax: (305) 644-5113

Florida Relay Service: (800) 955-8771 (TDD/TTY)

E-mail: DHOWE@miamidade.gov

Applicant, Tenant, or Program Participant's Signature

Date

Applicant, Tenant, or Program Participant's Name *

Client Number

IN THE PRESENCE OF:

Designated MDHA Employee's Signature

Date

Designated MDHA Employee's Name *

Designated MDHA Employee's Job Title *

*please print

This material is available in an accessible format upon request. Please call Danny Howe, ADA Coordinator at (305) 644-5187 (phone) or (305) 644-5343187 (TDD).

QAC/0003/01-15-04

**MIAMI-DADE HOUSING AGENCY
NOTICE OF RIGHT TO A REASONABLE ACCOMMODATION**

If you have a disability and as a result of your disability you need . . .

- a change in the rules or policies or how Miami-Dade Housing Agency (MDHA) does things that would give you an equal chance to live here and use the facilities or take part in programs or services on site,
- a change, repair, or special feature in a dwelling that would give you an equal chance to live in the dwelling and use the facilities at the dwelling site or take part in programs on site,
- a change, repair or special feature at some other area of a MDHA building or property that would give you an equal chance to live here and use the facilities or take part in MDHA programs,
- a change in the way MDHA communicates with you or gives you information.

You may ask for this kind of change, which is called a REASONABLE ACCOMMODATION.

MDHA will give you an answer within sixty (60) business days of the Applicant and Leasing Center Tenant Selection Supervisor, Public Housing Regional Manager, or Section 8 Tenant Selection Supervisor's receipt of the acceptably completed Request and Verification Forms via the *Approval/Denial of Reasonable Accommodation Request* form.

MDHA will let you know if additional information or verification is needed, or if there are other ways to meet your needs.

If MDHA turns down your request, MDHA will explain the reasons, and you can provide more information if you think that will help.

If you need help filling out a *Reasonable Accommodation Request Form* or if you want to give MDHA your request in some other way, MDHA will help you.

NOTE: To the greatest extent allowable by law, all information you provide will be kept confidential and be used only to help you have an equal opportunity to enjoy your housing and the common areas.

This material is available in an accessible format upon request. Please call Danny Howe, ADA Coordinator at (305) 644-5187 (phone) or (305) 644-5343187 (TDD).

**MIAMI-DADE HOUSING AGENCY
REASONABLE ACCOMMODATION REQUEST**

Head of Household: _____ Phone: (____) _____
(PRINT NAME)

Requestor: _____
(PERSON REQUESTING REASONABLE ACCOMMODATION IF OTHER THAN HEAD OF HOUSEHOLD, PRINT NAME)

Address: _____ Client #: _____

Signature: _____
(Head of Household, Other Requestor, or Authorized Representative of Requestor)

A disability is defined, in part, as a physical or mental impairment that substantially limits one or more major life activities; a record of having such an impairment; or being regarded as having such an impairment.

A Public Housing resident may request a change in his or her current unit or a transfer to a unit that has already been changed (in the resident's development or another development). An applicant, resident, or program participant may request assistance with, or change in, a MDHA practice, rule, policy, procedure, program or service.

MDHA will work with the applicant, resident or program participant to determine how to provide the reasonable accommodation request. MDHA may require documentation to support the reasonable accommodation request(s).

1. The following is the name of the household member with a disability who needs a reasonable accommodation:

Name: _____

2. Because of the above household member's disability, the following change(s) or assistance (reasonable accommodation) is necessary so that the individual can participate in a Miami-Dade Housing Agency (MDHA) housing assistance program as easily or successfully as other program participants. Check the kind of change(s) you need.

A change or special feature in a MDHA dwelling, building or property. Note: If you are a Section 8 program participant, you must make these kinds of requests to your landlord.

Assistance with, or change in, a MDHA practice, rule, policy, procedure, program or service.

3. Describe the problem that the household member named in item 1 is having, or might have, with a MDHA dwelling, building, property, practice, rule, policy, procedure, program or service:

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**MIAMI-DADE HOUSING AGENCY
REASONABLE ACCOMMODATION REQUEST**

4. Describe the type of change or assistance (reasonable accommodation) required:

5. Describe how this change or assistance will help with the problem:

6. Indicate the verification source MDHA may contact to verify that the household member named in item 1 has a disability and needs a reasonable accommodation.

Name: _____

Address: _____

Telephone Number: (____) _____

Note: Individuals may obtain a copy of the MDHA Reasonable Accommodation Policies and Procedures, upon request, from Applicant and Leasing Center Eligibility Interviewers, Public Housing Site Managers, Section 8 Leasing and Contract Specialists, and MDHA's ADA Coordinator. You may also get additional copies of this request form from the ADA Coordinator:

Danny Howe, ADA Coordinator
1401 N.W. 7th Street, Building G
Miami, Florida 33125
(305) 644-5187 phone
(305) 644-5113 fax
Florida Relay Service: (800) 955-8771 (TDD/TTY)

This material is available in an accessible format upon request. Please call Danny Howe, ADA Coordinator at (305) 644-5187 (phone) or (305) 644-5343187 (TDD).

EXAMPLES OF REASONABLE ACCOMMODATIONS

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MIAMI-DADE HOUSING AGENCY REASONABLE ACCOMMODATION REQUEST

The following list of reasonable accommodation methods are examples that may constitute reasonable accommodations for individual Miami-Dade Housing Agency (MDHA) applicants, residents, and program participants. These accommodations may not necessarily be "reasonable" for all individuals. In addition, each accommodation may not be available to every applicant, resident in every unit and/or in every development, and program participants.

Examples of Modifications Which Constitute A Reasonable Accommodation

Section 504 states that the design, construction or alteration of buildings in conformance with §§ 3-8 of the Uniform Federal Accessibility Standards (UFAS), Appendix A to 24 C.F.R. § 40, shall be deemed to comply with the requirements of 24 C.F.R. §§ 8.21; 8.22; 8.23 and 8.25. However, the UFAS citations noted below are provided as a reference to assist in providing a reasonable accommodation and are not intended to govern every request for a modification. In order to meet the individual's specific disability-related need(s), MDHA may need to deviate from the UFAS. In addition, the reference to a UFAS section does not require all elements in that section to be made accessible. Rather, only the specific reasonable accommodation item requested is required to be accessible per the needs of the individual requesting the reasonable accommodation.

However, some modifications may not be structurally feasible in all units or all developments; in addition, some modifications may represent an undue financial and administrative burden. In such situations, the requirement to provide a reasonable accommodation is not alleviated, but must be provided by some other means such as transferring a family with a disabled member to a unit/development where the reasonable accommodation can be provided. Nevertheless, MDHA will work with each qualified resident with a disability who requests a reasonable accommodation in order to identify a reasonable, effective and appropriate accommodation.

Common Areas¹ -

- Add edge protection to ramps and ramp landings with drop-offs
- Widen doors
- Provide accessible, lever-type door hardware
- Re-hang door to lay flat against a wall when opened
- Re-hang door to swing outward instead of into the accessible space
- Provide accessible or adjustable closet rods and shelves
- Provide lever faucets in public restrooms
- Provide grab bars in public restrooms
- Provide accessible toilets in public restrooms
- Lower mirrors in public restrooms
- Provide extra electrical outlets for TDD/TTY equipment
- Provide heavier electrical circuits to accommodate higher wattage bulbs for individuals with visual impairments
- Provide visual alarms for individuals who are deaf or hard of hearing
- Provide accessible cabinets and countertops in public kitchens

¹ Common Areas include, but are not limited to: PHA offices, including management and regional offices; private management company offices; community room; senior center; meeting room; mail room; laundry room; trash disposal; and, day care facilities.

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REASONABLE ACCOMMODATION REQUEST**

- Provide accessible appliances [i.e., refrigerator, oven, stove] in public kitchens

Elevators² -

- Elevators shall be located on an accessible route
- Residential or fully enclosed wheelchair lifts may be used, when appropriate, and when approved by local administrative authorities. See UFAS §§ 4.10.1; 4.11

Building Entrances and Accessible Routes³ -

- Accessible signage;
- Add edge protection to ramps and ramp landings with drop-offs
- Widen doors
- Provide accessible, lever-type door hardware
- Re-hang door to lay flat against a wall when opened
- Re-hang door to swing outward instead of into the accessible space
- Add or adjust door closures
- Provide lever faucets in public restrooms
- Provide grab bars in public restrooms
- Provide accessible toilets in public restrooms
- Lower mirrors in public restrooms
- Provide extra electrical outlets for TDD/TTY equipment
- Provide heavier electrical circuits to accommodate higher wattage bulbs for individuals with visual impairments
- Provide visual alarms for individuals who are deaf or hard of hearing
- Providing contrasting paint on doors, around doorways, at windows, baseboards and/or stairs/risers for individuals with visual impairments
- Provide an accessible route into a building

² Accessible elevators shall be on an accessible route and shall comply with UFAS § 4.10 and with the American National Standard Safety Code for Elevators, Dumbwaiters, Escalators and Moving Walks, ANSI A17.1-1978 and A17.1a-1979. See UFAS § 4.10; Figures 20, 22 and 23. An "accessible route" is a continuous, unobstructed UFAS-compliant path as prescribed in 24 C.F.R. §§ 8.3 and 8.32 and UFAS § 4.3.

³ At least one (1) accessible route complying with UFAS § 4.3 shall be provided within the boundary of the site from public transportation stops, accessible parking spaces, passenger loading zones, if provided, and public streets or sidewalks to an accessible building entrance. See UFAS §§ 4.1.1(1); 4.3. In addition, UFAS requires that at least one (1) accessible route complying with UFAS § 4.3 shall connect accessible building or facility entrances with all accessible spaces and elements within the building or facility. See UFAS §§ 4.1.2(1); 4.3.

**MIAMI-DADE HOUSING AGENCY
REASONABLE ACCOMMODATION REQUEST**

Trash Disposal Facilities –

- Provide accessible route into and through trash disposal facilities; or, provide an equally-effective accommodation such as personal trash disposal by housing staff

Laundry Facilities -

- Provide accessible route into and through common-use laundry facilities. Provide at least one (1) front loading washer and one (1) front-loading dryer in public-use laundry facilities⁴; or, provide an equally effective accommodation such as the provision of a front-loading washer and dryer in resident's unit; or, provision of laundry services at PHA's expense

Mail Delivery/Mail Boxes -

- Provide accessible route into and through mail boxes/mail facilities. Provide mailbox at lower height, upon request; or, provide equally effective accommodation such as home delivery.⁵

Apartment Entrance and Interior Doors –

- Widen doors
- Provide accessible, lever-type door hardware
- Re-hang door to lay flat against a wall when opened
- Re-hang door to swing outward instead of into the accessible space
- Add or adjust door closure speed
- Adjust door opening force required for pushing/pulling the door
- Provide lower peep holes or "telescoped" peep holes
- Provide a visual door knocker for individuals with hearing impairments
- Providing contrasting paint on doors, around doorways, at windows, baseboards and/or stairs/risers for individuals with visual impairments
- Provide ramp from accessible route to accessible entrance into unit

⁴ If laundry equipment is provided within individual dwelling units, or if separate laundry facilities serve one or more accessible dwelling units, then they shall meet the requirements of UFAS §§ 4.34.71 through 4.34.7.3.

⁵ "Cluster boxes", common in multi-family housing developments, are routinely placed in sequential order. However, if a customer is unable to access his/her mailbox due to a disability, the customer may submit a request under the U.S. Postal Service's "Hardship Clause" and request the relocation of the mailbox to a lower, accessible level. According to § 631.42 of the U.S. Postal Service "Postal Operations Manual", the customer submits the "Hardship Clause" request directly to his/her postal delivery person; the delivery person then submits the request to his/her manager. The manager evaluates the individual request and takes appropriate action. If the postal service is unable to relocate the mailbox, the postal service may provide an alternate accommodation such as door delivery.

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**MIAMI-DADE HOUSING AGENCY
REASONABLE ACCOMMODATION REQUEST**

Apartment Light Switches & Electrical Outlets -

- Lower electrical switches and/or raise electrical outlets⁶
- Provide extra electrical outlets for TDD/TTY equipment or other equipment utilized by individuals with disabilities
- Provide heavier electrical circuits to accommodate higher wattage bulbs for individuals with visual impairments
- Lower thermostat controls
- Lower circuit breakers, when located in unit

Apartment Interior -

- Provide extra electrical outlets for TDD/TTY equipment or other equipment utilized by individuals with disabilities
- Provide heavier electrical circuits to accommodate higher wattage bulbs for individuals with visual impairments
- Provide visual and audible alarms for individuals who are deaf or hard of hearing; and, provide visual alarms in each room of unit⁷
- Provide windows which requires five pounds or less of opening force; provide crank type opening mechanism with large levers, when feasible
- Provide accessible storage spaces, including lowering clothes rods and/or adjustable closet shelves. Accessible storage spaces shall comply with UFAS § 4.25; Fig. 38

Apartment Kitchens⁸ -

- Lower kitchen sink
- Provide lever type hardware on kitchen faucet
- Provide accessible kitchen cabinets; provide accessible hardware on kitchen cabinets
- Provide accessible kitchen counters and work space

If the following items are provided to non-disabled residents in a development:

- Provide accessible refrigerators. See UFAS § 4.34.6.8
- Provide accessible ovens. See UFAS § 4.34.6.7
- Provide accessible dishwashers. See UFAS § 4.34.6.9

⁶ The highest operable part of all controls, dispensers, receptacles, and other operable equipment shall be placed within at least one of the reach ranges specified in §§ 4.2.5 and 4.2.6. Except where the use of special equipment dictates otherwise, electrical and communications system receptacles on walls shall be mounted no less than 15" above the finish floor. See UFAS § 4.27.3

⁷ If emergency warning systems are provided, they shall include both audible alarms complying with UFAS § 4.28.2 and visual alarms complying with UFAS § 4.28.3. See UFAS § 4.1.2 (13)

⁸ Accessible or adaptable kitchens and their components shall be on an accessible route and shall comply with the requirements of UFAS § 4.34.6. However, the PHA will not be required to make all elements of the kitchen accessible, unless requested by the resident with a disability. Rather, the resident may request specific accessible kitchen elements.

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**MIAMI-DADE HOUSING AGENCY
REASONABLE ACCOMMODATION REQUEST**

Apartment Bathrooms⁹ -

- Provide wider door
- Provide lever type hardware on lavatory faucet
- Lower wash basin
- Lower mirror
- Provide accessible toilet
- Relocate toilet paper dispenser
- Provide grab bars at toilet
- Provide grab bars at bathtub and/or shower
- Provide seat in bathtub or shower
- Provide hand-held shower device
- Relocate bathtub and/or shower controls
- Provide roll-in shower or shower/bathtub seat

Examples of Non-structural Reasonable Accommodations

- Offering documents in accessible formats (e.g., large type, computer disk or Braille) and in plain language.
- Permitting rent payments and required communications to be mailed rather than delivered in person.
- Providing another housing offer if an applicant, resident or program participant can demonstrate good cause that the rejection of the initial housing offer, for example, was because of the disability of an applicant, resident or program participant's household member.
- Providing auxiliary aids, such as pencil and paper for those with speech difficulties, Telecommunication Device for the Deaf (TDD), Assisted Listening Device (ALD), a qualified sign language interpreter, or a reader, when necessary for effective communication between MDHA and an applicant, resident or program participant.
- Sending mail or making phone calls to a person designated as a contact person by the person with disabilities.
- Allowing the use of assistive animals.
- Allowing a live-in aide to reside in an appropriately-sized dwelling unit.
- Permitting an outside agency or family member to assist an applicant, resident or program participant in meeting screening criteria or meeting essential lease obligations.

⁹ Accessible or adaptable bathrooms shall be on an accessible route and shall comply with UFAS § 4.34.5. However, the PHA will not be required to make all elements of the bathroom accessible, unless requested by the resident with a disability. Rather, the resident may request specific accessible bathroom elements.

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**MIAMI-DADE HOUSING AGENCY
REASONABLE ACCOMMODATION VERIFICATION**

Head of Household: _____ Client No: _____
(PRINT NAME)

Re: Reasonable Accommodation Request

For: _____ Telephone: (____) _____
(PRINT NAME OF HOUSEHOLD MEMBER FOR WHOM THE REQUEST IS BEING MADE)

Name of Verification Source: _____
(PRINT NAME)

Address of Verification Source: _____

PLEASE RETURN TO: _____
(Name of MDHA Employee)

(Address of MDHA Employee)

THE FOLLOWING SECTION IS TO BE FILLED OUT BY THE DESIGNATED VERIFICATION SOURCE:

1. The individual seeking an accommodation is a person with a disability according to the following definition:

A physical or mental impairment that substantially limits one or more major life activities; a record of having such an impairment, or being regarded as having such an impairment.

YES NO

2. The person for whom the reasonable accommodation is requested requires some change(s) or special feature(s) in a Miami-Dade Housing Agency (MDHA) dwelling, building or property

YES NO

3. The person for whom the reasonable accommodation is requested requires assistance with, or change in, a MDHA practice, rule, policy, procedure, program or service.

YES NO

Describe the problem (if applicable) that the person for whom the reasonable accommodation is requested is having with a MDHA dwelling, building, property, practice, rule, policy, procedure, program or service:

If applicable, please indicate what features or conditions in the present dwelling worsen the requestor's present condition:

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**MIAMI-DADE HOUSING AGENCY
REASONABLE ACCOMMODATION VERIFICATION**

If applicable, please indicate what features or conditions must be present in any dwelling in which the requestor might live:

Describe the type of change(s), feature(s) or assistance required:

Please describe the relationship between the functional limitation(s) of the person for whom the accommodation is requested and the requested accommodation. Do not provide unnecessary details about the medical history or disabled status of the person seeking an accommodation.

Please indicate, if known and applicable, where any requested, specialized equipment may be obtained.

YES NO

Name of Verification Source: _____
(PRINT NAME)

Signature: _____ Date: ____/____/____

Title of Verification Source: _____

Address: _____

Phone: _____ Fax: _____

If you have any questions about filling out this form, please call: (____) _____

This material is available in an accessible format upon request. Please call Danny Howe, ADA Coordinator at (305) 644-5187 (phone) or (305) 644-5343187 (TDD).

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**MIAMI-DADE HOUSING AGENCY
LIVE-IN AIDE AGREEMENT**

Client Number: _____

I, _____, residing at _____
(Print Head of Household's (HOH) Name) *(Print Address)*

request Miami-Dade Housing Agency's (MDHA) approval for live-in-aide services provided by

_____, Social Security Number _____,
(Print Live-in Aide's Name)

Date of birth: ___/___/___

The household member requiring Live-In Aide assistance is _____.
(Print Household Member's Name)

The live-in-aide is a person who resides with one or more elderly persons (at least 62 years of age), or near elderly persons (at least 50 years of age but below the age of 62) or persons with disabilities (see definition in Live-In Aide Verification form), and who is: (a) 18 years of age or older, (b) is determined to be essential to the care and well-being of the person; (c) is not obligated for the support of the person; and (d) would not be living in the unit except to provide the necessary supportive services.

As a condition to obtaining MDHA's approval, the live-in-aide and the Head of Household hereby acknowledge and agree to the following:

1. Move in of a live-in-aide must not result in overcrowding of the existing unit according to the maximum number of persons per unit standard; although a reasonable accommodation for a resident with a disability may be to move the family to a larger unit. If change in unit size is necessitated by this request, please indicate change in number of bedrooms: from ___ bedrooms, to ___ bedrooms;
2. Live-in aides must meet MDHA's screening requirements. The live-in-aide agrees to provide any information that MDHA deems necessary to conduct a criminal background screening. Permission to reside in the unit as a live-in-aide may be denied based on the results of this screening;
3. Before a live-in-aide may be moved into a unit, a third party verification must be supplied that establishes the need for such care and the fact that the live-in-aide is qualified to provide such care (Live-in Aide Verification form);
4. A live-in-aide is a single person. This agreement does not confer the right for any additional person, other than an approved live-in-aide, to reside in the household. As a reasonable accommodation for a resident with a disability, MDHA may review this provision on case-by-case basis, should this provision conflict with a resident's bona fide right to a live-in-aide;
5. If the household member requiring assistance no longer resides in the unit, the live-in-aide shall not remain on the premises. If the verification source determines that the live-in-aide is no longer essential to the care and well-being of the household member, this agreement will be terminated, and the live-in-aide shall vacate the unit within 14 days after MDHA has given reasonable notice to the household member requiring assistance that the verification source has made such determination;
6. If the household member requiring assistance passes away, the live-in aide shall vacate the unit within 14 days of said household member's death. If the household member requiring assistance moves out, the live-in-aide shall vacate the unit no later than said

**MIAMI-DADE HOUSING AGENCY
LIVE-IN AIDE AGREEMENT**

household member's departure date. Upon the termination of the live-in-aide's services for any other reason, the live-in-aide shall vacate the unit within 24 hours;

7. The Live-In Aide must be listed as a household member (not part of the family composition, regardless of the relationship) on the resident's lease and shall not violate any provisions of the lease, the Community Policies, or applicable laws. Should such violation occur, MDHA may require the resident to terminate the services of the live-in-aide or face possible termination of the lease;
8. MDHA will consider allowing relative live-in-aides under unusual circumstances and upon approval of the Director or his/her designee. Relatives who satisfy the definitions and stipulations above may qualify as live-in-aides, but by signing this agreement, they acknowledge their understanding that they are relinquishing all rights to the unit as the remaining member of a resident family, or under any other circumstance. If a relative wants to have remaining family status, his or her income will be considered as part of the family's annual income. In such a case, the relative will be considered an addition to the family composition who is allowed to be added as a reasonable accommodation, (not a live-in aide) as the income of a live-in aide must be excluded.

Head of Household's signature: _____ Date: ___/___/___.

Live-in Aide's signature: _____ Date: ___/___/___.

Name, address and telephone number of company or organization providing the live-in-aide service (if applicable): _____

Name, address, telephone and fax number of verification source who will complete the Live-in Aide Verification form: _____

This material is available in an accessible format upon request. Please call Danny Howe, ADA Coordinator at (305) 644-5187 (phone) or (305) 644-5343187 (TDD).

**MIAMI-DADE HOUSING AGENCY
LIVE-IN AIDE VERIFICATION**

DATE: ____/____/____.

TO: _____
Print Name of Verification Source *Address of Verification Source*

Phone: (____) _____ Fax: (____) _____
Phone and Fax of Verification Source

FROM: _____
Print MDHA Employee's Name *MDHA Employee's Office Address*

Phone: (____) _____ Fax: (____) _____
Phone and Fax of MDHA Employee

SUBJECT: LIVE-IN AIDE SERVICES

NAME: _____
(Head of household (HOH))

SS #: _____ Client #: _____

ADDRESS: _____

NAME: _____
(Print name of household member for whom the Live-in Aide is requested)

REQUESTED LIVE-IN AIDE INFORMATION:

NAME: _____ PHONE NUMBER: _____

ADDRESS: _____

The HOH named above has applied for, or is a participant in, a housing program provided by Miami-Dade Housing Agency (MDHA). The HOH has requested a Live-in Aide. The HOH must obtain verification that the household member for whom the request was made (Household Member) qualifies for, and requires, a Live-in Aide, and that the Live-in Aide is qualified to provide the appropriate services to the Household Member. We would appreciate your cooperation in answering the questions on this form and returning it to the MDHA employee listed above in the self-addressed and stamped envelope provided. A consent for the release of the requested information will be required.

DEFINITION OF PERSON WITH DISABILITIES

Under federal law, an individual is disabled if he/she has a physical, mental or developmental impairment that substantially limits one or more major life activities; has a record of such impairment; or is regarded as having such impairment. This definition includes individuals who are impaired by drug addiction (other than addiction caused by current, illegal use of a controlled substance) and alcoholics, but not people who pose a direct threat to the health, safety and right to peaceful enjoyment of the premises by other residents.

**MIAMI-DADE HOUSING AGENCY
LIVE-IN AIDE VERIFICATION
INFORMATION REQUESTED**

1. Is the Household Member disabled as defined above? YES NO
2. Is a live-in aide essential to the care and well-being of the Household Member?
 YES NO If yes, for how long? _____
3. If the response to question # 2 is "Yes", then please explain how a live-in aide would be essential.

4. Please describe the specific activities of daily living with which the live-in aide would provide assistance and how the aide would provide the assistance.

5. Does the Household Member require a live-in aide on a temporary basis?
 YES NO

6. If the response to question # 4 is "Yes", please provide an estimate of the duration of time (in months and/or years) during which the live-in aide must provide services that are essential to the care and well-being of the Household Member.

7. Is the requested live-in aide service provider qualified to provide services that are essential to the care and well-being of the Household Member? YES NO

STATEMENT OF VERIFICATION SOURCE

The person signing below certifies that the information provided in the section above ("Information Requested") is true and accurate. The person signing below must enclose a written statement on his/her professional stationary indicating his/her title and area of specialization.

I, _____ do hereby certify that the information provided
(Print Name)
above is correct and accurate to the best of my professional knowledge.

(Signature) Date ____/____/____

(Title)

Name of organization or company: _____

This form is available in an accessible format upon request. Please call Daniel Howe, ADA Coordinator at (305) 644-5187 (phone) or (305) 644-5343 (TDD/TTY).

**MIAMI-DADE HOUSING AGENCY
AUXILIARY AIDS REQUEST**

Date ___/___/___

Head of Household _____
(PRINT NAME)

Address: _____ Client #: _____

Phone: (____) _____

Requestor: _____
(PERSON REQUESTING AUXILIARY AID IF OTHER THAN HEAD OF HOUSEHOLD, PRINT NAME)

Miami-Dade Housing Agency (MDHA) takes appropriate steps to ensure effective communication with applicants, beneficiaries, and members of the public.

Auxiliary aids include, but are not limited, to providing the following items or services when necessary for effective communication between MDHA and persons including, but not limited to, MDHA applicants, residents or program participants:

1. A qualified sign language interpreter,
2. Telecommunication Device for the Deaf (TDD),
3. Assisted Listening Device (ALD),
4. A reader,
5. Printed materials in Braille,
6. Printed materials in large print,
7. Audiotape versions of print materials.

MDHA furnishes appropriate auxiliary aids where necessary to afford an individual with disabilities an equal opportunity to participate in, and enjoy the benefits of, its programs or activities. In determining what auxiliary aids are necessary, MDHA shall give primary consideration to the requests of the individual with disabilities.

MDHA is not required to provide individually prescribed devices, readers for personal use or study, or other devices of a personal nature (including, but not limited to, personal hearing aids, walkers, canes, or wheelchairs).

THE FOLLOWING IS TO BE COMPLETED BY THE MDHA STAFF PERSON

1. Type of auxiliary aid requested: _____

2. If a sign language interpreter is requested, obtain the following information:

a. Address where the interpreter needs to be:

b. Date and time the interpreter is needed: _____

c. How long (in hours) the interpreter is needed: _____

d. What kind of interpreter is needed (e.g. American Sign Language (ASL), Signed English or oral interpretation):

**MIAMI-DADE HOUSING AGENCY
AUXILIARY AIDS REQUEST**

3. If an assistive listening device is requested, ask what type is required:

4. If materials in large print format are requested, ask what font size (if known) and font style (if known) the person requests:

5. If printed materials in audio tape format are requested, ask what language the person requests:

6. Following is additional information that is necessary for providing the requested for auxiliary aid:

The MDHA staff person obtaining information regarding auxiliary aids may direct questions to the ADA Coordinator listed below.

Individuals may obtain a copy of the MDHA Reasonable Accommodation Policies and Procedures, upon request, from Applicant and Leasing Center Eligibility Interviewers, Public Housing Site Managers, Section 8 Leasing and Contract Specialists, and MDHA's ADA Coordinator. You may also get additional copies of this request form from the ADA Coordinator:

Danny Howe, ADA Coordinator
1401 N.W. 7th Street, Building F
Miami, Florida 33125
(305) 644-5187 phone
(305) 644-5113 fax
Florida Relay Service: (800) 955-8771 (TDD/TTY)

Name of MDHA employee taking the request: _____
(PRINT NAME)

Phone: (____) _____

This material is available in an accessible format upon request. Please call Danny Howe, ADA Coordinator at (305) 644-5187 (phone) or (305) 644-5343187 (TDD).

**MIAMI-DADE HOUSING AGENCY
AUTHORIZATION FOR RELEASE OF INFORMATION**

Head of Household: _____

RE: Household member with disability: _____

I hereby authorize the release of information to Miami-Dade Housing Agency regarding the request for reasonable accommodation described on this form. This release shall constitute a limited authorization for the release of information, as described below.

I hereby authorize _____ to consult with representatives of the Miami-Dade Housing Agency, in writing, in person, or by telephone concerning the physical or mental impairment(s) that I assert to qualify as a individual with a disability for the sole purpose of this reasonable accommodation request.

For purposes of this Release, a "Qualified Individual With a Disability" is defined as a person who has a physical or mental impairment that:

1. Substantially limits one or more major life activities
2. Has a record of such an impairment
3. Is regarded as having an impairment

"A Physical or Mental Impairment" is defined as:

1. Any physiological disorder or condition, cosmetic disfigurement, or anatomical loss affecting one or more of the body systems including, but not limited to: neurological, musculoskeletal, special sense organs, respiratory, and speech organs; **or**
2. Any mental or psychological disorder, such as mental retardation, organic brain syndrome, emotional or mental illness and specific learning disabilities.

The term "Physical or Mental Impairment" includes, but is not limited to, such diseases and conditions as visual, speech and hearing impairments, epilepsy, multiple sclerosis, cancer, etc.

"Major Life Activities" include functions such as caring for one's self, performing manual tasks, walking, seeing, hearing, speaking, breathing, learning, and working.

"Has a Record of Such an Impairment (mental or physical)" means has a history of, or has been misclassified as having, a mental or physical impairment that substantially limits one or more major life activities.

"Is Regarded As Having an Impairment" means:

1. Has a physical or mental impairment that does not substantially limit one or more major life activities, **but** is treated by a recipient as constituting such a limitation.
2. Has a physical or mental impairment that substantially limits one or more major life activities **only as a result of** the attitudes of others toward the impairment.
3. Has none of the impairments defined by Section 504's definition of "physical or mental impairment", **but** is treated by a recipient as having such an impairment.

**MIAMI-DADE HOUSING AGENCY
AUTHORIZATION FOR RELEASE OF INFORMATION**

In addition, I authorize _____ to provide only documentation that is necessary to verify that I meet the definition of a "Qualified Individual with a Disability", as defined above.

This Authorization solely authorizes the release of information necessary to verify the following:

1. Documentation necessary to verify that the person meets the definitions noted above;
2. A description of the needed accommodation; and,
3. A description of the identifiable relationship between my disability and the requested accommodation(s).

This Authorization for Release of Information should only seek information that is necessary to determine if the requested reasonable accommodation is needed because of a disability.

This Authorization does **not** authorize the Miami-Dade Housing Agency to examine my medical records, including diagnosis or test result(s); nor does this authorize the release of detailed information about the nature or severity of my disability.

The information/documentation released as a result of this Authorization shall be kept confidential and not shared with anyone unless required to make or assess a decision to grant or deny a reasonable accommodation request.

Name of Family Member/Parent/Legal Guardian [Print]

Signature

____/____/____
Date

Relationship to Head of Household

PLEASE PROVIDE THE FOLLOWING INFORMATION:

1. Name of Health Care Provider/Documenting Authority:

2. Address of Health Care Provider/Documenting Authority:

3. Telephone Number of Health Care Provider/Documenting Authority:

4. Facsimile Number of Health Care Provider/Documenting Authority:

This material is available in an accessible format upon request. Please call Danny Howe, ADA Coordinator at (305) 644-5187 (phone) or (305) 644-5343187 (TDD).

**MIAMI-DADE HOUSING AGENCY
LETTER TO AN APPLICANT, RESIDENT OR PROGRAM PARTICIPANT
FOR A MEETING ABOUT REASONABLE ACCOMMODATION**

Date: ___/___/___

Head of Household: _____
(PRINT NAME)

Client No: _____

Re: Reasonable Accommodation Request

For: _____
(PRINT NAME OF THE PERSON FOR WHOM THE REQUEST IS BEING MADE)

Miami-Dade Housing Agency (MDHA) has received your request for a reasonable accommodation. It would help us make our decision if we could meet with you. You may bring someone to the meeting to help you.

We would like to meet on ___/___/___.

If you cannot come at that time, please call us at ___ a.m./p.m. ___/___/___ on to arrange another time.

At this meeting, we will talk about the following matter related to the reasonable accommodation request:

Please come ready to talk about the above matter. Please bring copies of any information you think might help us understand what you need.

We look forward to meeting with you. Thank you.

MDHA Employee (Print Name)

Title (Print)

MDHA Employee's Signature

(_____) _____
Phone number

MDHA Return Address

If you require a sign language interpreter, materials in an accessible format, a meeting place that is wheelchair accessible or other special features, please call the MDHA at least five days in advance.

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**MIAMI-DADE HOUSING AGENCY
REQUEST FOR MORE INFORMATION OR
VERIFICATION REGARDING A REASONABLE ACCOMMODATION**

Date: ___/___/___

To (Head of Household/Verification Source): _____

Client No: _____

Re: Reasonable Accommodation Request

For: _____
(PRINT NAME)

We have received a request for a reasonable accommodation. We need to know more about the following matter related to the reasonable accommodation request before we can make a final determination:

We need to know more because:

Here are some ways you could give us more information:

If these ways are a problem for you, there may be some other ways to provide the information we need. We will be happy to talk to you about other ideas you may have.

If you think that you have already given us this information or if you think we should not ask for this kind of information, please call us at _____. Also, please call if you have any other questions.

Thank you.

MDHA Employee (Print Name)

Title (Print)

MDHA Employee's Signature

MDHA Return Address

This material is available in an accessible format upon request. Please call Danny Howe, ADA Coordinator at (305) 644-5187 (phone) or (305) 644-5343187 (TDD).

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**MIAMI-DADE HOUSING AGENCY
LETTER TO VERIFICATION SOURCE FOR
A REASONABLE ACCOMMODATION REQUEST**

Date: ___/___/___

Head of Household: _____ Client No: _____
(PRINT NAME)

Re: Reasonable Accommodation Request

For: _____
(PRINT NAME OF THE PERSON FOR WHOM THE REQUEST IS BEING MADE)

Name of Verification Source: _____
(PRINT NAME)

Address of Verification Source: _____

To Whom It May Concern:

Enclosed with this correspondence is an Authorization for Release of Information signed by the above-listed disabled head of household, disabled member of household or an authorized representative of the disabled head of household or disabled member of household and either a Reasonable Accommodation Request or Live-in Aide Agreement form. The head of household or other party as indicated above asked that you verify that he or she, for whom the reasonable accommodation is requested, is disabled. The head of household or other party as indicated above also indicated that the he or she requires a reasonable accommodation related to his or her housing, a Miami-Dade Housing Agency (MDHA) building or property, or a MDHA program or service.

State, federal and local laws require housing providers to make reasonable accommodations or changes to either the dwelling, common areas, or to rules, policies and procedures (not essential terms of the lease) if such changes are necessary to enable a person with a disability to have equal access to, and enjoyment of, the dwelling and other facilities or programs at the site. Please note that such changes must be necessary as a result of the person's disability.

The head of household, or other party as indicated above, has requested the accommodation described on either the enclosed Reasonable Accommodation Request or Live-in Aide Agreement form. Please indicate on either the enclosed Reasonable Accommodation Verification form or Live-in Aide Verification form (as applicable) whether you believe the individual requesting the accommodation has a disability within the definition provided, and whether the accommodation is necessary and will achieve its stated purpose. You may also add any other information that would be helpful in making the right accommodation for this person. If part of the reasonable accommodation plan includes services to be provided by your organization, please indicate whether your organization will provide those services.

This form should not be used to divulge the person's diagnosis or any other information that is not directly relevant to the request for an accommodation.

You can call the employee indicated below at (305) _____ if you have any questions.

MDHA Employee Name and Title (Print)

Employee Signature

Please return the completed forms to the above MDHA address
This material is available in an accessible format upon request. Please call Danny Howe, ADA Coordinator at (305) 644-5187 (phone) or (305) 644-5343187 (TDD).

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**MIAMI-DADE HOUSING AGENCY
APPROVAL/DENIAL OF REASONABLE ACCOMMODATION**

Date: ___/___/___

Head of Household: _____ Client No: _____
(PRINT NAME)

Re: Reasonable Accommodation Request

For: _____
(PRINT NAME OF THE HOUSEHOLD MEMBER FOR WHOM THE REQUEST IS BEING MADE)

Miami-Dade Housing Agency (MDHA) has reviewed your request for a reasonable accommodation, the verification from your verification source and all other documents related to your request. Based on all the information you have provided, MDHA has made the following determination in response to your request:

Your request has been approved.

The projected date for providing your requested accommodation is ___/___/___
If no projected date was indicated above, MDHA will inform you of the date as soon as we have that information.

Your request has been denied, but MDHA will provide the following, alternate accommodation for the following reason(s):

Your request has been denied.

Your request has been denied for the following reason(s):

If you have questions about this decision, you may call (305) 644-5187 (phone), (305) 644-5343 (TDD/TTY) and ask to speak to Daniel Howe, ADA Coordinator.

If you disagree with the above decision, you may request a Reasonable Accommodation Grievance and Appeal Hearing by submitting a request which may be written, oral or by any other means of communication accessible to you. The address and phone number of the contact person for scheduling a Reasonable Accommodation Grievance and Appeal Hearing is:

Daniel Howe, ADA Coordinator
1401 N.W. 7th Street, Building F
Miami, Florida 33125
(305) 644-5187 (office)
(305) 644-5343 (TDD/TTY)

MDHA's Reasonable Accommodation Grievance and Appeal Hearing Committee shall convene the settlement conference within thirty (30) working days of the receipt date of the request. The Reasonable Accommodation Grievance and Appeal Hearing Committee is composed of the members of the Section 504/ADA Policy Committee appointed by the MDHA Director. The Section 504/ADA Policy Committee members are MDHA Division Directors and other applicable staff whose responsibilities include matters related to Section 504/ADA. Although the ADA

**MIAMI-DADE HOUSING AGENCY
APPROVAL/DENIAL OF REASONABLE ACCOMMODATION**

Coordinator is a standing member of this committee, during Reasonable Accommodation Grievance and Appeal Hearings, the ADA Coordinator's role is only to provide information regarding the contested decision. During these hearings, the ADA Coordinator cannot cast a vote regarding the contested decision.

You may bring documents, witnesses and/or representatives to the Reasonable Accommodation Grievance and Appeal Hearing in order to contest the manner in which a reasonable accommodation is proposed to be (or was) implemented, the denial of a reasonable accommodation request, or any other appropriate disability-related decision made by the ADA Coordinator.

The determination of the Reasonable Accommodation Grievance and Appeal Hearing Committee is final.

If you wish to contest an adverse action pursuant to the Reasonable Accommodation Grievances and Appeals section, but do not want to do so by requesting a Hearing, you may follow the *Miami-Dade Grievance Process, Americans with Disabilities Act of 1990* outlined in Attachment Three of Miami-Dade County Administrative Order Number 10-10. The Miami-Dade County grievance process serves "...as the County's mechanism to respond to complaints of discrimination on the basis of a disability in County programs and services under the Americans with Disabilities Act of 1990 (ADA)." For additional information on that process, you may contact the ADA Coordinator as indicated above.

You may also contact the local office of the United States Department of Housing and Urban Development concerning any complaints regarding your reasonable accommodation request:

United States Department of Housing and Urban Development
Office of Fair Housing and Equal Opportunity
909 S.E. 1st Avenue
Miami, FL 33131
(305) 536-4479
TDD/TTY: (305) 536-4743

This material is available in an accessible format upon request. Please call Danny Howe, ADA Coordinator at (305) 644-5187 (phone) or (305) 644-5343187 (TDD).

**MIAMI-DADE HOUSING AGENCY
RELEASE OF DISABILITY-RELATED SPECIAL NEEDS
IN CASE OF EMERGENCY EVACUATION**

Head of Household: _____ Phone: (____) _____
(PRINT NAME)

Address: _____ Client #: _____

1. The following is the name of the household member with a disability who will need assistance in the event of an emergency:

Name: _____

2. The person listed above requires the following assistance (due to disability) in case of an emergency (please be sure to include any assistance you may need because of special equipment you use due to your disability):

3. The person listed above has asked that assistance or medical care be provided in the event of an emergency.

4. The person indicated below authorizes MDHA to provide the information above to the appropriate police and/or fire department(s) that identifies the special needs that the disabled household member requires (due to disability) in case of an emergency. The person indicated below also indicates that they have authority to release this information.

Name: _____
(PRINT NAME)

Relationship to the person listed in item 1: _____

Signed: _____ Date: _____

This material is available in an accessible format upon request. Please call Danny Howe, ADA Coordinator at (305) 644-5187 (phone) or (305) 644-5343187 (TDD).

MIAMI-DADE HOUSING AGENCY REASONABLE ACCOMMODATION SCRIPT

This is to advise you, in simple terms, what a disability is, what a reasonable accommodation is, and the fact that people with disabilities have a right to ask for reasonable accommodations.

A disability is a physical or mental impairment that makes it difficult or impossible for you to do things like taking care of yourself, using your hands, walking, seeing, hearing, speaking, breathing or learning.

A reasonable accommodation is something Miami-Dade Housing Agency (MDHA) is required to give you or let you do to make it easier for you to get to and live in our housing, and participate in our programs.

Some things that must happen for you to get a reasonable accommodation, are for you to give MDHA enough information, if we need it, about whether you are a person with a disability and to give MDHA proof, if we need it, that you really need the reasonable accommodation you ask for.

Even if you don't have proof yet that you are a person with a disability, you have a right to ask for a reasonable accommodation.

Some things that might be a reasonable accommodation include:

- Being allowed to mail your rent to MDHA instead of going to the site or management office.
- Having someone from MDHA go to your house, instead of you having to go to an MDHA office, to get a service.
- Getting a ramp installed leading to your front or back door, having grab bars put in your bathroom, or having some other repair or change done to your home.
- Having a repair or change done to a laundry room, community center, management office or other building owned by MDHA so that you can go there and use the programs and services there.
- Having a sign language interpreter available upon request.
- Getting important MDHA papers in Braille or large print or on tape.

To get a reasonable accommodation, you must ask for it. If you can't write your request on the papers we have or need help filling them out, you can ask a MDHA employee for help.

MDHA will give you an answer as soon as possible.

MDHA will let you know if we need more information, or if there are other ways to meet your needs.

If MDHA turns down your request, MDHA will explain why, and you can provide more information if you think that will help. MDHA will also advise you of your appeal rights if your request is denied.

It is the policy of MDHA to protect all of your health information. This means that we cannot release your information without your written consent nor will we share this information with anyone who does not need to know your health information.

This material is available in an accessible format upon request. Please call Danny Howe, ADA Coordinator at (305) 644-5187 (phone) or (305) 644-5343187 (TDD).

**MIAMI-DADE HOUSING AGENCY
ACKNOWLEDGEMENT OF RECEIPT OF REASONABLE ACCOMMODATION DOCUMENTS**

By signing my name below and writing my initials in front of the names of the forms and documents I have received, I indicate that I have received the following documents:

Name (print): _____ Date: ____/____/____

Signature: _____

____ Notice of Non-Discrimination

____ Reasonable Accommodation Information

____ Notice of Right to a Reasonable Accommodation

____ Reasonable Accommodation Request and Examples of Reasonable Accommodation

This material is available in an accessible format upon request. Please call Danny Howe, ADA Coordinator at (305) 644-5187 (phone) or (305) 644-5343187 (TDD).

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**REASONABLE ACCOMMODATION INFORMATION
MIAMI-DADE HOUSING AGENCY**

Miami-Dade Housing Agency (MDHA) is committed to making sure that its applicants, residents and programs participants have information for making reasonable accommodation requests. MDHA has posted a copy of its Reasonable Accommodation Policy and Procedures in conspicuous locations at the applicant, resident and program participant waiting areas of the MDHA Applicant and Leasing Center, Mobility Pool Center, Section 8 Offices, Regional Offices of the MDHA; the offices of MDHA's private management companies; and, the management office in each public housing development. In addition, individuals may obtain a copy of this Reasonable Accommodation Policy and Procedures, upon request, from MDHA's ADA Coordinator.

A reasonable accommodation is a change, modification, alteration or adaptation in policy, procedure, practice, program, or facility that provides a qualified individual with a disability the opportunity to participate in, or benefit from, a program (housing or non-housing) or activity.

Some examples of reasonable accommodations include (but are not limited to): grab bars installed in bathrooms, ramps installed at entrance doors of dwellings, using an assistive animal (also called a service, therapeutic, or support animal) such as a seeing-eye dog, visual and audible alarms for individuals who are deaf or hard of hearing, widening doorways, lever-type door hardware, live-in aids, transfers to another dwelling (with proof that this is needed because of disability), and being given MDHA documents in an accessible format like Braille or large print.

Use the following forms to request a reasonable accommodation and make sure you complete the forms to the best of your ability. By completing these forms you will help us understand how we can best assist you. If you are unable to do so, then please ask MDHA for assistance to complete the forms. Please be advised that in order for MDHA to assist you, we also need you to complete the *Authorization for Release of Information* form:

1. *Reasonable Accommodation Request*. This is used to make any request other than a request for a live-in aide.
2. *Live-in Aide Agreement*. This is used if you need a live-in aide. A live-in aide is some who only lives in the unit to assist the resident or program participant who is elderly or is a person with a disability.

If you are a Public Housing or Section 8 Housing Choice Voucher program participant, and have not yet been determined eligible, you may request a *Reasonable Accommodation Request* form by writing to the Applicant and Leasing Center Chief or calling the Applicant and Leasing Center:

Attention: Chief, Applicant and Leasing Center (ALC)
Miami-Dade Housing Agency ALC
2925 N.W. 18th Ave.
Miami, FL 33142
(305) 638-6464
Florida Relay Service: (800) 955-8771 (TDD/TTY)

If you are a Public Housing resident, you may request a *Reasonable Accommodation Request*, *Live-in Aide Agreement*, or *Release of Disability-Related Special Needs in Case of Emergency Evacuation* form from your Site Manager.

**REASONABLE ACCOMMODATION INFORMATION
MIAMI-DADE HOUSING AGENCY**

If you are a Section 8 Housing Moderate Rehabilitation or Family Unification Program applicant, but you have not yet been determined eligible, or if you are a Section 8 Housing Choice Voucher, Section 8 Housing Moderate Rehabilitation, or Family Unification Program participant, you may request a *Reasonable Accommodation Request*, or *Live-in Aide Agreement* form from a Leasing and Contract Specialist by contacting the Section 8 team to which you have been assigned. You can find out which team that is by calling (305) 250-5250.

If you are a participant in any other MDHA program and want to request a reasonable accommodation, you may ask for a *Reasonable Accommodation Request* form from the MDHA employee who assists you.

Return all completed forms to the same person who gave them to you.

Individuals may obtain a copy of the MDHA Reasonable Accommodation Policies and Procedures, upon request, from Applicant and Leasing Center Eligibility Interviewers, Public Housing Site Managers, Section 8 Leasing and Contract Specialists, and the ADA Coordinator.

Danny Howe, ADA Coordinator
1401 N.W. 7th Street, Building F
Miami, Florida 33125
(305) 644-5187 phone
(305) 644-5343187 (TDD)
(305) 644-5113 fax
Florida Relay Service: (800) 955-8771 (TDD/TTY)

This material is available in an accessible format upon request. Please call Danny Howe, ADA Coordinator at (305) 644-5187 (phone) or (305) 644-5343187 (TDD).

Attachment Three

MIAMI-DADE GRIEVANCE PROCESS AMERICANS WITH DISABILITIES ACT OF 1990

Creation

This grievance procedure shall serve as the County's mechanism to respond to complaints of discrimination on the basis of a disability in County programs and services under the Americans with Disabilities Act of 1990 (ADA). This procedure shall not apply to complaints of discrimination in employment. Employment discrimination complaints are handled by the Affirmative Action Office.

Opportunity for Complaint

Any individual who feels that they have been discriminated against in the provision of a program or service operated by Miami-Dade County shall have the ability to file a formal grievance, have the grievance responded to, and have the right to request an appeal if they are dissatisfied with the resolution of their grievance. The procedures to be followed in filing a formal grievance shall be available and accessible to the general public.

Coordination of Procedure

The Miami-Dade County Office of ADA Coordination, 111 N.W. 1st Street, 12th Floor #348, shall be the agency responsible for coordinating the County's grievance procedure and will serve as the conduit between the grievant and the department against whom the complaint is made. The Office will provide the department with the necessary technical assistance needed in reaching resolution of the complaint. The Office will make all attempts to assist the department in reaching an amicable resolution to the complaint; however, the office of ADA Coordination shall have no authority to direct the department in the manner in which the department ultimately decides to respond to the complaint.

Employment discrimination complaints should be sent to the Office of Fair Employment Practices, 111 N.W. 1st Street, Suite 2720.

Filing a Complaint

Any individual who feels they have been discriminated against in any program or service provided by Miami-Dade County, under provisions of the ADA, shall submit a complaint, in writing to the Office of ADA Coordination. This written complaint shall contain the following information:

1. Name, address and telephone number (if available) of the grievant.
2. The date of the occurrence.
3. The name and location of the County program and service involved in the alleged occurrence.
4. The name (if known) of the County employee with whom the grievant came in contact, if appropriate.

5. Why the individual thinks that he has been discriminated against on the basis of a disability.

Complaint Resolution

Within five (5) days of receipt of the complaint, the Office of ADA Coordination shall:

1. Inform the department of the complaint; transmit a copy of the complaint to the department with general instructions as to the format which the department should follow in their response, and a date by which the department shall return a response to the Office. The Office of ADA Coordination will review the decisions with the department before final preparation of the response.
2. The department shall have thirty (30) days from receipt of complaint from the Office of ADA Coordination to respond to the complainant. Attempts will be made by the department to clarify the facts of the grievance. The actions taken by the department shall be conveyed to the grievant in writing. This letter, addressed to the grievant and signed by the Department, shall be transmitted to the Office of ADA Coordination within the specified time period. The response shall be mailed to the grievant by the Office of ADA Coordination with a cover letter informing the grievant of their ability to appeal the decision enclosed and the procedure which the grievant must follow in requesting an appeal. In no instance shall the Department mail their response directly to the grievant.
3. In the event that a complainant submits a written complaint to the operating department, the department shall send a copy of the complaint to the Office of ADA Coordination within five (5) days. That action will constitute a filing by the complainant with the Office of ADA Coordination as required in Section IV of this document. The Department will have thirty (30) days from receipt of written complaint to respond to complainant.
4. Where a department can solve a written complaint informally, the department will provide the Office of ADA Coordination a written statement explaining the mutually agreeable solution. It should be signed by the complainant and the department representative.

All reasonable attempts should be made by the department with the assistance of the Office of ADA Coordination to mediate and resolve the grievance.

Filing an Appeal

Any individual who is dissatisfied with the recommended resolution of their complaint may request an appeal. In requesting an appeal the individual shall, within fifteen (15) days from the date of the written recommended resolution offered by the County, submit in writing to the Office of ADA Coordination their request to appeal the decision and express their willingness to appear before an impartial panel to present their grievance.

Appeal Process

Upon receipt of a written request for an appeal, the Office of ADA Coordination shall:

1. Notify the County Manager and request that within thirty (30) days he appoint a panel of three (3) senior members of unaffected County departments to hear the complaint. The Manager shall designate one of the three panel members to serve as chairperson.
2. Set a time and place for the hearing that is convenient to the grievant, the affected department and the panel members, within twenty (20) days after the panel is appointed, if possible.
3. Instruct the department, against whom the complaint has been made, to prepare a package with all necessary information pertinent to the complaint for each panel member to review prior to hearing.
4. Monitor and tape the hearing.

At the time of the hearing both the grievant and the affected department shall have the opportunity to present their positions to the panel. The panel members will also have the opportunity to pose questions to both parties. After the affected parties have presented the facts, and after all questions posed by the panel have been answered the hearing shall be closed and the panel shall meet privately to deliberate.

Within fourteen (14) days from the date of the hearing the panel shall issue its decision. The Chairperson shall prepare the decision of the panel. The Chairperson shall send the written decision to each panel member for review and signature prior to its submission to the affected parties. The decision of the panel is final and no further appeal shall be available within the administrative branch of County government.

Recordkeeping

The Office of ADA Coordination shall maintain files on complaints received along with all communications, recommendations, and other records pertinent to the complaints for a period of at least three (3) years.

Alternative Remedies

The establishment of this grievance procedure shall not preclude nor waive the grievant's right to seek redress under any alternative remedy available.