HOUSING QUALITY STANDARDS (HQS) REPAIR SELF-CERTIFICATION

This form is used to certify that HQS deficiencies listed on the Inspection Summary have been corrected. Both the owner/property manager and the participant/tenant must use this form to certify in writing that the repairs have been completed prior to the deadline indicated in the repair letter.

Inspection Date: _______________ Inspector Name: _______________

Name of Owner: _______________ Name of Participant: _______________

Unit Address: __________________

The above referenced unit failed its HQS inspection and is not in compliance with HUD requirements. After the repairs have been completed in a satisfactory manner, the landlord and tenant must sign this form to certify the satisfactory completion of repairs. This form must be received prior to the deadline date listed above and indicated on the enclosed repair letter to avoid further action. The form may be mailed to 26 Bridge St., Corning, NY 14830, hand delivered to 26 Bridge St., Corning, NY 14830, faxed to 607-973-2202 or scanned to HCVprogram@ArborDevelopment.org.

If the repairs have not been completed by the deadline and a signed HQS Repair Self-Certification form is not returned, then the unit will be considered failed and the Housing Assistance Payments (HAP) will be abated on the day after the deadline date.

Please check the option below which applies to your inspection:

☐ The deficiencies assigned as both owner and tenant responsibility have been completed
☐ The deficiencies assigned as owner responsibility have been completed
☐ The deficiencies assigned as tenant responsibility have been completed

The signatures below certify that the required repair(s) have been completed and the unit is now in compliance with HQS. It is further understood that if at any time after the execution of this certification it is determined that the repairs that were the responsibility of the owner were not completed in a satisfactory manner, all Housing Assistance Payments (HAP) made since the due date for repairs will be abated and payments already made to the landlord will be recouped. It is further understood that if at any time after the execution of this certification it is determined that the repairs that were the responsibility of the participant/tenant were not completed in a satisfactory manner, the family’s rental assistance may be terminated.

Owners must have a history of HQS compliance to qualify for use of this Repair Self-Certification. Arbor Housing and Development reserves the right to conduct a re-inspection.

Our signatures below certify that we have read, understood, and agree to the terms of this form, that repairs have been made for the inspection listed on the top of this form and that the unit listed above does comply with HQS requirements.

We understand that making false statements, committing fraud, misrepresentation or providing false information of any kind may be grounds for termination of participation for both the participant/tenant and owner/property manager. We further understand that making false statements, committing fraud, misrepresenting or providing false information is punishable under state and federal law.

Signature of Owner/Property Manager: ____________________________ Date: __________________________

Signature of Participant/Tenant: _________________________________ Date: __________________________