OHFA HOME Rental Activity Annual Report

Developn	ct Inforr nent Name: ontract Num							
C A E	vardee Nan ontact: ddress: mail: hone:	ne:						
Management Company: Mgt. Co. Contact: Address: Email: Phone:		Same as Awardee; or						
Report Prepared by:			Same as Awardee contact above; or by					
Reporting	g Period:	January 1, 20	_through Dece	mbe	r 31, 20			
Develo	pment	Information:						
D	Development includes scattered sites							
Primary Location: (City and County) Total of ALL Units (non-HOME too):) High-HOME Units:		Low-HOME Units:			
		perties with differing more information.	g completion dates ar	re inc	cluded, ple	ease see	attached Revenue	Projection &
Please list	t any outsta	ınding loans on the p	property:					
Lender		Loan Balance	Req. Payment (Monthly)	Is	Loan Curr	ent	Maturity Date	
					Yes or	No		
					Yes or	No		
				ļ	Yes or	No		
			<u> </u>	<u> </u>	Yes or _	No	11. 5	
	•		equires monthly or ar	nnua	l payment	s as stat	ed in Part III (Specia	al Conditions) of
		Agreement? YES e loan payments cur	or NO rent? YES or N	NΟ				
		olease explain	icht: iL3 Of i	•0				
			al explanation of outs	stand	ling loans	or other	information to be	aware of:

Performance Information:

What was the rent collection rate for the development (put another way, of total tenant rent due, what percentage was actually collected)? a. If this was below 95%, what contributed to the low rent collections?
b. What is being done to improve rent collections this year?
What was the physical vacancy rate in the last year? a. If physical vacancy was above 10%, please explain what factors contributed to this.
b. What is being done to improve occupancy this year?
How many new households moved in last year?
How many households moved out last year? a. How many of these were evicted?
b. Please explain reasons for evictions or special circumstances contributing to evictions:
Does the development currently have a waiting list? Yes or No a. If yes, how many eligible households are on the list?
b. If no, what plans do you have to advertise vacancies so you can fill them quickly as they occur?
laintenance & Physical Condition:
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6.	What was the average time between one tenant moving out and the unit being deemed ready for occupancy (i.e. the unit was inspected, cleaned, maintenance/repair items completed as needed, and unit determined ready to rent)? This does not mean from one tenant to the next, this means when was the unit READY for a new tenant.						
	a. If unit turns required more than 15 days on average, what contributes to slow turns and what is your plan to improve the turnover process?						
7.	Vas the development cited for any local code violations in the past year? Yes or No a. If yes, have these violations been corrected? Yes or No b. Please explain:						
Te	ant Selection Plan:						
Gi	a. Limits housing to very-low and low-income households?						
	When was your agency's last audit completed (please provide most recent financial independent audit specific to he site)? This is not an OHFA compliance monitoring visit. If the audit is for a period ending						
	refore June 30, 2018, a statement that the most recent audit is included or on file at OHFA Report on status of current audit						
	Expected completion date for the new audit						
	a. Was it an unqualified audit, or were there any management concerns expressed?						
	b. Please explain how any audit findings or management concerns are being addressed:						
2.	as there been staff turnover with those assigned to this development? Yes or No a. If so, please explain how new staff are being trained to manage the project in compliance with HOME and other regulatory requirements:						
3.	o you have any positive outcomes or benefits to report? Yes or No a. Please describe:						

4.	Do you have any concerns about the development to report? Yes or No a. Please describe:				
5.	Do you have any training or technical assistance needs?				
	Please use the space below to share any other comments, questions, or concerns you may have about your project were not otherwise reported above:				
	rtifications: Note, this section to be completed by the <u>HOME Awardee</u> . Each certification must be initialed vidually.				
I, th	e undersigned, understand, agree, and certify that the agency is meeting the following federal regulatory standards:				
the	The property is being maintained at a physical level and units are suitable for occupancy and are in compliance all applicable local and state codes pertaining to residential occupancy and property maintenance; and further that condition of the property at minimum is sufficient to comply with HUD's Housing Quality Standards and/or Uniform sical Condition Standards as set forth at 24 CFR 982.401.				
sen	The project meets applicable Section 504 accessibility requirements. These units t #'s) are physically accessible units and these units (unit #'s) are designed for those with sory impairments. (Note, not all developments will be required to have accessible units, please refer to your original atten agreement for details.)				
Sec	Further, the project is being operated in a manner consistent with program accessibility expectations under tion 504, and potential tenants are informed of their right to reasonable accommodations.				
agre	The owner is using the correct (Part 5) definition of income and correct income limits per the written eement.				
	The owner is using the correct rent limits per the written agreement.				
tho	The owner does not discriminate against tenants with rental assistance subsides, including but not limited to se using Housing Choice Vouchers.				
my	The information contained in this report, including all attachments submitted, is true and accurate to the best of knowledge, and if discovered later, any material errors or inaccuracies will be corrected immediately.				
Sigr	pature: Date:/				
Printed Name & Title:					

Attachments: Provide copies of the following as an attachment to this report.

If any required item is missing, future capacity could be impacted when requesting funds.

- Annual Financial Report current year operation, past year operation and future year operation
 (These would include: A. Income, B. Expenses, C. Debt Service, D. Occupancy, E. Reserve Balances,
 F. Previous year financials for comparison, G. Financial Projections, including income, expenses, debt service, occupancy and pro form)
- 2. **Most Recent Financial Audit** Audit should be specific to the site (see G#1 on page 3 of this report)
- 3. **HOME Unit Rental Status Sheet** Historical information for reporting year of HOME units only (indicate current HOME units)
- 4. Insurance Documentation Paid document showing policy #, current coverage, effective date and property address
- 5. **Property tax status** copies of <u>paid</u> receipts or auditors statement reflecting property taxes are current or exempt for all addresses
- 6. **Lease Agreement** *submit once every five years*
- 7. **Tenant Selection Plan/Criteria** *submit once every five years*
- 8. **Affirmative Fair Housing Marketing Plan** using form HUD 935-2A or HUD 935-2B (include demographic charts)

 This applies only if contract contains 5 or more units. *Submit as market changes but no less than once every five years*