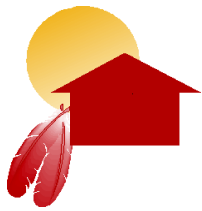


## 2022

### Table of Contents

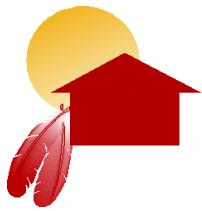
I.	Purpose .....	2
II.	Pre-Visit Preparation .....	2
III.	On-Site Review.....	3
IV.	Summary.....	10



Office of Native American Programs

IHP and APR Compliance  
Monitoring Plan  
RECIPIENT

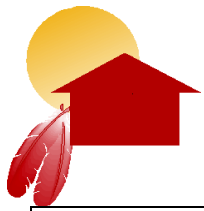
<b>RECIPIENT NAME:</b>	<b><u>Regulatory/ Statutory Citation</u></b>	<b><u>Other Tools</u></b>	<b><u>WP. Pg.</u></b>	<b><u>Remarks</u></b>
<b>I. Purpose</b>				-
<p>The purpose of the Indian Housing Plan (IHP) and Annual Performance Report (APR) compliance review is to determine whether the recipient:</p> <ul style="list-style-type: none"> <li>a. Has carried out its eligible activities in a timely manner</li> <li>b. Has carried out its eligible activities and certifications in accordance with the requirements and the primary objective of NAHASDA and other applicable laws</li> <li>c. Has the continuing capacity to carry out those activities in a timely manner</li> <li>d. Has complied with the IHP of the grant beneficiary; and</li> <li>e. Has submitted APRs that are accurate.</li> </ul> <p>NAHASDA Sec. 405 (b)(1)(B) requires HUD to verify the accuracy of information contained in the APR.</p>	<p>NAHASDA Sections 404 and 405 (b)(1)(B)</p> <p>24 CFR 1000.520</p>	<p>HUD-52737</p> <p>NAHASDA Guidance 2004-09</p> <p>PG 2014-11</p>		Read & Noted
<b>II. Pre-Visit Preparation</b>				-
A. Prior to going on-site, review the most recent IHP, approved IHP amendments, IHP amendments in process, and APR.				Reviewing 2022 IHP & 2021 APR
B. If available, review the following documents:	24 CFR 1000.526			Read & Noted
1. Recipient's policies and procedures				



Office of Native American Programs

IHP and APR Compliance  
Monitoring Plan  
RECIPIENT

<b>RECIPIENT NAME:</b>	<b><u>Regulatory/ Statutory Citation</u></b>	<b><u>Other Tools</u></b>	<b><u>WP. Pg.</u></b>	<b><u>Remarks</u></b>
2. Previous monitoring findings and corrective actions status for findings 3. Previous self-monitoring report(s) 4. Previous 2 CFR Part 200 and OIG audits, work papers and management plan status for findings 5. Previous and current enforcement actions 6. Valid complaints 7. Relevant correspondence				Read & Noted
C. Develop a list of planned activities from the IHP and enter the following data from the APR: 1. Permanent and temporary jobs supported with IHBG funds; 2. Outputs by eligible activity, including: a. Units completed or assisted, and b. Families assisted; and 3. Outcomes by eligible activity.	24 CFR 1000.512(d)			Read & Noted
D. Collect HUD and APR data on recipient's Formula Current Assisted Stock (FCAS).				N/A for 2022  <i>NOTE: The Formula Current Assisted Stock (FCAS) component reflects housing developed under the United States Housing Act (the predecessor of the IHBG program) which is owned and/or operated by the IHBG recipient and provides funds for ongoing operation of the housing.</i>

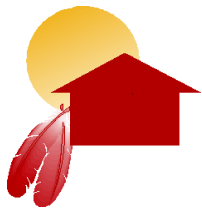


Office of Native American Programs

IHP and APR Compliance  
Monitoring Plan  
RECIPIENT

<b>III. On-Site Review</b>				-
A. Review the sampling methods in the General Instructions and select a sample of files to review.	24 CFR 1000.503 and .526			Read & Noted

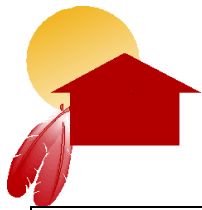




Office of Native American Programs

IHP and APR Compliance  
Monitoring Plan  
RECIPIENT

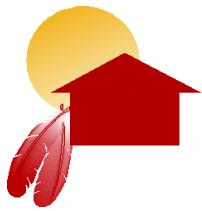
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B. While on site, determine the following for each of the samples selected:	24 CFR1000.524(c)			
1. Actual completion status				IHP – Confirmed submitted on 10/17/2022 APR – Confirmed submitted on 03/24/2022
2. Actual expenditures for each activity		<i>See pg 9 in Epic Report - Uses of Funding</i>		Program actual totals in APR and MIP Report for 2021 both show actuals
3. Units completed				N/A in 2020, 2021 & 2022 – no construction occurred
4. Households assisted				2021 – 164 units of rental assistance service were provided with financial support per APR, representing 54 TBRA families and 66 prevention Other Housing families served un-duplicated.
5. Acres purchased				N/A in 2020, 2021 & 2022



Office of Native American Programs

IHP and APR Compliance  
Monitoring Plan  
RECIPIENT

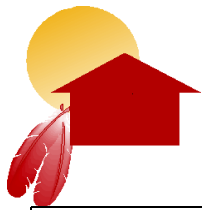
<p>C. New Activity: Is the recipient conducting an activity not found in a compliant IHP or amended IHP?</p> <p>NOTES: Compare the APR with the approved IHP to determine if an activity has been added.</p> <p>If there is a new activity, the IHP will have to be amended. If the amendment is deemed noncompliant, expenditures will be questioned and may be disallowed.</p>				No new activity; planned IHP and actual APR match.
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Office of Native American Programs

IHP and APR Compliance  
Monitoring Plan  
RECIPIENT

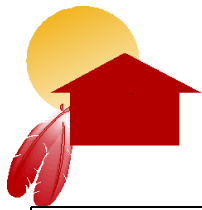
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<p>D. Self-Monitoring</p> <p>NOTE: This section is covered by the Self-Monitoring Plan. If no self-monitoring review will be conducted, then review this section in the IHP/APR review.</p>				Read & Noted
<p>1. Review the self-monitoring plan described in the APR and compare it to the recipient's files to determine accuracy of the:</p>	24 CFR 1000.502	See page 2 in Epic Report: -Housing Needs -Planned Program Benefits -Geographic Distribution		Read & Noted
a. system description				Accurate and up to date with Policies
b. results reported		See Attached		Results reported to Tribal Council, GM, Controller and approved in RS 2022-02-008
c. corrective actions reported				Based on the Self-Monitoring Report for 2021, we attached the HUD Inspection form which allows us to do additional inspection for Households that have children aged 6 and under living in the home and Confirmation of year built.
<p>2. Review notices, minutes, comments, etc to confirm the public accountability details as reported in the APR.</p>		See Attached		Typically, these are posted for review at HHS Lobby & Admin Lobby for 30 days. However, due to the stay-at-home orders in place from C19, the program has scanned this reference resource to the Housing Website for public access.



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IHP and APR Compliance  
Monitoring Plan  
RECIPIENT

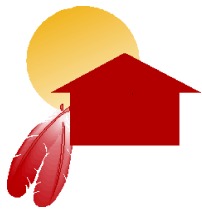
			<p>Included in the book:</p> <ul style="list-style-type: none"> <li>- Allocation Est. for program year</li> <li>- IHP, resolution, submission receipt, HUD receipt, HUD Approval</li> <li>- 24 CFR 1000 (Native American Housing Activities)</li> <li>- Samish Housing Policies</li> <li>- Fair market rent amount for year</li> <li>- Area median income rate for year</li> <li>- APR, resolution, submission receipt, HUD receipt, HUD Approval</li> <li>- ERR's for year and per project</li> <li>- Self-Monitoring result report</li> </ul> <p>The fair market rent, area median income and ERRs that had been previously missed in adding to resource in 2021, have been added. Fair market rent and area median income are present in the resource for 2022. ERRs are present in resource.</p>
E. Review for Timely Progress			-
1. Planned activities of the IHP and APR.			Construction of Affordable Housing; TBRA; Other Housing Services (Homelessness Prevention & Rapid Re-housing); Housing Management; Community Center; Planning & Administration
a. Compare the actual accomplishments of activities in the APR with those planned in the IHP.	24 CFR 1000.520(a)		Yes to TBRA, Other Housing Services, housing management, and Planning & Administration. Sufficient progress has been made toward the goal listed in Construction of Affordable Housing, primarily completing pre-construction activities allowing for construction permitting to be issued; However,



Office of Native American Programs

IHP and APR Compliance  
Monitoring Plan  
RECIPIENT

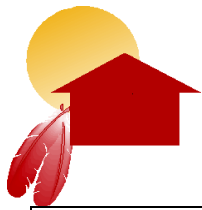
			<p>we decided in 2021 to use a different funding source for this project, so repayment of these activities is planned for 2022 to be recorded as IHBG Program Income per HUD Guidance 66/100 Households assisted</p> <p>Constructed of Community Center and Rental housing because in 202, Samish Indian Nation decided to use funding from the US Dept of Treasury under the ARPA for the construction of the rental housing. This was approved through resolution 2021-09-001.</p> <p>We used our Tribal Citizens funds for the majority of the households needing housing assistance in 2021. This funding was specific to the impacted from the pandemic.</p> <p>For TBRA and Prevention goals were exceeded.</p>
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Office of Native American Programs

IHP and APR Compliance  
Monitoring Plan  
RECIPIENT

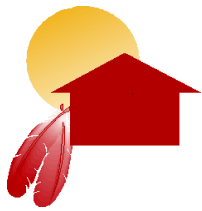
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b. Review the quantitative status of the planned activities.				Reviewed 2021 IHP and APR for this section: 54 out of 50 planned in 2021 for TBRA to date 66 out of 50 planned in 2021 for HP on Other Housing Services and Housing Management to date 66 out of 100 planned in 2021
c. Determine if the recipient is on schedule.	24 CFR 1000.512(b)(2)			As of October 2022: 45 of 40- TBRA (exceeding) 51 of 76- Other Housing (+18 in process, ON TRACK) 55 of 116 - Housing Management (will not meet) Construction of rental -WILL NOT MEET
(1) If an activity is behind schedule, is there a valid reason(s)?				For development of emergency shelter, the Housing Department was not able to fine a building in the right location for this planned activity. For Housing Management, 35 of the families through admission and occupancy did not meet all the program requirements. In particular “finding housing” was a barrier for many clients.
d. While on site, compare the results to the reported status.				ON TRACK for 2022 for TBRA and Other Housing
e. If the goal was to assist a specific number of low-income families, complete a specific number of units, and/or purchase a specific number of acres, has this been accomplished?				Yes, through TBRA (45 of 40) Total number of Households assisted - 89



Office of Native American Programs

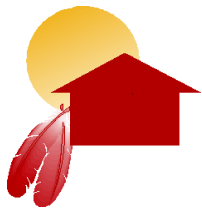
IHP and APR Compliance  
Monitoring Plan  
RECIPIENT

F. Statement of Needs				-
1. Has the estimate for low-income families remained the same?				No it has changed, because we utilized the “Low Income Documentation System” published by HUD annually.
2. If it has changed, explain the overall impact on the IHP.				IHBG Income limits increased in 2022 allowing for more eligible participants in our program.
3. Has the estimate for all families in the jurisdiction changed? Explain.				Yes, because we used the 2020 Federal Census data which was available and reflected an increased population in our service area compared to the 2010 data used in 2020 IHP.



<b>RECIPIENT NAME:</b>	<b><u>Regulatory/ Statutory Citation</u></b>	<b><u>Other Tools</u></b>	<b><u>WP. Pg.</u></b>	<b><u>Remarks</u></b>
G. Other Issues to Review				-
1. Useful Life and Binding Commitments	Section 205(a)(2) of NAHASDA	Recipient Guidance 2014-09(R)		We utilize what HUD recommend and issues annually.
a. Does the IHP identify the useful life period that the recipient uses for IHBG-assisted properties?				Yes, in “Other Submission Items” section of IHP/APR
(1) If not, did the IHP include a description of the recipient’s plan or system for determining the useful life of the housing it assists with IHBG funds?				N/A
b. Does the recipient maintain a record of the current, specific useful life for each individual property assisted with IHBG funds?  NOTE: Request a copy of the record of IHBG-assisted properties and ask that the list identify the useful life for each unit.				N/A – no longer have down payment program
2. Housing to be Demolished or Disposed	24 CFR 1000.134			-
a. Has the recipient demolished or disposed of any housing, as stated in its IHP?				N/A in 2022

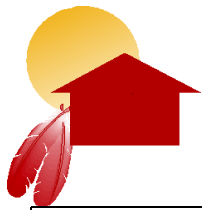




Office of Native American Programs

IHP and APR Compliance  
Monitoring Plan  
RECIPIENT

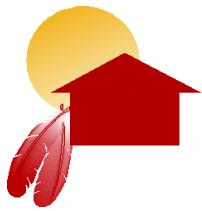
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3. Financial Resources				-
a. Did the recipient have available the financial resources stated in the IHP?				Yes, although the estimates made for carryover funding changes, but actuals were reflected in APR. (review construction in MIP)
b. Did the recipient use these resources?				Not all of them, but all unused funding will be carried into the next program year to be used toward meeting program goals
c. Explain.				Carried-over funding from previous years has been earmarked for the acquisition of emergency housing in 2023.
4. Affordable Housing Resources				-
a. Has recipient taken specific actions to address the identified needs?		<i>See Attached</i>		Yes, the program utilizes a “Turn-Away Report” completed monthly to identify the needs they could not meet.
b. Explain				The department has now created programs to address all the previously tracked needs! Moving forward, they are evaluating adding new needs to track, such as unaccompanied youth 13-17 and veterans, to begin identifying needs in our population.
5. Local Cooperation Agreements	Section 101(c) of NAHASDA			Read & Noted



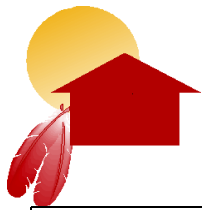
Office of Native American Programs

IHP and APR Compliance  
Monitoring Plan  
RECIPIENT

a. Has the recipient entered into a Local Cooperation Agreement with the governing body of the jurisdiction where rental or lease-purchase homeownership units are located and owned by the recipient and developed under NAHASDA or the 1937 Act?				In general, the Tribe has agreements in place with both the City of Anacortes and with Skagit County to provide fire, emergency and Police services to all Tribal Trust lands; However, the 34th Street Housing Development is being developed on Fee Simple land owned by the Tribe, and thus the City and County are already obligated to provide these services.
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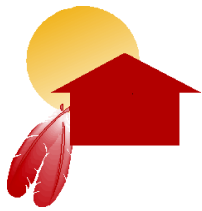
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b. Does the Agreement provide for local cooperation, tax-exemption of the units and the annual payments of user fees or payments in lieu of taxes to compensate such governments for the costs of providing governmental services (i.e., including police and fire protection, roads, water and sewerage systems, utilities systems and related facilities)?				No, because the units are fee simple and not on trust property; However, an agreement will be put in place if/when the property is put into trust and comes under the jurisdiction of the Tribe.
6. FCAS Validation (Formula Current Assisted Stock)				N/A in 2022  <i>NOTE: The Formula Current Assisted Stock (FCAS) component reflects housing developed under the United States Housing Act (the predecessor of the IHBG program) which is owned and/or operated by the IHBG recipient and provides funds for ongoing operation of the housing.</i>
a. Compare the recipient's actual FCAS documentation with:				N/A in 2022
(1) the unit count as shown in the APR and				N/A in 2022
b. Discuss any discrepancies in FCAS unit counts with Supervisor.				N/A in 2022



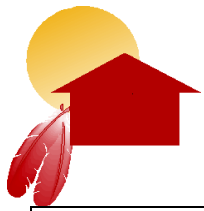
Office of Native American Programs

IHP and APR Compliance  
Monitoring Plan  
RECIPIENT

7.	Has the recipient coordinated the implementation of NAHASDA activities with other government agencies?				Yes, we have coordinated with the State's DSHS, with Work Source under Dept of Labor, and with Housing Services departments for all 10 Counties in our service area. We are part of Skagit, Whatcom, and Island Co. coordinated entry system as well.
8.	Has the recipient initiated partnerships and/or contracts with welfare agencies?				<p>Partnerships are in place without formal contracts with welfare agencies serving our 10 county services area.</p> <p>This year we built on our relationship with Skagit Community Action, and established the Volunteers of America, including their expanding housing services within Skagit county, which Samish will be a part of. Our new relationship with VOA includes their housing services department and tribal behavioral health department, but also with their Personal Support Services, which targets disabled clients.</p>



<b>RECIPIENT NAME:</b>	<b><u>Regulatory/ Statutory Citation</u></b>	<b><u>Other Tools</u></b>	<b><u>WP. Pg.</u></b>	<b><u>Remarks</u></b>
a. If yes, explain.				Tribe in general has formal MOAs in place with WA DSHS and its affiliates and has also expanded relationships with private not-for-profit welfare organizations.
<b>IV. Summary</b>				-
<p>A. Summarize the results of the review in a work paper.</p> <p>B. Discuss significant issues with Supervisor.</p> <p>C. Develop findings, including questioned costs and corrective actions, as appropriate.</p> <p>D. Develop concerns because they could lead to a violation</p> <p>E. Develop report language, including any findings and concerns.</p> <p>F. If there are any major issues identified in this review and the recipient has approval to invest, determine if a withdrawal of investment authority should be recommended.</p>				<p>In compliance and no areas of weakness found.</p> <p>Improvement:</p> <p>Reviewing MIP report vs HUD submitted.</p>



Office of Native American Programs

IHP and APR Compliance  
Monitoring Plan  
RECIPIENT

<b>Reviewer Name:</b>	Lisabeth Nielssen, interviewed Sharon Paskewitz & Justin Krupa
<b>Review Date(s):</b>	10/25/2022

Lisabeth Nielssen:

Sharon Paskewitz:

Justin Krupa:

Reviewed and Approved by Carey Thurston, CFO:



**Resolution 2022-02-008**

**Approve NAHASDA-HUD Annual Performance Report (APR) for 2021**

Approved February 9th, 2022

- WHEREAS** the Samish Indian Nation was federally re-acknowledged by the Assistant Secretary of the Department of the Interior of the United States of America on April 6, 1996;
- WHEREAS** the Samish Tribal Council is empowered to act on behalf of the Samish Indian Nation pursuant to Article VI, Section 2, of the Samish Tribal Constitution, approved November 14, 2003, by Resolution of the Samish Tribal Council and adopted and ratified by Vote of the Samish General Council on March 2, 2004, and recognized by the Assistant Secretary for Indian Affairs, David W. Anderson on April 20, 2004;
- WHEREAS** the health, safety, welfare and education of the citizens and family members of the Samish Indian Nation is the responsibility of the Tribal Council of the Samish Indian Nation;
- WHEREAS** the Native American Housing Assistance and Self-Determination Act of 1996 (NAHASDA), at Section 404, as amended, requires the Department of Housing and Urban Development to assess, at least annually, each recipient's performance under the Act;
- WHEREAS** Samish Indian Nation must complete the Tribe's Annual Performance Report (APR) for the program year that ended December 31, 2021;
- WHEREAS** the review of this report is designed to evaluate the APR and provide comments on data quality and overall performance;
- WHEREAS** the Samish Tribal Council has reviewed the attached summary of the NAHASDA-HUD Annual Performance Report for 2021 and has determined that the APR can be posted for tribal citizens and public comment on the Housing Departments Web Page and submitted to HUD;

**THEREFORE BE IT RESOLVED by the Samish Tribal Council:**

1. That the submittal of the NAHASDA-HUD Annual Performance Report for 2021 is approved.

**MAILING ADDRESS:** P.O. BOX 217 • ANACORTES, WA 98221

**LOCATION:** 2918 COMMERCIAL AVE • ANACORTES, WA 98221

**PHONE:** (360) 293-6404 • **FAX:** (360) 299-0790 • [www.samishtribe.nsn.us](http://www.samishtribe.nsn.us)

Resolution: 2022-02-008  
Page 1 of 2

**SAMISH TRIBAL COUNCIL**

**By:**



**Thomas D. Wooten  
Tribal Council Chairman**

**CERTIFICATION**

The above resolution was duly adopted by the Samish Tribal Council on the 9th day of February, 2022, at which time a quorum was present, by a vote of:

7 FOR, 0 AGAINST, 0 ABSTAIN.

**Certified**

**by:**



**Dana M. Matthews  
Tribal Council Secretary**

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**LOCATION:** 2918 COMMERCIAL AVE • ANACORTES, WA 98221

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Resolution: 2022-02-008  
Page 2 of 2





**Resolution 2022-10-009**  
**Approve 2023 Indian Housing Plan**  
Approved October 15th, 2022

- WHEREAS** the Samish Indian Nation was federally re-acknowledged by the Assistant Secretary of the Department of the Interior of the United States of America on April 6, 1996;
- WHEREAS** the Samish Tribal Council is empowered to act on behalf of the Samish Indian Nation pursuant to Article VI, Section 2, of the Samish Tribal Constitution, approved November 14, 2003, by Resolution of the Samish Tribal Council and adopted and ratified by Vote of the Samish General Council on March 2, 2004, and recognized by the Assistant Secretary for Indian Affairs, David W. Anderson on April 20, 2004;
- WHEREAS** the health, safety, welfare and education of the citizens and family members of the Samish Indian Nation is the responsibility of the Tribal Council of the Samish Indian Nation;
- WHEREAS** the Native American Housing Assistance and Self-Determination Act (NAHASDA) of 1996 simplified and reorganized the system of providing housing assistance to federally recognized Native American tribes to help improve their housing and other infrastructure. It reduced the regulatory strictures that burdened tribes and essentially provided for block grants so that they could apply funds to building or renovating housing as they saw fit. This was in line with other federal programs that recognized the sovereignty of tribes and allowed them to manage the funds according to their own priorities;
- WHEREAS** the Samish Tribal Council recognizes the NAHASDA Indian Housing Plan needs to be submitted to the United States Department of Housing and Urban Development (HUD) to assure continued services for Tribal Citizens;
- WHEREAS** the Samish Tribal Council has reviewed the attached budget and acknowledges the Housing Department has estimated the following funds available for calendar year 2023: Carry Over Funds in 2022 at \$2,718,256.21; Indian Housing Block grant estimated award for 2023 at \$1,230,144.00 and the estimated payback for Samish Xwch'angteng Housing Project at \$600,000.00;
- WHEREAS** the Samish Tribal Council has reviewed attached budget and is aware that the funding allows for a 20% indirect rate, and that there will not be a shortfall for calendar year 2023;

**THEREFORE BE IT RESOLVED by the Samish Tribal Council:**

1. Approves the housing department to submit \$4,548,400.21 to HUD for the 2023 Indian Housing Plan.
2. Authorizes the Chairman and/or designee to sign, submit, negotiate, amend, and/or modify the agreement.

**SAMISH TRIBAL COUNCIL**

**By:**



**Thomas D. Wooten**  
**Tribal Council Chairman**

**CERTIFICATION**

The above resolution was duly adopted by the Samish Tribal Council on the 15th day of October, 2022, at which time a quorum was present, by a vote of:

7 FOR, 0 AGAINST, 0 ABSTAIN.

**Certified**

**by:**



**Dana M. Matthews**  
**Tribal Council Secretary**

**MAILING ADDRESS:** P.O. BOX 217 • ANACORTES, WA 98221

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Resolution: 2022-10-009  
Page 2 of 2



# Energy and Performance Information Center ( EPIC )

Grant Number: **55-IT-53-13870**  
Report: **APR Report for 2021**  
First Submitted On: **03/24/2022**  
Last Submitted On: **03/24/2022**

OMB CONTROL NUMBER: 2577-0218  
EXPIRATION DATE: 07/31/2019

## Cover Page

### Grant Information:

Grant Number	55-IT-53-13870
Recipient Program Year	01/01/2021-12/31/2021
Federal Fiscal Year	2021
Initial Indian Housing Plan (IHP):	Yes
Amended Plan	
Annual Performance Report (APR):	Yes
Amended Plan	
Tribe:	Yes
TDHE:	

### Recipient Information:

Name of the Recipient	Samish Indian Nation
Contact Person	Wooten, Thomas
Telephone Number with Area Code	360-293-6404
Mailing Address	PO Box 217
City	Anacortes
State	WA
Zip	982210217
Fax Number with Area Code	360-293-0790
Email Address	tomwooten@samishtribe.nsn.us

### TDHE/Tribe Information:

Tax Identification Number	910931896
DUNS Number	091741637
CCR/SAM Expiration Date	01/10/2023

### Planned Grant-Based Budget for Eligible Programs:

IHBG Fiscal Year Formula Amount	\$903,427.00
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## Housing Needs

Type of Need (A)	Low-Income Indian Families (B)	All Indian Families (C)
Overcrowded Households	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>

Renters Who Wish to Become Owners	<input type="checkbox"/>	<input type="checkbox"/>
Substandard Units Needing Rehabilitation	<input type="checkbox"/>	<input type="checkbox"/>
Homeless Households	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Households Needing Affordable Rental Units	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
College Student Housing	<input type="checkbox"/>	<input type="checkbox"/>
Disabled Households Needing Accessibility	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Units Needing Energy Efficiency Upgrades	<input type="checkbox"/>	<input type="checkbox"/>
Infrastructure to Support Housing	<input type="checkbox"/>	<input type="checkbox"/>
Other (specify below)	<input type="checkbox"/>	<input type="checkbox"/>
Planned Program Benefits	<p>assistance needs. Our program and activities address the needs of low income Native families by offering safe and affordable housing through our Tenant Based Rental Assistance (TBRA) Program, Homelessness Prevention, Emergency Housing (Shelter Stays), Rapid Re-Housing, housing searches, financial management, landlord/tenant education and other supportive services that will help Native families obtain skills that will support their ability to retain long term permanent housing. Through our TBRA program, fifty (50) Native families will be provided with rental assistance and 50 will be supported through our Homelessness Prevention, Rapid Re-Housing and/or Emergency Housing assistance program. In 2021, Samish Indian Nation will complete its pre-construction work, and start constructing up to fourteen (14) units of rental housing, in which seven (7) of those units will be designated as affordable permanent housing for our low-income households. The other 7 will be designated for over-income households, financed with Non-Indian Housing Block Grant (IHBG) funding. Additionally, we will be building one unit for a live in Resident Manager. This unit will be built using IHBG and Non-IHBG funding. The land is located at 2109 34th Street, Anacortes, Washington 98221. A Community Center will be constructed to be used by residents of our affordable permanent housing, in addition to families participating in our TBRA, Homelessness Prevention, Rapid Re-housing and Emergency housing programs. We will introduce a new program ¿Community Awareness Health and Safety¿, designed to provide home safety demonstrations, home ownership education, home maintenance skills, educational training, and financial literature to residents in our affordable permanent housing, in addition to families participating in our TBRA, Homelessness Prevention, Rapid Re-housing and Emergency Shelter housing programs. These services will be offered virtually and in person, using social distancing recommendations. Activities offered will include assistance preparing a housing search plan and list of local landlords. For those clients that demonstrate that they need more assistance and support to find housing, the supportive service will be provided to meet the level of need. Evaluate the household¿s current resources, problem-solving abilities, and financial life skills, then provide the appropriate amount of assistance to ensure the greatest chance of successful transition to independence after program exit. When assistance ends, participants should have developed a natural support system, if possible, that will allow them to address obstacles that might later arise with employment, childcare, transportation, or financial management. Participants will also need to know how to navigate multiple systems, so ¿other housing services¿ should consist of arranging, coordinating, and monitoring the delivery of individualized services to facilitate housing stability. Rather than simply making referrals to programs, there will be times that we will need to walk participants through how to access services on their own and ensure that participants have the skills to access services in the future independently. This is extremely important now due to COVID-19, for some of our clients are not sure how to access these services remotely. Connections to Mainstream Resources ¿ that are appropriate to addressing barriers to housing retention. Our clients reside in scattered site-housing throughout ten (10) Counties in Western Washington ¿ Clallam, Island, Jefferson, King, Kitsap, Pierce, San Juan, Skagit, Snohomish and Whatcom. Many of our housing clients live in rural areas and do not have access to public transportation. Because of the COVID-19 Pandemic, our housing staff will use virtual techniques to make ¿home visits¿, to review housing</p>	

	stability plans, plan for clients to get transportation to medical appointments. Staff members will work with clients to navigate systems such as work source and other necessary appointments to ensure families will become self-sufficient.
Geographic Distribution	Assistance is distributed in a variety of ways for us to meet the needs and diversity of our families. We send information to our families through mailings on a quarterly basis. Our newsletter is mailed to all Samish households regardless of where they live, and our webpage is available to anyone with access to the internet. For our Native Elders, developing community relationships with agencies that have Tribal Outreach and Assistance has been and continues to be critical in providing information and assistance to this population. This one on one approach has been effective in helping our elders understand the services we provide and how such services can be effective for them. We provide services in ten (10) counties throughout Western Washington Clallam, Island, Jefferson, King, Kitsap, Pierce, San Juan, Skagit, Snohomish, and Whatcom. We have developed partnerships within our 10-county service area, explaining to other providers who we serve and how to contact us for information regarding the various housing services offered. We are also a part of Skagit, Island and Whatcom Counties Coordinated Entry System- a system designed for all populations that aligns the Single Adult, Family, and Youth into a seamless, collaborative, county-wide platform for housing and service delivery to homeless households. Our focus is on Native households. The main objectives of this system are to: <ul style="list-style-type: none"> <li>Reduce the length of time a family is homeless and permanently house them as quickly as possible, using Rapid Re-housing and linkages to supportive services.</li> <li>Build upon existing community-based infrastructures to serve homeless families, leverage resources, and provide more targeted and cost-effective interventions. Because of the COVID-19 Pandemic, and our lack of ability to see our clients face to face, it is our goal in 2021 to become ambassadors in using technology to work with our families to help them reach their housing goals. We also plan on becoming a part of the Homelessness Management Information System (HMIS) in San Juan County. This will be another resource in helping us identify families in those areas that could benefit from our program.</li> </ul>

## Programs

### 2021-0004 : Construction of Rental Housing

Program Name:	Construction of Rental Housing
Unique Identifier:	2021-0004
Program Description (continued)	Samish Indian Nation will build up to 14 units of rental housing of which 7 units will be designated as affordable permanent housing for our low-income households and a Community Center that will be used by residents of our affordable permanent housing, in addition to families participating in our TBRA, Homelessness Prevention, Rapid Re-Housing and Emergency Housing Programs. One additional unit will be built for an on-site live in Residential Manager. Up to 7 of the units and fifty percent (50%) of the cost associated with the community center and related infrastructure will be designated for low-income households using IHBG funding. Up to 7 of the units and fifty percent (50%) of the cost associated with the community center and related infrastructure will be designated for over-income households financed with non-IHBG funding. One additional unit will be built for an on-site Residential Manager. The cost of this unit will be split 50/50 using IHBG Funding and Non-IHBG funding. The land is located at 2109 34th Street, Washington 98221.
Eligible Activity Number	(4) Construction of Rental Housing [202(2)]
Intended Outcome Number	(7) Create new affordable rental units
APR: Actual Outcome Number	(12) Other-must provide description in the box below If Other: In 2021, Samish Indian Nation decided to use funding from the United States Department of Treasury under the American Rescue Plan Act (ARPA) for the construction of rental housing. This was approved through resolution 2021-09-001.
Who Will Be Assisted	Low-Income Native American Families with a preference for Samish Tribal Elders and members with a permanent or total disability.
Types and Level of Assistance	Permanent Supportive Housing to families that meet program eligibility criteria. The project will provide up to 14 - small cottages, - in which 7 will be assisted with IHBG funds. Each unit will have two bedrooms, one and

	one-half bathrooms with a combination of ADA accessible bedrooms. Each unit will be 1,200 square feet. A Community Center will be located on the property, allowing housing staff to conduct community gatherings, annual events in the community, safety demonstrations, home maintenance and education training provided in a classroom setting. Low income families will pay between 10% - 30% of their adjusted gross income toward monthly rent. This percentage amount will be determined by Council Resolution on an annual basis.	
APR : Describe Accomplishments	Dollars for Construction was repurposed in 2021.	
Planned and Actual Outputs for 12-Month Program Year	<b>Planned</b>	<b>APR - Actual</b>
	Number of <b>Units</b> to be Completed in Year      8	0
APR: If the program is behind schedule, explain why	In 2021, Samish Indian Nation decided to use funding from the United States Department of Treasury under the American Rescue Plan Act (ARPA) for the construction of rental housing. This was approved through resolution 2021-09-001.	

#### Uses of Funding:

The Uses of Funding table information can be entered here for each individual program or can be entered for all programs within Section 5(b): Uses of Funding. Changes to data on either page location will update in both Section 3: Program Descriptions and Section 5(b): Uses of Funding accordingly.

Prior and current year IHBG (only) funds to be expended in 12-month program year (L)	Total all other funds to be expended in 12-month program year (M)	Total funds to be expended in 12-month program year (N=L+M)	Total IHBG (only) funds expended in 12-month program year (O)	Total all other funds expended in 12-month program year (P)	Total funds expended in 12-month program year (Q=O+P)
\$2,262,657.18	\$2,262,657.18	\$4,525,314.36	\$4,625.90	\$0.00	\$4,625.90

#### 2021-0017 : Tenant Based Rental Assistance

Program Name:	Tenant Based Rental Assistance
Unique Identifier:	2021-0017
Program Description (continued)	This program is designed to provide rental assistance to Samish Citizens and enrolled members of Federally recognized Indian tribes living in the Samish Tribes 10 county service area. The purpose of the program is to ensure that low income Native families have the opportunity for and access to housing and that they can develop and/or increase their economic skills that will demonstrate their ability to maintain stable permanent housing once rental assistance ends. Families will be assigned to a Case Manager that will link them to supportive services that enable participants to increase earned income, reduce or eliminate the need for welfare assistance, and make progress toward achieving economic independence and housing self-sufficiency. Program participants must meet income eligibility requirements, the criteria in the Samish Indian Nation's Housing Policies and Native American Housing and Self-Determination Act (NAHASDA) policies.
Eligible Activity Number	(17) Tenant Based Rental Assistance [202(3)]
Intended Outcome Number	(6) Assist affordable housing for low income households
APR: Actual Outcome Number	(6) Assist affordable housing for low income households
Who Will Be Assisted	Low-Income Native American Families
Types and Level of Assistance	Rental assistance will be used to pay rent in private market rental units. Eligible families will pay between 10% - 30% of the household adjusted gross income (amount to be determined and approved by the Council Resolution Annually). The Samish Housing Department pays the additional cost of the families rent up to the Fair Market Rent for that area.
APR : Describe Accomplishments	Although our outcomes were higher than anticipated, the cost of rental units has gone up and it has been difficult finding units that are within the Fair Market Rents. There were 16 families that exited TBRA in 2021. 5 families became homeowners 2 families were over income limits 4 families completed program and demonstrated their ability to pay their housing expenses moving forward 2 families were transferred to another internal housing program. 1 family moved out of the service area 1 Elder passed away 1 family was terminated due to failure to pay rent
Planned and Actual Outputs for 12-Month Program	

Year	<b>Planned</b>	<b>APR - Actual</b>
	Number of <b>Households</b> 50 to be served in Year	54
APR: If the program is behind schedule, explain why	Does not apply	

**Uses of Funding:**

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Prior and current year IHBG (only) funds to be expended in 12-month program year (L)	Total all other funds to be expended in 12-month program year (M)	Total funds to be expended in 12-month program year (N=L+M)	Total IHBG (only) funds expended in 12-month program year (O)	Total all other funds expended in 12-month program year (P)	Total funds expended in 12-month program year (Q=O+P)
\$633,534.76	\$0.00	\$633,534.76	\$676,369.15	\$0.00	\$676,369.15

**2021-0018 : Housing and Support Services**

Program Name:	Housing and Support Services
Unique Identifier:	2021-0018
Program Description (continued)	<p>The intent of this program is to work with Native families to understand their unique needs, tailoring our services to move them toward independence and self-sufficiency. Information and resources on budgets, credit repair, basic home housekeeping, how to maintain a rental unit, Landlord/Tenant rights and other information, is just an example of the resources we will provide to families enrolled in our services. To prevent households from becoming homeless by offering short term rental assistance to defray rent and utility bills. For tribal households who are currently homeless to establish stable housing, emergency shelter will be offered for up to four (4) weeks. Emergency assistance will also be used to relocate families when it has been determined that current living situations are not decent, safe or sanitary. We will introduce a new program ¿Community Awareness Health and Safety¿, designed to provide home safety demonstrations, home ownership education, home maintenance skills, educational training, and financial literature to residents in our affordable permanent housing. Households participating in our TBRA, Homelessness Prevention, Rapid Rehousing and Emergency Housing Programs will also benefit from this new service. These services will be offered virtually and in person, using social distancing recommendations. Our clients reside in scattered site-housing throughout ten (10) Counties in Western Washington ¿ Clallam, Island, Jefferson, King, Kitsap, Pierce, San Juan, Skagit, Snohomish, and Whatcom. Many of our housing clients live in rural areas and do not have access to public transportation. Because of the COVID-19 Pandemic, our housing staff will use virtual techniques to make ¿home visits¿, to review housing stability plans, plan for clients to get transportation to medical appointments. Staff members will work with clients to navigate systems such as work source and other necessary appointments to ensure families will become self-sufficient.</p>
Eligible Activity Number	(18) Other Housing Service [202(3)]
Intended Outcome Number	<p>(12) Other-must provide description in the box below            If Other: Families will learn how to identify, obtain and/or maintain access to community resources. They will learn how to understand, create and use a monthly budget and apply those skills to track their spending habits, cut spending and set financial goals. Families will set long term financial goals and take steps to clear up their credit report, if necessary. Families using our emergency assist</p>
APR: Actual Outcome Number	<p>(12) Other-must provide description in the box below            If Other: We offered financial literacy education to families to help increase money management skills. Knowledge of credit, debt management and saving strategies.</p>
Who Will Be Assisted	Low-Income Native American Families
Types and Level of Assistance	Assistance preparing a housing search plan and list of local landlords. For those clients that demonstrate that they need more assistance and support to find housing, the supportive service will be provided to meet the level of need. Evaluate the households current resources, problem-solving abilities, and financial life skills, then provide the appropriate amount of assistance to



	<p>ensure the greatest chance of successful transition to independence after program exit. When assistance ends, participants should have developed a natural support system, if possible, that will allow them to address obstacles that might later arise with employments, childcare, transportation or financial management. Participants will also need to know how to navigate multiple systems, so other housing services should consist of arranging, coordinating, and monitoring the delivery of individualized services to facilitate housing stability. Rather than simply making referrals to programs, there will be times that we will need to walk participants through how to access services on their own and ensure that participants have the skills to access services in the future independently. This is extremely important now due to COVID-19, for some of our clients are not sure how to access these services remotely. Connections to Mainstream Resources that are appropriate to addressing barriers to housing retention. We will also provide resources and information through our newsletter, webpage and mailings on budgeting, credit repair and debt management. We will also provide information on basic home repair, weatherization and home safety tips. This information will be available to all our Samish citizens and to other Native families that have access to the internet. Homelessness Prevention - short term rental assistance to defray rent and utility bills. Rapid Re-Housing quickly move families out of homelessness and into permanent housing. Emergency Assistance - to establish stable housing, emergency shelter will be offered for up to four (4) weeks. Emergency assistance will also be used to relocate families when it has been determined that current living situations are not decent, safe or sanitary. All services are attached to Case Management and community mainstream resources.</p>												
APR : Describe Accomplishments	<p>We worked with 66 households in 2021 to help them understand their credit, debt management and saving strategies. This resulted in 5 Families becoming first time home owners and 4 families no longer needing any financial assistance from us for they demonstrated their ability to manage their household expenses - Rent and other basic needs.</p>												
Planned and Actual Outputs for 12-Month Program Year	<table border="1"> <thead> <tr> <th></th><th>Planned</th><th>APR - Actual</th></tr> </thead> <tbody> <tr> <td>Number of <b>Households</b> to be served in Year</td><td>50</td><td>66</td></tr> </tbody> </table>		Planned	APR - Actual	Number of <b>Households</b> to be served in Year	50	66						
	Planned	APR - Actual											
Number of <b>Households</b> to be served in Year	50	66											
APR: If the program is behind schedule, explain why	Does Not Apply												
<p><b>Uses of Funding:</b>          The Uses of Funding table information can be entered here for each individual program or can be entered for all programs within Section 5(b): Uses of Funding. Changes to data on either page location will update in both Section 3: Program Descriptions and Section 5(b): Uses of Funding accordingly.</p>													
<table border="1"> <thead> <tr> <th>Prior and current year IHBG (only) funds to be expended in 12-month program year (L)</th><th>Total all other funds to be expended in 12-month program year (M)</th><th>Total funds to be expended in 12-month program year (N=L+M)</th><th>Total IHBG (only) funds expended in 12-month program year (O)</th><th>Total all other funds expended in 12-month program year (P)</th><th>Total funds expended in 12-month program year (Q=O+P)</th></tr> </thead> <tbody> <tr> <td>\$143,251.06</td><td>\$0.00</td><td>\$143,251.06</td><td>\$127,498.13</td><td>\$0.00</td><td>\$127,498.13</td></tr> </tbody> </table>	Prior and current year IHBG (only) funds to be expended in 12-month program year (L)	Total all other funds to be expended in 12-month program year (M)	Total funds to be expended in 12-month program year (N=L+M)	Total IHBG (only) funds expended in 12-month program year (O)	Total all other funds expended in 12-month program year (P)	Total funds expended in 12-month program year (Q=O+P)	\$143,251.06	\$0.00	\$143,251.06	\$127,498.13	\$0.00	\$127,498.13	
Prior and current year IHBG (only) funds to be expended in 12-month program year (L)	Total all other funds to be expended in 12-month program year (M)	Total funds to be expended in 12-month program year (N=L+M)	Total IHBG (only) funds expended in 12-month program year (O)	Total all other funds expended in 12-month program year (P)	Total funds expended in 12-month program year (Q=O+P)								
\$143,251.06	\$0.00	\$143,251.06	\$127,498.13	\$0.00	\$127,498.13								
<b>2021-0019 : Housing Management</b>													
Program Name:	Housing Management												
Unique Identifier:	2021-0019												
Program Description (continued)	The provision of management services for affordable housing, including preparation of work specifications, and management of affordable housing projects.												
Eligible Activity Number	(19) Housing Management Services [202(4)]												
Intended Outcome Number	(6) Assist affordable housing for low income households												
APR: Actual Outcome Number	(6) Assist affordable housing for low income households												
Who Will Be Assisted	Low-Income Native American Families												
Types and Level of Assistance	(1) Preparation of work specifications for affordable housing; (2) Loan processing for affordable housing; (3) Inspections for affordable housing; (4) Tenant selection for affordable housing; (5) Management of tenant-based and project-based rental assistance; (6) Mediation programs for landlord-tenant disputes for affordable housing; (7) Hiring of grants writers for affordable housing applications.												



APR : Describe Accomplishments	In 2021, due to the national pandemic, we were able to provide housing inspections, virtually, to 66 households.	
Planned and Actual Outputs for 12-Month Program Year	<b>Planned</b>	<b>APR - Actual</b>
	Number of <b>Households</b> 100 to be served in Year	66
APR: If the program is behind schedule, explain why	We used our Tribal Citizens funds for the majority of the households needing housing assistance in 2021. This funding was specific to those impacted by the pandemic.	

#### Uses of Funding:

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Prior and current year IHBG (only) funds to be expended in 12-month program year (L)	Total all other funds to be expended in 12-month program year (M)	Total funds to be expended in 12-month program year (N=L+M)	Total IHBG (only) funds expended in 12-month program year (O)	Total all other funds expended in 12-month program year (P)	Total funds expended in 12-month program year (Q=O+P)
\$167,792.52	\$0.00	\$167,792.52	\$147,282.96	\$0.00	\$147,282.96

#### 2021-0021 : Community Center

Program Name:	Community Center
Unique Identifier:	2021-0021
Program Description (continued)	The Community Center will be a place for all residents to gather for celebrations, community awareness, cultural events, and other activities for families that live in our affordable housing units. Some of the activities will focus on isolation prevention (for our elders) and as a place of relief in instances of community tragedies. Staff will provide outreach to residents through participation in annual events in the community. Safety demonstrations, home maintenance and education training will be provided virtually and when we are able - in a classroom setting, using social distancing guidelines. All services offered at the Community Center will be available to all clients participating in our housing programs.
Eligible Activity Number	(22) Model Activities [202(6)]
Intended Outcome Number	(12) Other-must provide description in the box below If Other: The Community Center will be used by residents of our permanent affordable housing project, and clients that participate in our TBRA, Homelessness Prevention, Rapid Re-housing and Emergency Housing Programs.
APR: Actual Outcome Number	(12) Other-must provide description in the box below If Other: In 2021, Samish Indian Nation decided to use funding from the United States Department of Treasury under the American Rescue Plan Act (ARPA) for the construction of rental housing. This was approved through resolution 2021-09-001.
Who Will Be Assisted	Native American Families
Types and Level of Assistance	Home safety demonstrations, home ownership education, home maintenance skills, educational training and financial literature. The Community Center is a new construction. The footprint for the building is approximately 800-1000 Sq. Ft. The total floor area may be up to 2000 sq. Ft. The main floor will be opened, with a kitchen area and two bathrooms. Outside there will be a playground.
APR : Describe Accomplishments	Does not apply
Planned and Actual Outputs for 12-Month Program Year	<b>Planned</b> <b>APR - Actual</b>
	The output measure being collected for this eligible activity is dollars. The dollar amount should be included as an other fund amount listed in the Uses of Funding table.
APR: If the program is behind schedule, explain why	In 2021, Samish Indian Nation decided to use funding from the United States Department of Treasury under the American Rescue Plan Act (ARPA) for the construction of rental housing. This was approved through resolution 2021-09-001.

**Uses of Funding:**

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Prior and current year IHBG (only) funds to be expended in 12-month program year (L)	Total all other funds to be expended in 12-month program year (M)	Total funds to be expended in 12-month program year (N=L+M)	Total IHBG (only) funds expended in 12-month program year (O)	Total all other funds expended in 12-month program year (P)	Total funds expended in 12-month program year (Q=O+P)
\$75,000.00	\$0.00	\$75,000.00	\$0.00	\$0.00	\$0.00

**Maintaining 1937 Act Units, Demolition, and Disposition**

Maintaining 1937 Act Units	Does Not Apply
Demolition and Disposition	Does Not Apply

**Budget Information****Sources of Funding**

Funding Source	Estimated(IHP) /Actual(APR)	Amount on hand at beginning of program year (F)	Amount to be received during 12-month program year (G)	Total sources of funds (H=F+G)	Funds to be expended during 12-month program year (I)	Unexpended funds remaining at end of program year (J=H-I)	Unexpended funds obligated but not expended at end of 12-month program year (K)
<b>IHBG Funds:</b>	Estimated	\$2,622,679.78	\$826,748.00	\$3,449,427.78	\$3,449,427.69	\$0.09	
	Actual	\$2,511,940.38	\$903,427.00	<b>\$3,415,367.38</b>	\$1,125,833.87	<b>\$2,289,533.51</b>	\$0.00
<b>IHBG Program Income:</b>	Estimated	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	
	Actual	\$0.00	\$0.00	<b>\$0.00</b>	\$0.00	<b>\$0.00</b>	\$0.00
<b>Title VI:</b>	Estimated	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	
	Actual	\$0.00	\$0.00	<b>\$0.00</b>	\$0.00	<b>\$0.00</b>	\$0.00
<b>Title VI Program Income:</b>	Estimated	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	
	Actual	\$0.00	\$0.00	<b>\$0.00</b>	\$0.00	<b>\$0.00</b>	\$0.00
<b>1937 Act Operating Reserves:</b>	Estimated	\$0.00		\$0.00	\$0.00	\$0.00	
	Actual	\$0.00		<b>\$0.00</b>	\$0.00	<b>\$0.00</b>	\$0.00
<b>Carry Over 1937 Act Funds:</b>	Estimated	\$0.00		\$0.00	\$0.00	\$0.00	
	Actual	\$0.00		<b>\$0.00</b>	\$0.00	<b>\$0.00</b>	\$0.00
<b>LEVERAGED FUNDS</b>							
<b>ICDBG Funds:</b>	Estimated	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	
	Actual	\$0.00	\$0.00	<b>\$0.00</b>	\$0.00	<b>\$0.00</b>	\$0.00
<b>Other Federal Funds:</b>	Estimated	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	
	Actual	\$0.00	\$0.00	<b>\$0.00</b>	\$0.00	<b>\$0.00</b>	\$0.00

	Estimated	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	
<b>LIHTC:</b>	Actual	\$0.00	\$0.00	<b>\$0.00</b>	\$0.00	<b>\$0.00</b>	\$0.00
	Estimated	\$2,622,679.78	\$0.00	\$2,622,679.78	\$2,262,657.18	\$360,022.60	
<b>Non-Federal Funds:</b>	Actual	\$0.00	\$0.00	<b>\$0.00</b>	\$0.00	<b>\$0.00</b>	\$0.00
	Estimated	<b>\$5,245,359.56</b>	<b>\$826,748.00</b>	<b>\$6,072,107.56</b>	<b>\$5,712,084.87</b>	<b>\$360,022.69</b>	<b>\$0.00</b>
<b>Total:</b>	<b>Actual</b>	<b>\$2,511,940.38</b>	<b>\$903,427.00</b>	<b>\$3,415,367.38</b>	<b>\$1,125,833.87</b>	<b>\$2,289,533.51</b>	<b>\$0.00</b>

#### Uses of Funding

Program Name	Unique Identifier	Prior and current year IHBG (only) funds to be expended in 12-month program year (L)	Total all other funds to be expended in 12-month program year (M)	Total funds to be expended in 12-month program year (N=L+M)	Total IHBG (only) funds expended in 12-month program year (O)	Total all other funds expended in 12-month program year (P)	Total funds expended in 12-month program year (Q=O+P)
Construction of Rental Housing	2021-0004	\$2,262,657.18	\$2,262,657.18	\$4,525,314.36	\$4,625.90	\$0.00	\$4,625.90
Tenant Based Rental Assistance	2021-0017	\$633,534.76	\$0.00	\$633,534.76	\$676,369.15	\$0.00	\$676,369.15
Housing and Support Services	2021-0018	\$143,251.06	\$0.00	\$143,251.06	\$127,498.13	\$0.00	\$127,498.13
Housing Management	2021-0019	\$167,792.52	\$0.00	\$167,792.52	\$147,282.96	\$0.00	\$147,282.96
Community Center	2021-0021	\$75,000.00	\$0.00	\$75,000.00	\$0.00	\$0.00	\$0.00
Planning and Administration		\$167,192.17	\$0.00	\$167,192.17	\$170,057.73	\$0.00	\$170,057.73
Loan Repayment (describe in 3 & 4 below)		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
<b>Total</b>		<b>\$3,449,427.69</b>	<b>\$2,262,657.18</b>	<b>\$5,712,084.87</b>	<b>\$1,125,833.87</b>	<b>\$0.00</b>	<b>\$1,125,833.87</b>

APR	Does not Apply
-----	----------------

APR	Does not apply
-----	----------------

#### Other Submission Items

Useful Life/Affordability Period(s)	Under \$5000 - 6 Months; \$5000 - \$15,000 - 5 Years; \$15,001 - \$40,000 - 10 Years; Over \$40,000 - 15 Years; New Construction or Acquisition - 20 Years.
Model Housing and Over-Income Activities	The Community Center will be a place for all residents to gather for celebrations, community awareness, cultural events, and other activities for families that live in our affordable housing units. Some of the activities will focus on isolation prevention (for our elders) and as a place of relief in instances of community tragedies. Staff will provide outreach to residents through participation in annual events in the community. Safety demonstrations, home maintenance and education training will be provided virtually and when we are able - in a classroom setting, using social distancing guidelines. All services offered at the Community Center will be available to all clients participating in our housing programs.
Tribal and Other Indian Preference Does the tribe have a preference policy?	YES  Samish Tribal Citizens will have first preference for all services offered through our Housing Department, however, if funds allow, we will provide services to other Native households that are enrolled in a federally recognized Indian tribe.
Anticipated Planning and Administration Expenses Do you intend to exceed your allowable spending cap for Planning and Administration?	NO

Actual Planning and Administration Expenses Did you exceed your allowable spending cap for Planning and Administration?	NO											
Does the tribe have an expanded formula area?:	NO											
Total Expenditures on Affordable Housing Activities:	<table><tr><td></td><td>All AIAN Households</td><td>AIAN Households with Incomes 80% or Less of Median Income</td></tr><tr><td>IHBG Funds</td><td>\$0.00</td><td>\$0.00</td></tr><tr><td>Funds from Other Sources</td><td>\$0.00</td><td>\$0.00</td></tr></table>				All AIAN Households	AIAN Households with Incomes 80% or Less of Median Income	IHBG Funds	\$0.00	\$0.00	Funds from Other Sources	\$0.00	\$0.00
	All AIAN Households	AIAN Households with Incomes 80% or Less of Median Income										
IHBG Funds	\$0.00	\$0.00										
Funds from Other Sources	\$0.00	\$0.00										
For each separate formula area, list the expended amount	<table><tr><td></td><td>All AIAN Households</td><td>AIAN Households with Incomes 80% or Less of Median Income</td></tr><tr><td>IHBG Funds</td><td>\$0.00</td><td>\$0.00</td></tr><tr><td>Funds from Other Sources</td><td>\$0.00</td><td>\$0.00</td></tr></table>				All AIAN Households	AIAN Households with Incomes 80% or Less of Median Income	IHBG Funds	\$0.00	\$0.00	Funds from Other Sources	\$0.00	\$0.00
	All AIAN Households	AIAN Households with Incomes 80% or Less of Median Income										
IHBG Funds	\$0.00	\$0.00										
Funds from Other Sources	\$0.00	\$0.00										

#### Indian Housing Plan Certification Of Compliance

In accordance with applicable statutes, the recipient certifies that it will comply with Title II of the Civil Rights Act of 1968, Section 504 of the Rehabilitation Act of 1973, the Age Discrimination Act of 1975, and other federal statutes, to the extent that they apply to tribes and TDHEs, see 24 CFR 1000.12.	YES
In accordance with 24 CFR 1000.328, the recipient receiving less than \$200,000 under FCAS certifies that there are households within its jurisdiction at or below 80 percent of median income.	Not Applicable
The recipient will maintain adequate insurance coverage for housing units that are owned and operated or assisted with grant amounts provided under NAHASDA, in compliance with such requirements as may be established by HUD:	YES
Policies are in effect and are available for review by HUD and the public governing the eligibility, admission, and occupancy of families for housing assisted with grant amounts provided under NAHASDA:	YES
Policies are in effect and are available for review by HUD and the public governing rents charged, including the methods by which such rents or homebuyer payments are determined, for housing assisted with grant amounts provided under NAHASDA:	YES
Policies are in effect and are available for review by HUD and the public governing the management and maintenance of housing assisted with grant amounts provided under NAHASDA:	YES

#### Tribal Wage Rate Certification

1. You will use tribally determined wage rates when required for IHBG-assisted construction or maintenance activities. The Tribe has appropriate laws and regulations in place in order for it to determine and distribute prevailing wages.	YES
2. You will use Davis-Bacon or HUD determined wage rates when required for IHBG-assisted construction or maintenance activities.	
3. You will use Davis-Bacon and/or HUD determined wage rates when required for IHBG-assisted construction except for the activities described below.	

4. List the activities using tribally determined wage rates:	
--	--

#### Self Monitoring

Do you have a procedure and/or policy for self-monitoring?:	YES
Pursuant to 24 CFR § 1000.502 (b) where the recipient is a TDHE, did the TDHE provide periodic progress reports including the self-monitoring report, Annual Performance Report, and audit reports to the Tribe?:	NA
Did you conduct self-monitoring, including monitoring sub-recipients?:	YES
Self-Monitoring Results: Describe the results of the monitoring activities, including corrective actions planned or taken.	2021 Self-Monitoring Report has been attached

#### Inspections

Activity (A)	Total number of Units (B)	Units in standard condition (C)	Units needing rehabilitation (D)	Units needing to be replaced (E)	Total number of units inspected (F=C+D+E)
<b>1937 Housing Act Units:</b>					
a. Rental	0	0	0	0	0
b. Homeownership	0	0	0	0	0
c. Other	0	0	0	0	0
<b>1937 Act Subtotal:</b>	0	0	0	0	0
<b>NAHASDA Assisted Units:</b>					
a. Rental	0	0	0	0	0
b. Homeownership	0	0	0	0	0
c. Rental Assistance	66	66	0	0	66
d. Other	0	0	0	0	0
<b>NAHASDA Subtotal:</b>	66	66	0	0	66
<b>Total:</b>	66	66	0	0	66

2. Did you comply with your inspection policy?	YES
--	-----

#### Audits

1. Did you expend \$750,000 or more in total Federal awards during the previous fiscal year ended (24 CFR 1000.544) ? If Yes, an audit is required to be submitted to the Federal Audit Clearinghouse. If No, an audit is not required.	YES
--	-----

#### Public Availability

Did you make this APR available to the citizens in your jurisdiction before it was submitted to HUD (24 CFR § 1000.518)?	YES
If you are a TDHE, did you submit this APR to the Tribe	Not Applicable
If you answered No to question #1 and/or #2, provide an explanation as to why not and indicate when you will do so:	
Summarize any comments received from the Tribe and/or the citizens :	No Comments were received

#### Jobs Supported By NAHASDA

Number of Permanent Jobs Supported by Indian Housing Block Grant Assistance(IHBG):	9
Number of Temporary Jobs Supported by Indian Housing Block	1

Grant Assistance(IHBG):

Narrative (Optional):

### NAHASDA - IHP / APR CALCULATOR

		Amount at hand at beginning of program year	Amount to be received during the 12-month program year	Total Sources of Funds	Funds to be expended during the 12-month program year	Unexpended funds remaining at end of program year	Unexpended funds obligated but not expended at end of 12-month program year
	<i>In MIP</i>	<i>(Funded Budget GL4998 Deferred Revenue)</i>	<i>(Funded Budget GL4000 Normal Revenue)</i>	<i>(Total Budget Column in MIP)</i>	<i>(Total Expenses: Budget Column for IHP; Current Period Actual for APR)</i>	<i>(\$0 for IHP; Budget variance Column in Total Expenses)</i>	<i>(Funds encumbered in Contractual work but not yet expended)</i>
		F	G	H	I	J	K
From IHP	Estimated	2,622,679.78	826,748.00	3,449,427.78	3,449,427.69	-	-
For APR	Actual	2,511,940.38	903,427.00	3,415,367.38	1,125,833.87	2,289,533.51	-
		Prior and current year IHBG (only) funds to be expended in 12-month program year	Total all other funds to be expended in 12-month program year	Total funds to be expended in 12-month program year	Total IHBG (only) funds expended in 12-month program year	Total all other funds expended in 12-month program year	Total funds expended in 12-month program year
	<i>In MIP</i>	<i>(Funded Budget Column)</i>	<i>(GL4100 Other income Budget -likely none)</i>	<i>(L + M)</i>	<i>(Current Period Actual Column)</i>	<i>(GL4100 Other Income Expended - likely none)</i>	<i>(O + P)</i>
		L	M	N	O	P	Q
Construction	0004	2,086,411.76		2,086,411.76	2,079.25		2,079.25
TBRA	0017	808,971.28		808,971.28	679,476.62		679,476.62
Other Housing	0018	140,720.49		140,720.49	127,832.93		127,832.93
Housing Mgmt	0019	167,468.68		167,468.68	147,282.96		147,282.96
Community Center	0021	35,000.00		35,000.00	-		-
Plannning & Admin		176,795.17	-	176,795.17	160,942.56	-	160,942.56
Direct	0001	12,215.46			6,584.92		
Indirect	0001	164,579.71			154,357.64		
Total		3,415,367.38	-	3,415,367.38	1,117,614.32	-	1,117,614.32

Directions: Fill out the cells in Green with data from MIP; the grey cells are already completed for you with an addition formula; the four cells wil a BOLD border should match up and if they do not, then double check your green cells again.

SAMISH INDIAN NATION  
Statement of Revenues and Expenditures - 41005 21 HUD NAHASDA APR - Unposted Transactions Included In Report  
From 1/1/2021 Through 12/31/2021

			<u>Funded Budget</u>	<u>Beg Grant Period to Date</u>	<u>Current Period Actual</u>	<u>Budget Variance</u>
NORMAL REVENUE						
NO SUB CODE	0	G	<u>903,427.00</u>	<u>893,818.34</u>	<u>893,818.34</u>	<u>9,608.66</u>
Total NORMAL REVENUE			<u>903,427.00</u>	<u>893,818.34</u>	<u>893,818.34</u>	<u>9,608.66</u>
DEFERRED REVENUE						
NO SUB CODE	0	F	<u>2,511,940.38</u>	<u>223,795.98</u>	<u>223,795.98</u>	<u>2,288,144.40</u>
Total DEFERRED REVENUE			<u>2,511,940.38</u>	<u>223,795.98</u>	<u>223,795.98</u>	<u>2,288,144.40</u>
TOTAL REVENUES		H	<u>3,415,367.38</u>	<u>1,117,614.32</u>	<u>1,117,614.32</u>	<u>2,297,753.06</u>
DIRECT EXPENDITURES			L & N		O & P	
HOUSING PROGRAM ADMINISTRA...	0001		<u>12,215.46</u>	<u>6,584.92</u>	<u>6,584.92</u>	<u>5,630.54</u>
HOUSING CONSTRUCTION OF REN...	0004		<u>2,086,411.76</u>	<u>2,079.25</u>	<u>2,079.25</u>	<u>2,084,332.51</u>
HOUSING TENANT BASED RENTAL ...	0017		<u>808,971.28</u>	<u>679,476.62</u>	<u>679,476.62</u>	<u>129,494.66</u>
HOUSING OTHER HOUSING SERVI...	0018		<u>140,720.49</u>	<u>127,832.93</u>	<u>127,832.93</u>	<u>12,887.56</u>
HOUSING MANAGEMENT SERVICES	0019		<u>167,468.68</u>	<u>147,282.96</u>	<u>147,282.96</u>	<u>20,185.72</u>
HOUSING MODEL ACTIVITIES	0021		<u>35,000.00</u>	<u>0.00</u>	<u>0.00</u>	<u>35,000.00</u>
Total DIRECT EXPENDITURES			<u>3,250,787.67</u>	<u>963,256.68</u>	<u>963,256.68</u>	<u>2,287,530.99</u>
INDIRECT EXPENSES						
HOUSING PROGRAM ADMINISTRA...	0001		<u>164,579.71</u>	<u>154,357.64</u>	<u>154,357.64</u>	<u>10,222.07</u>
Total INDIRECT EXPENSES			<u>164,579.71</u>	<u>154,357.64</u>	<u>154,357.64</u>	<u>10,222.07</u>
TOTAL EXPENSES			<u>IHP - I</u> <u>3,415,367.38</u>	<u>APR - I</u> <u>1,117,614.32</u>	<u>1,117,614.32</u>	<u>APR - J</u> <u>2,297,753.06</u>
NET INCOME (LOSS)			<u>0.00</u>	<u>0.00</u>	<u>0.00</u>	<u>0.00</u>

K: This would be gathered by examining the Contracts in place. Take the total contract amount minus what has been spent and that will give you the "obligate" or encumbered amount for the cell.





# Energy and Performance Information Center (EPIC)

MAQM43, Welcome back!

 MAQM43

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Home

IHP/APR

SF425

[Award List](#)

OMB CONTROL NUMBER: 2577-0218  
EXPIRATION DATE: 07/31/2019

## APR20 » 55-IT-53-13870 » Samish Indian Nation » APR Report for 2021

[Help?](#)

[Go Back to Reports List](#)

[Section Overview](#)

[1: Cover Page](#)

[2: Housing Needs](#)

[3: Program Descriptions](#)

[4: Maintaining 1937 Act Units, Demolition and Disposition](#)

[5\(a\): Sources of Funding](#)

[5\(b\): Uses of Funding](#)

[6: Other Submission Items](#)

[7: Indian Housing Plan Certification Of Compliance](#)

[8: IHP Tribal Certification](#)

[9: Tribal Wage Rate Certification](#)

[10: Self Monitoring](#)

[11: Inspections](#)

[12: Audits](#)

[13: Public Availability](#)

[14: Jobs Supported By NAHASDA](#)

Section Review and Submission

 [View Comments](#)

 [Print Report](#)

### Report Submission Confirmation



Report submitted successfully!

Award ID: 55-IT-53-13870

Recipient Name: Samish Indian Nation

Report Type: APR

Federal Fiscal year: 2021

Recipient Program Year range: 01/01/2021 - 12/31/2021

Submitted on: 03/24/2022 12:27 PM EDT

Submitted by: PASKEWITZ, SHARON

Submitter Title: Housing Director

Filling Status: Submitted

[Print Confirmation](#)

[Return to Report List](#)



# Energy and Performance Information Center ( EPIC )

Grant Number: **55-IT-53-13870**  
Report: **IHP Report for 2023**  
First Submitted On:  
Last Submitted On:

OMB CONTROL NUMBER: 2577-0218  
EXPIRATION DATE: 07/31/2019

## Cover Page

### Grant Information:

Grant Number	55-IT-53-13870
Recipient Program Year	01/01/2023-12/31/2023
Federal Fiscal Year	2023
Initial Indian Housing Plan (IHP):	Yes
Amended Plan	
Annual Performance Report (APR):	
Amended Plan	
Tribe:	Yes
TDHE:	

### Recipient Information:

Name of the Recipient	Samish Indian Nation
Contact Person	Wooten, Thomas
Telephone Number with Area Code	360-293-6404
Mailing Address	PO Box 217
City	Anacortes
State	WA
Zip	982210217
Fax Number with Area Code	360-293-0790
Email Address	tomwooten@samishtribe.nsn.us

### TDHE/Tribe Information:

Tax Identification Number	910931896
DUNS Number	091741637
CCR/SAM Expiration Date	01/10/2023

### Planned Grant-Based Budget for Eligible Programs:

IHBG Fiscal Year Formula Amount	\$1,230,144.00
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## Housing Needs

Type of Need (A)	Low-Income Indian Families (B)	All Indian Families (C)
Overcrowded Households	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Renters Who Wish to Become Owners	<input type="checkbox"/>	<input type="checkbox"/>
Substandard Units Needing Rehabilitation	<input type="checkbox"/>	<input type="checkbox"/>
Homeless Households	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Households Needing Affordable Rental Units	<input checked="" type="checkbox"/>	<input type="checkbox"/>
College Student Housing	<input type="checkbox"/>	<input type="checkbox"/>
Disabled Households Needing Accessibility	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Units Needing Energy Efficiency Upgrades	<input type="checkbox"/>	<input type="checkbox"/>
Infrastructure to Support Housing	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Other (specify below)	<input type="checkbox"/>	<input type="checkbox"/>
Planned Program Benefits	<p>Our program and activities address the needs of low income Native families by offering safe and affordable housing through our Tenant Based Rental Assistance (TBRA) Program, Homelessness Prevention, Emergency Housing (Shelter Stays), Rapid Re-Housing, housing searches, financial management, landlord/tenant education and other supportive services that will help Native families obtain skills that will support their ability to retain long term permanent housing. Through our TBRA program, forty-five (45) Native families will receive rental assistance and fifty (50) will be supported through our Homelessness Prevention, Rapid Re-Housing and/or Emergency Housing assistance program. In 2023, Samish Indian Nation will be looking to purchase a building, as a shelter for homeless citizens. The goal is to ensure that our homeless and/or recently evicted citizens have a safe and stable place to live. Thereafter, they can collaborate with our staff to develop goals and find treatment options, if needed, while our Landlord Engagement and Outreach Coordinator collaborates with them to find housing. We are prepared to offer these services virtually and in person, using social distancing recommendations should we still be in a national pandemic. Activities offered will include assistance preparing a housing search plan and list of local property owners. For those clients that demonstrate that they need more assistance and support to find housing, the supportive service will be provided to meet the level of need. Evaluate the household's current resources, problem-solving abilities, and financial life skills, then provide the appropriate amount of assistance to ensure the greatest chance of successful transition to independence after program exit. When assistance ends, participants should have developed a natural support system, if possible, that will allow them to address obstacles that might later arise with employment, childcare, transportation, or monetary management. Participants will also need to know how to navigate multiple systems, so other housing services should consist of arranging, coordinating, and monitoring the delivery of individualized services to facilitate housing stability. Rather than simply making referrals to programs, there will be times that we will need to walk participants through how to access services on their own and ensure that participants have the skills to access services in the future independently. Connections to Mainstream Resources that are appropriate to addressing barriers to housing retention. Our clients reside in scattered site-housing throughout ten (10) Counties in Western Washington - Clallam, Island, Jefferson, King, Kitsap, Pierce, San Juan, Skagit, Snohomish, and Whatcom. Many of our housing clients live in rural areas and do not have access to public transportation. Although the COVID 19 Pandemic has been declared over, it is still essential for our housing staff will use virtual techniques to make home visits, to review housing stability plans, plan for clients to get transportation to medical appointments and job interviews. Staff members will collaborate with clients to navigate systems such as work source and other necessary appointments to ensure families will become self-sufficient.</p>	
Geographic Distribution	<p>Assistance is distributed in a variety of ways for us to meet the needs and cultural diversity of our families. We</p>	

send information to our families through newsletters, social media, and the housing departments web page. For our Native Elders, developing community relationships with agencies that have Tribal Outreach and Assistance has been and continues to be critical in providing information and assistance to this population. This one-on-one approach has been effective in helping our elders understand the services we provide and how such services can be effective for them. We provide services in ten (10) counties throughout Western Washington - Clallam, Island, Jefferson, King, Kitsap, Pierce, San Juan, Skagit, Snohomish, and Whatcom. We have developed partnerships within our 10-county service area, explaining to other providers who we serve and how to contact us for information regarding the various housing services offered. We are also a part of Skagit, Island and Whatcom Counties Coordinated Entry System- a system designed for all populations that aligns the Single Adult, Family, and Youth into a seamless, collaborative, county-wide platform for housing and service delivery to homeless households. The main objectives of this system are to: 1. Reduce the length of time a family is homeless and permanently house them as quickly as possible, using Rapid Re-housing and linkages to supportive services. 2. Build upon existing community-based infrastructures to serve homeless families, leverage resources, and provide more targeted and cost-effective interventions. Although the COVID-19 Pandemic has been declared over, we continue to be ambassadors in using technology to work with our families to help them reach their housing goals. We also plan to become a part of the Homelessness Management Information System (HMIS) in San Juan County. This will be another resource in helping us identify families in those areas that could benefit from our program. We will continue collaborating with Volunteers of America Western Washington (VOAWW) through their Indian Behavioral Health and Dispute Resolution programs.

## Programs

### 2023-0007 : Development of Emergency Shelter

Program Name:	Development of Emergency Shelter	
Unique Identifier:	2023-0007	
Program Description (continued)	Samish Indian Nation will purchase and rehabilitate a building to be used as shelter for tribal citizens, especially elders and persons that are disabled, living in substandard, overcrowded, or homeless conditions.	
Eligible Activity Number	(7) Development of Emergency Shelters [202(2)]	
Intended Outcome Number	(5) Address homelessness	
APR: Actual Outcome Number	This information is only completed for an APR.	
Who Will Be Assisted	Low-income Native American families enrolled in a federally recognized tribe. Focus will be on elders and persons with a disability that are living in substandard, overcrowded, or homeless conditions.	
Types and Level of Assistance	No set level of assistance per household, but funds will go towards the development of emergency shelter.	
APR : Describe Accomplishments	This information is only completed for an APR.	
Planned and Actual Outputs for 12-Month Program Year	<p><b>Planned</b></p> <p>Number of Households to be served in Year</p> <p>12</p>	<p><b>APR - Actual</b></p> <p>This information is only completed for an APR.</p>
APR: If the program is behind schedule, explain why	This information is only completed for an APR.	

### Uses of Funding:

The Uses of Funding table information can be entered here for each individual program or can be entered for all programs within Section 5(b): Uses of Funding. Changes to data on either page location will update in both Section 3: Program Descriptions and Section 5(b): Uses of Funding accordingly.

Prior and current year IHBG (only) funds to be expended in 12-month program year (L)	Total all other funds to be expended in 12-month program year (M)	Total funds to be expended in 12-month program year (N=L+M)
\$2,483,418.73	\$600,000.00	\$3,083,418.73

#### 2023-0017 : Tenant Based Rental Assistance

Program Name:	Tenant Based Rental Assistance	
Unique Identifier:	2023-0017	
Program Description (continued)	Provides rental assistance to Samish Citizens and enrolled members of Federally recognized Indian tribes living in our ten-county service area. The purpose of the program is to ensure that low-income native families have an opportunity for and access to housing that is responsive to their cultural and physical needs and that is free from any form of discrimination. Additionally, we will work with households to develop and/or increase their economic skills that will demonstrate their ability to maintain stable permanent housing once rental assistance ends. Families will be assigned to a Case Manager that will link them to supportive services that enable participants to increase earned income, reduce or eliminate the need for welfare assistance, and make progress toward achieving economic independence and housing self-sufficiency.	
Eligible Activity Number	(17) Tenant Based Rental Assistance [202(3)]	
Intended Outcome Number	(5) Address homelessness	
APR: Actual Outcome Number	This information is only completed for an APR.	
Who Will Be Assisted	Low-income Native families.	
Types and Level of Assistance	Rental assistance will pay rent in private market rental units. Eligible families will pay no more than 30% of their adjusted gross household income. The Samish Housing Department pays the additional cost of the families rent up to the Fair Market Rent for that area.	
APR : Describe Accomplishments	This information is only completed for an APR.	
Planned and Actual Outputs for 12-Month Program Year	<b>Planned</b>  Number of <b>Households</b> to be served in Year	<b>APR - Actual</b>  This information is only completed for an APR.
APR: If the program is behind schedule, explain why	This information is only completed for an APR.	

#### Uses of Funding:

The Uses of Funding table information can be entered here for each individual program or can be entered for all programs within Section 5(b): Uses of Funding. Changes to data on either page location will update in both Section 3: Program Descriptions and Section 5(b): Uses of Funding accordingly.

Prior and current year IHBG (only) funds to be expended in 12-month program year (L)	Total all other funds to be expended in 12-month program year (M)	Total funds to be expended in 12-month program year (N=L+M)
\$861,909.40		\$861,909.40

#### 2023-0018 : Housing Support Services

Program Name:	Housing Support Services	
Unique Identifier:	2023-0018	
Program Description (continued)	The intent of this program is to work with Native families to understand their unique needs, tailoring our services to move them toward independence and self-sufficiency. Information and resources on budgets, credit repair, basic home housekeeping, how to maintain a rental unit, Landlord/Tenant rights and other information, is just an	

	<p>example of the resources we will provide to families enrolled in our services. To prevent households from becoming homeless by offering short term rental assistance to defray rent and utility bills. For tribal households who are currently homeless to establish stable housing, emergency shelter will be offered for up to four (4) weeks. Emergency assistance will also be used to relocate families when it has been determined that current living situations are not decent, safe, or sanitary. Our clients reside in scattered site-housing throughout ten (10) Counties in Western Washington ¿ Clallam, Island, Jefferson, King, Kitsap, Pierce, San Juan, Skagit, Snohomish, and Whatcom. Many of our housing clients live in rural areas and do not have access to public transportation. Staff will make home visits to review housing stability plans, plan for clients to get transportation to medical appointments and job interviews, if not held virtually. Staff members will collaborate with clients to navigate systems such as work source and other necessary appointments to ensure families will become self-sufficient.</p>		
Eligible Activity Number	(18) Other Housing Service [202(3)]		
Intended Outcome Number	(5) Address homelessness		
APR: Actual Outcome Number	This information is only completed for an APR.		
Who Will Be Assisted	<p>Samish citizens and other Native families enrolled in a federally recognized Indian tribe. Households with or without children who are living temporarily with friends, relatives or households who are facing eviction within 14 days. Households that are forced to live in a place not meant for human habitation. Having no primary nighttime residence. People who are fleeing or attempting to flee a domestic violence situation.</p>		
Types and Level of Assistance	<p>Assistance preparing a housing search plan and list of local property owners. For those clients that demonstrate that they need more assistance and support to find housing, the supportive service will be provided to meet the level of need. Evaluate the household¿s current resources, problem-solving abilities, and financial life skills, then provide the appropriate amount of assistance to ensure the greatest chance of successful transition to independence after program exit. When assistance ends, participants should have developed a natural support system, if possible, that will allow them to address obstacles that might later arise with employments, childcare, transportation, or monetary management. Participants will also need to know how to navigate multiple systems, so ¿other housing services¿ will consist of arranging, coordinating, and monitoring the delivery of individualized services to facilitate housing stability. Rather than simply making referrals to programs, there will be times that we will need to walk participants through how to access services on their own and ensure that participants have the skills to access services in the future independently. Connections to Mainstream Resources ¿ that are appropriate to addressing barriers to housing retention. We will also provide resources and information through our newsletter, webpage, social media and mailings on budgeting, credit repair and debt management. We will also provide information on basic home repair, weatherization, and home safety tips. This information will be available to all our Samish citizens and to other Native families that have access to the internet. Homelessness Prevention - short term rental assistance to defray rent and utility bills. Rapid Re-Housing ¿ quickly move families out of homelessness and into permanent housing. Emergency Assistance - to establish stable housing, emergency shelter will be offered for up to four (4) weeks. Emergency assistance will also be used to relocate families when it has been determined that current living situations are not decent, safe, or sanitary. All services are attached to Case Management and community mainstream resources.</p>		
APR : Describe Accomplishments	This information is only completed for an APR.		
Planned and Actual Outputs for 12-Month Program Year	<b>Planned</b>	<b>APR - Actual</b>	
	Number of	50	This information

	<b>Households to be served in Year</b>	is only completed for an APR.
APR: If the program is behind schedule, explain why	This information is only completed for an APR.	

**Uses of Funding:**

The Uses of Funding table information can be entered here for each individual program or can be entered for all programs within Section 5(b): Uses of Funding. Changes to data on either page location will update in both Section 3: Program Descriptions and Section 5(b): Uses of Funding accordingly.

Prior and current year IHBG (only) funds to be expended in 12-month program year (L)	Total all other funds to be expended in 12-month program year (M)	Total funds to be expended in 12-month program year (N=L+M)
\$226,809.63		\$226,809.63

**2023-0019 : Housing Management**

Program Name:	Housing Management	
Unique Identifier:	2023-0019	
Program Description (continued)	The provision of management services for affordable housing and management of affordable housing projects.	
Eligible Activity Number	(19) Housing Management Services [202(4)]	
Intended Outcome Number	(6) Assist affordable housing for low income households	
APR: Actual Outcome Number	This information is only completed for an APR.	
Who Will Be Assisted	Low-income Native households.	
Types and Level of Assistance	(1) Preparation of work specifications for affordable housing; (2) Inspections for affordable housing; (3) Tenant selection for affordable housing; (4) Management of tenant-based and project-based rental assistance; (5) Mediation programs for landlord-tenant disputes for affordable housing; (6) Hiring of grants writers for affordable housing applications.	
APR : Describe Accomplishments	This information is only completed for an APR.	
Planned and Actual Outputs for 12-Month Program Year	<b>Planned</b>  Number of <b>Households</b> to be served in Year 95	<b>APR - Actual</b>  This information is only completed for an APR.
APR: If the program is behind schedule, explain why	This information is only completed for an APR.	

**Uses of Funding:**

The Uses of Funding table information can be entered here for each individual program or can be entered for all programs within Section 5(b): Uses of Funding. Changes to data on either page location will update in both Section 3: Program Descriptions and Section 5(b): Uses of Funding accordingly.

Prior and current year IHBG (only) funds to be expended in 12-month program year (L)	Total all other funds to be expended in 12-month program year (M)	Total funds to be expended in 12-month program year (N=L+M)
\$136,125.20		\$136,125.20

**Maintaining 1937 Act Units, Demolition, and Disposition**

Maintaining 1937 Act Units	N/A
Demolition and Disposition	N/A

**Budget Information**
**Sources of Funding**

Funding Source	Amount on hand at	Amount to be received	Total sources of funds	Funds to be expended	Unexpended funds
----------------	-------------------	-----------------------	------------------------	----------------------	------------------

	beginning of program year (A)	during 12- month program year (B)	(C=A+B)	during 12- month program year (D)	remaining at end of program year (E=C-D)
<b>IHBG Funds:</b>	\$2,718,256.21	\$1,230,144.00	<b>\$3,948,400.21</b>	\$3,948,400.21	<b>\$0.00</b>
<b>IHBG Program Income:</b>	\$0.00	\$0.00	<b>\$0.00</b>	\$0.00	<b>\$0.00</b>
<b>Title VI:</b>	\$0.00	\$0.00	<b>\$0.00</b>	\$0.00	<b>\$0.00</b>
<b>Title VI Program Income:</b>	\$0.00	\$0.00	<b>\$0.00</b>	\$0.00	<b>\$0.00</b>
<b>1937 Act Operating Reserves:</b>	\$0.00		<b>\$0.00</b>	\$0.00	<b>\$0.00</b>
<b>Carry Over 1937 Act Funds:</b>	\$0.00		<b>\$0.00</b>	\$0.00	<b>\$0.00</b>

**LEVERAGED FUNDS**

<b>ICDBG Funds:</b>	\$0.00	\$0.00	<b>\$0.00</b>	\$0.00	<b>\$0.00</b>
<b>Other Federal Funds:</b>	\$0.00	\$0.00	<b>\$0.00</b>	\$0.00	<b>\$0.00</b>
<b>LIHTC:</b>	\$0.00	\$0.00	<b>\$0.00</b>	\$0.00	<b>\$0.00</b>
<b>Non-Federal Funds:</b>	\$600,000.00	\$0.00	<b>\$600,000.00</b>	\$600,000.00	<b>\$0.00</b>
<b>Total:</b>	<b>\$3,318,256.21</b>	<b>\$1,230,144.00</b>	<b>\$4,548,400.21</b>	<b>\$4,548,400.21</b>	<b>\$0.00</b>

**Uses of Funding**

Program Name	Unique Identifier	Prior and current year IHBG (only) funds to be expended in 12- month program year (L)	Total all other funds to be expended in 12- month program year (M)	Total funds to be expended in 12- month program year (N=L+M)
<b>Development of Emergency Shelter</b>	2023-0007	\$2,483,418.73	\$600,000.00	\$3,083,418.73
<b>Tenant Based Rental Assistance</b>	2023-0017	\$861,909.40		\$861,909.40
<b>Housing Support Services</b>	2023-0018	\$226,809.63		\$226,809.63
<b>Housing Management</b>	2023-0019	\$136,125.20		\$136,125.20
<b>Planning and Administration</b>		\$240,137.25	\$0.00	\$240,137.25
<b>Loan Repayment (describe in 3 &amp; 4 below)</b>		\$0.00	\$0.00	\$0.00
<b>Total</b>		<b>\$3,948,400.21</b>	<b>\$600,000.00</b>	<b>\$4,548,400.21</b>

APR	We will use the following funds to purchase and rehab a building that will be used as an Emergency Shelter for Native Elders and persons with a disability that are homeless. \$600,000 of Tribal funding and \$624,608 from our Indian Housing Block Grant - American Rescue Plan Act.
APR	The answer to this question is only requested for an APR.

**Other Submission Items**

Useful Life/Affordability Period(s)	\$5,000 - \$15,000 5 Years; \$15,001 - \$40,000 10 Years; \$40,001 and over 15 Years; New Construction or Acquisition 20 Years
Model Housing and Over-Income Activities	Does not Apply
Tribal and Other Indian Preference Does the tribe have a preference policy?	YES  Samish Tribal Citizens will have first preference to all services offered under the Housing Department. If funds



	allow, we will offer services to other tribal citizens, enrolled in a federally recognized Indian tribe, that reside in our ten county service area											
Anticipated Planning and Administration Expenses Do you intend to exceed your allowable spending cap for Planning and Administration?	NO											
Actual Planning and Administration Expenses Did you exceed your allowable spending cap for Planning and Administration?	The answer to this question is only requested for an APR.											
Does the tribe have an expanded formula area?:	NO											
Total Expenditures on Affordable Housing Activities:	<table><tr><td></td><td>All AIAN Households</td><td>AIAN Households with Incomes 80% or Less of Median Income</td></tr><tr><td>IHBG Funds</td><td>\$0.00</td><td>\$0.00</td></tr><tr><td>Funds from Other Sources</td><td>\$0.00</td><td>\$0.00</td></tr></table>				All AIAN Households	AIAN Households with Incomes 80% or Less of Median Income	IHBG Funds	\$0.00	\$0.00	Funds from Other Sources	\$0.00	\$0.00
	All AIAN Households	AIAN Households with Incomes 80% or Less of Median Income										
IHBG Funds	\$0.00	\$0.00										
Funds from Other Sources	\$0.00	\$0.00										
For each separate formula area, list the expended amount	The answer to this question is only requested for an APR.											

#### Indian Housing Plan Certification Of Compliance

In accordance with applicable statutes, the recipient certifies that it will comply with Title II of the Civil Rights Act of 1968, Section 504 of the Rehabilitation Act of 1973, the Age Discrimination Act of 1975, and other federal statutes, to the extent that they apply to tribes and TDHEs, see 24 CFR 1000.12.	YES
In accordance with 24 CFR 1000.328, the recipient receiving less than \$200,000 under FCAS certifies that there are households within its jurisdiction at or below 80 percent of median income.	YES
The recipient will maintain adequate insurance coverage for housing units that are owned and operated or assisted with grant amounts provided under NAHASDA, in compliance with such requirements as may be established by HUD:	YES
Policies are in effect and are available for review by HUD and the public governing the eligibility, admission, and occupancy of families for housing assisted with grant amounts provided under NAHASDA:	YES
Policies are in effect and are available for review by HUD and the public governing rents charged, including the methods by which such rents or homebuyer payments are determined, for housing assisted with grant amounts provided under NAHASDA:	YES
Policies are in effect and are available for review by HUD and the public governing the management and maintenance of housing assisted with grant amounts provided under NAHASDA:	YES

#### Tribal Wage Rate Certification

1. You will use tribally determined wage rates when required for IHBG-assisted construction or maintenance activities. The Tribe has appropriate laws and regulations in place in order for it to determine and distribute prevailing wages.	YES
2. You will use Davis-Bacon or HUD determined wage rates when required for IHBG-assisted construction or maintenance activities.	
3. You will use Davis-Bacon and/or HUD determined wage rates when required for IHBG-assisted construction except for the activities described below.	

4. List the activities using tribally determined wage rates:

# **SAMISH INDIAN NATION SELF-MONITORING AND EVALUATION POLICY**

## **Samish Tribal Code §13.600 TABLE OF CONTENTS**

### **§13.600      INTRODUCTION**

On September 26, 1996, President Clinton signed into law the Native American Housing Assistance and Self-Determination Act of 1996 (NAHASDA). This law authorized or amended programs administered by the Office of Native American Programs. Program regulations which implement this law are found at 24 CFR part 1000.

### **§13.601      MONITORING RESPONSIBILITIES**

The Samish Indian Nation ("Tribe") is responsible for monitoring grant activities to ensure compliance with applicable Federal requirements and monitoring performance goals under the Indian Housing Plan ("IHP"). Pursuant to § 1000.502(a), these responsibilities include self-monitoring and the monitoring of sub-recipients.

HUD responsibilities for reviewing recipients are set forth in § 1000.520 as referenced in § 1000.502(c). HUD monitoring will consist of on-site review and off-site review of records, reports and audits [§1000.502(d)]. Section 1000.520 requires HUD to review, at least annually, each recipient's performance to determine whether it has carried out its eligible activities in a timely manner, has carried out its eligible activities and certifications in accordance with the requirements and the primary objective of NAHASDA and with other applicable laws, and whether the recipient has a continuing capacity to carry out those activities in a timely manner.

### **§13.602      ANNUAL MONITORING**

The Samish Indian Nation shall complete self-monitoring annually. The self-monitoring will be conducted by the Controller, Compliance Officer, and Housing Department Staff, as applicable, before the close of the program year. Applicable sections of the self-monitoring forms offered by HUD will be utilized to complete this internal monitoring.

### **§13.603      REPORT OF SELF-MONITORING RESULTS**

A Self-Monitoring Results Report will be completed annually and submitted to Tribal Council for review. This report will outline each self-monitoring section completed, any issues or events of non-compliance found in that section, and the corrective plan for each issue or event.



**Resolution 2022-10-003**

**Approve the Housing Committee to work with Housing Director on the revision and development of Policies for Samish Housing Services.**

Approved October 5th, 2022

- WHEREAS** the Samish Indian Nation was federally re-acknowledged by the Assistant Secretary of the Department of the Interior of the United States of America on April 6, 1996;
- WHEREAS** the Samish Tribal Council is empowered to act on behalf of the Samish Indian Nation pursuant to Article VI, Section 2, of the Samish Tribal Constitution, approved November 14, 2003, by Resolution of the Samish Tribal Council and adopted and ratified by Vote of the Samish General Council on March 2, 2004, and recognized by the Assistant Secretary for Indian Affairs, David W. Anderson on April 20, 2004;
- WHEREAS** the health, safety, welfare and education of the citizens and family members of the Samish Indian Nation is the responsibility of the Tribal Council of the Samish Indian Nation;
- WHEREAS** the Samish Tribal Council determined the Housing Committee will work with the Housing Director to revise and develop policies for Samish Housing Services;

**THEREFORE BE IT RESOLVED by the Samish Tribal Council:**

1. The Tribal Council of the Samish Indian Nation hereby appoints the Housing Committee to work with the Housing Director to revise and develop policies for Samish Housing Services.

**SAMISH TRIBAL COUNCIL**

By:

**Thomas D. Wooten**  
Tribal Council Chairman

**CERTIFICATION**

The above resolution was duly adopted by the Samish Tribal Council on the 5th day of October, 2022, at which time a quorum was present, by a vote of:  
5 FOR, 0 AGAINST, 0 ABSTAIN.

Certified

by:

**Dana M. Matthews**  
Tribal Council Secretary



September 8, 2022

**To:** Samish Indian Nation Tribal Council  
**cc:** Dana Matthews, Health, and Human Services Director  
**From:** Sharon Paskewitz, Housing Director  
**Subject: Housing Committee**

I am writing to you for I would like to start working with the Housing Committee regarding policy revisions and development for the services offered under the housing department.

The last time I worked with the Housing Committee was in 2018. Since that time, NAHASDA, HUD and State regulations have changed. These changes have required us to update our policies.

The policies I would like the Committee to collaborate with me on is:

- Tenant Based Rental Assistance (TBRA) program.
- Tribal Homelessness Prevention and Rapid Re-housing
- Samish Xwch'angteng Housing Program

Should you have any questions and/or need additional information, please feel free to contact me.

Thank you for your consideration.

# Inspection Form

## Housing Choice Voucher Program

U.S. Department of Housing  
and Urban Development  
Office of Public and Indian Housing

OMB Approval No. 2577-0169  
(exp. 04/30/2018)

Public reporting burden for this collection of information is estimated to average 0.25 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. This agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless that collection displays a valid OMB control number.

**Privacy Act Statement.** The Department of Housing and Urban Development (HUD) is authorized to collect the information required on this form by Section 8 of the U.S. Housing Act of 1937 (42 U.S.C. 1437f). Collection of the name and address of both the family and the owner is mandatory. The information is used to determine if a unit meets the housing quality standards of the section 8 rental assistance program. HUD may disclose this information to Federal, State and local agencies when relevant to civil, criminal, or regulatory investigations and prosecutions. It will not be otherwise disclosed or released outside of HUD, except as permitted or required by law. Failure to provide any of the information may result in delay or rejection of family participation.

Assurances of confidentiality are not provided under this collection.

This collection of information is authorized under Section 8 of the U.S. Housing Act of 1937 (42 U.S.C. 1437f).  
a unit meets the housing quality standards of the section 8 rental assistance program.

The information is used to determine if

PHA	Tenant ID Number	Date of Request (mm/dd/yyyy)
Inspector	Date Last Inspection (mm/dd/yyyy)	Date of Inspection (mm/dd/yyyy)
Neighborhood/Census Tract	Type of Inspection <input type="checkbox"/> Initial <input type="checkbox"/> Special <input type="checkbox"/> Reinspection	Project Number

### A. General Information

Street Address of Inspected Unit

City County State Zip

Name of Family Current Telephone of Family

Current Street Address of Family

City County State Zip

Number of Children in Family Under 6  
If there is a child in the home under the age of 6,  
please complete Page 20

Name of Owner or Agent Authorized to Lease Unit Inspected Telephone of Owner or Agent

Address of Owner or Agent

Housing Type (check as appropriate)

- ☐ Single Family Detached
- ☐ Duplex or Two Family Row
- ☐ House or Town House
- ☐ Low Rise: 3,4 Stories, Including Garden Apartment
- ☐ High Rise; 5 or More Stories
- ☐ Manufactured Home
- ☐ Congregate
- ☐ Cooperative
- ☐ Independent Group Residence
- ☐ Single Room Occupancy
- ☐ Shared Housing
- ☐ Other:(Specify)

Year Building Was Built Confirmed By the Following Source(s):

Source Means - County Assessors Office; Secondary Zillow, Redfin, etc.

Save and Attach the Source Documentation  
in Client File: HUD Inspection Folder

Case Manager Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Team Lead / Housing Director Signature:

Confirming that the following has been reviewed and/or completed:

\*Source Documentation

\*Children <6

\*Page 20 (Section 20 Common Areas)

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

## B. Summary Decision on the Unit

(to be completed after the form has been filled in)

### Housing Quality Standard Pass or Fail

☐ 1. **Fail** If there are any checks under the column headed "Fail" the unit fails the minimum housing quality standards. Discuss with the owner the repairs noted that would be necessary to bring the unit up to the standard.

☐ 2. **Inconclusive** If there are no checks under the column headed "Fail" and there are checks under the column headed "Inconclusive," obtain additional information necessary for a decision (question owner or tenant as indicated in the item instructions given in this checklist). Once additional information is obtained, change the rating for the item and record the date of verification at the far right of the form.

☐ 3. **Pass** If neither (1) nor (2) above is checked, the unit passes the minimum housing quality standards. Any additional conditions described in the right hand column of the form should serve to (a) establish the precondition of the unit, (b) indicate possible additional areas to negotiate with the owner, (c) aid in assessing the reasonableness of the rent of the unit, and (d) aid the tenant in deciding among possible units to be rented. The tenant is responsible for deciding whether he or she finds these conditions acceptable.

**Unit Size:** Count the number of bedrooms for purposes of the FMR or Payment Standard. Record in the box provided.

**Year Constructed:** Enter from Line 5 of the Request for Tenancy Approval form. Record in the box provided.

**Number of Sleeping Rooms:** Count the number of rooms which could be used for sleeping, as identified on the checklist. Record in the box provided.

### C. How to Fill Out This Checklist

Complete the checklist on the unit to be occupied (or currently occupied) by the tenant. Proceed through the inspection as follows:

Area	Checklist Category
room by room	1. Living Room 2. Kitchen 3. Bathroom 4. All Other Rooms Used for Living 5. All Secondary Rooms Not Used for Living
basement or utility room	6. Heating & Plumbing
outside	7. Building Exterior
overall	8. General Health & Safety

Each part of the checklist will be accompanied by an explanation of the item to be inspected.

**Important:** For each item numbered on the checklist, **check one box only** (e.g., check one box only for item 1.4 "Security" in the Living Room.)

In the space to the right of the description of the item, if the decision on the item is: "Fail" write what repairs are necessary; If "Inconclusive" write in details.

Also, if "Pass" but there are some conditions present that need to be brought to the attention of the owner or the tenant, write these in the space to the right.

If it is an annual inspection, record to the right of the form any repairs made since the last inspection. If possible, record reason for repair (e.g., ordinary maintenance, tenant damage).

If it is a complaint inspection, fill out only those checklist items for which complaint is lodged. Determine, if possible, tenant or owner cause.

Once the checklist has been completed, return to Part B (Summary Decision on the Unit).

Previous editions are obsolete

## 1. Living Room

### 1.1 Living Room Present

Note: If the unit is an efficiency apartment, consider the living room present.

### 1.2 Electricity

In order to qualify, the outlets must be present and properly installed in the baseboard, wall or floor of the room. Do not count a single duplex receptacle as two outlets, i.e., there must be **two** of these in the room, or **one** of these **plus a permanently installed ceiling or wall light fixture**.

Both the outlets and/or the light must be working. Usually, a room will have sufficient lights or electrical appliances plugged into outlets to determine workability. Be sure light fixture does not fail just because the bulb is burned out.

Do not count any of the following items or fixtures as outlets/fixtures: Table or floor lamps (these are **not** permanent light fixtures); ceiling lamps plugged into socket; extension cords.

If the electric service to the unit has been temporarily turned off check "Inconclusive." Contact owner or manager after inspection to verify that electricity functions properly when service is turned on. Record this information on the checklist.

### 1.3 Electrical Hazards

Examples of what this means: broken wiring; non-insulated wiring; frayed wiring; improper types of wiring, connections or insulation; wires lying in or located near standing water or other unsafe places; light fixture hanging from electric wiring without other firm support or fixture; missing cover plates on switches or outlets; badly cracked outlets; exposed fuse box connections; overloaded circuits evidenced by frequently "blown" fuses (ask the tenant).

Check "Inconclusive" if you are uncertain about severity of the problem and seek expert advice.

### 1.4 Security

"Accessible to outside" means: doors open to the outside or to a common public hall; windows accessible from the outside (e.g. basement and first floor); windows or doors leading onto a fire escape, porch or other outside place that can be reached from the ground.

"Lockable" means: the window or door has a properly working lock, or is nailed shut, or the window is not designed to be opened. A storm window lock that is working properly is acceptable. Windows that are nailed shut are acceptable only if these windows are not needed for ventilation or as an alternate exit in case of fire.

### 1.5 Window Condition

Rate the windows in the room (including windows in doors).

"Severe deterioration" means that the window no longer has the capacity to keep out the wind and the rain or is a cutting hazard. Examples are: missing or broken-out panes; dangerously loose cracked panes; windows that will not close; windows that, when closed, do not form a reasonably tight seal.

If more than one window in the room is in this condition, give details in the space provided on the right of the form.

If there is only "moderate deterioration" of the windows the item should "Pass." "Moderate deterioration" means windows which are reasonably weather-tight, but show evidence of some aging, abuse, or lack of repair. Signs of deterioration are: minor crack in window pane; splintered sill; signs of some minor rotting in the window frame or the window itself; window panes loose because of missing window putty. Also for deteriorated and peeling paint see 1.9. If more than one window is in this condition, give details in the space provided on the right of the form.

## 1.6 Ceiling Condition

“Unsound or hazardous” means the presence of such serious defects that either a potential exists for structural collapse or that large cracks or holes allow significant drafts to enter the unit. The condition includes: severe bulging or buckling; large holes; missing parts; falling or in danger of falling loose surface materials (other than paper or paint).

Pass ceilings that are basically sound but have some nonhazardous defects, including: small holes or cracks; missing or broken ceiling tiles; water stains; soiled surfaces; unpainted surfaces; peeling paint (for peeling paint see item 1.9).

## 1.7 Wall Condition

“Unsound or hazardous” includes: serious defects such that the structural safety of the building is threatened, such as severe buckling, bulging or leaning; damaged or loose structural members; large holes; air infiltration.

Pass walls that are basically sound but have some nonhazardous defects, including: small or shallow holes; cracks; loose or missing parts; unpainted surfaces; peeling paint (for peeling paint see item 1.9).

## 1.8 Floor Condition

“Unsound or hazardous” means the presence of such serious defects that a potential exists for structural collapse or other threats to safety (e.g., stripping) or large cracks or holes allow substantial drafts from below the floor. The condition includes: severe buckling or major movements under walking stress; damaged or missing parts.

Pass floors that are basically sound but have some nonhazardous defects, including: heavily worn or damaged floor surface (for example, scratches or gouges in surface, missing portions of tile or linoleum, previous water damage). If there is a floor covering, also note the condition, especially if badly worn or soiled. If there is a floor covering, including paint or sealant, also note the conditions, specially if badly worn, soiled or peeling (for peeling paint, see 1.9).

## 1.9 Lead-Based Paint

Housing Choice Voucher Units If the unit was built January 1, 1978, or after, no child under age six will occupy or currently occupies it, is a 0-BR, elderly or handicapped unit with no children under age six on the lease or expected, has been certified lead-based paint free by a certified lead-based paint inspector (no lead-based paint present or no lead-based paint present after removal of lead-based paint.), check NA and do not inspect painted surfaces.

This requirement applies to all painted surfaces (building components) within the unit. (Do not include tenant belongings). Surfaces to receive a visual assessment for deteriorated paint include walls, floors, ceilings, built in cabinets (sink bases), baseboards, doors, door frames, windows systems including mullions, sills, or frames and any other painted building component within the unit. Deteriorated paint includes any painted surface that is peeling, chipping, chalking, cracking, damaged or otherwise separated from the substrate.

All deteriorated paint surfaces **more than 2 sq. ft. in any one interior room or space, or more than 10% of the total surface area of an interior type of component with a small surface area (i.e., window sills, baseboards, and trim)** must be stabilized (corrected) in accordance with all safe work practice requirements and clearance is required. **If the deteriorated painted surface is less than 2 sq. ft. or less than 10% of the component, only stabilization is required. Clearance testing is not required.** Stabilization means removal of deteriorated paint, repair of the substrate, and application of a new protective coating or paint. Lead-Based Paint Owner Certification is required following stabilization activities, except for *de minimis level* repairs.



## 1. Living Room

For each numbered item, check one box only.

Item No.	Description	Decision			If Fail, what repairs are necessary? If Inconclusive, give details. If Pass with comments, give details.	If Fail or Inconclusive, date (mm/dd/yyyy) of final approval
		Yes, Pass	No, Fail	Inconclusive		
<b>1.1 Living Room Present</b>	Is there a living room?	<input type="checkbox"/>	<input type="checkbox"/>			
<b>1.2 Electricity</b>	Are there at least two working outlets or one working outlet and one working light fixture?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
<b>1.3 Electrical Hazards</b>	Is the room free from electrical hazards?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
<b>1.4 Security</b>	Are all windows and doors that are accessible from the outside lockable?	<input type="checkbox"/>	<input type="checkbox"/>			
<b>1.5 Window Condition</b>	Is there at least one window, and are all windows free of signs of severe deterioration or missing or broken out panes?	<input type="checkbox"/>	<input type="checkbox"/>			
<b>1.6 Ceiling Condition</b>	Is the ceiling sound and free from hazardous defects?	<input type="checkbox"/>	<input type="checkbox"/>			
<b>1.7 Wall Condition</b>	Are the walls sound and free from hazardous defects?	<input type="checkbox"/>	<input type="checkbox"/>			
<b>1.8 Floor Condition</b>	Is the floor sound and free from hazardous defects?	<input type="checkbox"/>	<input type="checkbox"/>			
<b>1.9 Lead-Based Paint</b>	Are all painted surfaces free of deteriorated paint?	<input type="checkbox"/>	<input type="checkbox"/>			
	If no, does deteriorated surfaces exceed two square feet and/or more than 10% of a component?	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/> Not Applicable	

**Additional Comments:** (Give Item Number)

Comments continued on a separate page Yes ☐ No ☐

## 2. Kitchen

### 2.1 Kitchen Area Present

Note: A kitchen is an area used for preparation of meals. It may be either a separate room or an area of a larger room (for example, a kitchen area in an efficiency apartment).

### 2.2 - 2.9 Explanation for these items is the same as that provided for "Living Room" with the following modifications:

#### 2.2 Electricity

Note: The requirement is that at least one outlet and one permanent light fixture are present and working.

#### 2.5 Window Condition

Note: The absence of a window does not fail this item in the kitchen. If there is no window, check "Pass."

### 2.10 Stove or Range with Oven

Both an oven and a stove (or range) with top burners must be present and working. If either is missing and you know that the owner is responsible for supplying these appliances, check "Fail." Put check in "Inconclusive" column if the tenant is responsible for supplying the appliances and he or she has not yet moved in. Contact tenant or prospective tenant to gain verification that facility will be supplied and is in working condition. Hot plates are not acceptable substitutes for these facilities.

An oven is not working if it will not heat up. To be working a stove or range must have all burners working and knobs to turn them off and on. Under "working condition," also look for hazardous gas hook-ups evidenced by strong gas smells; these should fail. (Be sure that this condition is not confused with an unlit pilot light -a condition that should be noted, but does not fail.)

If both an oven and a stove or range are present, but the gas or electricity are turned off, check "Inconclusive." Contact owner or manager to get verification that facility works when gas is turned on. If both an oven and a stove or range are present and working, but defects exist, check "Pass" and note these to the right of the form. Possible defects are marked, dented, or scratched surfaces; cracked burner ring; limited size relative to family needs.

A microwave oven may be substituted for a tenant-supplied oven and stove (or range).

A microwave oven may be substituted for an owner-supplied oven and stove (or range) if the tenant agrees and microwave ovens are furnished instead of ovens and stoves (or ranges) to both subsidized and unsubsidized tenants in the building or premises.

### 2.11 Refrigerator

If no refrigerator is present, use the same criteria for marking either "Fail" or "Inconclusive" as were used for the oven and stove or range.

A refrigerator is not working if it will not maintain a temperature low enough to keep food from spoiling over a reasonable period of time. If the electricity is turned off, mark "Inconclusive." Contact owner (or tenant if unit is occupied) to get verification of working condition.

If the refrigerator is present and working but defects exist, note these to the right of the form. Possible minor defects include: broken or missing interior shelving; dented or scratched interior or exterior surfaces; minor deterioration of door seal; loose door handle.

### 2.12 Sink

If a permanently attached kitchen sink is not present in the kitchen or kitchen area, mark "Fail." A sink in a bathroom or a portable basin will not satisfy this requirement. A sink is not working unless it has running hot and cold water from the faucets and a properly connected and properly working drain (with a "gas trap"). In a vacant apartment, the hot water may have been turned off and there will be no hot water. Mark this "Inconclusive." Check with owner or manager to verify that hot water is available when service is turned on.

If a working sink has defects, note this to the right of the item. Possible minor defects include: dripping faucet; marked, dented, or scratched surface; slow drain; missing or broken drain stopper.

### 2.13 Space for Storage, Preparation, and Serving of Food

Some space must be available for the storage, preparation, and serving of food. If there is no built-in space for food storage and preparation, a table used for food preparation and a portable storage cabinet will satisfy the requirement. If there is no built-in space, and no room for a table and portable cabinet, check "Inconclusive" and discuss with the tenant. The tenant makes the final determination as to whether or not this space is acceptable.

If there are some minor defects, check "Pass" and make notes to the right. Possible defects include: marked, dented, or scratched surfaces; broken shelving or cabinet doors; broken drawers or cabinet hardware; limited size relative to family needs.

## 2. Kitchen

For each numbered item, check one box only.

Item No.	Description	Decision			If Fail, what repairs are necessary? If Inconclusive, give details. If Pass with comments, give details.	If Fail or Inconclusive, date (mm/dd/yyyy) of final approval
		Yes, Pass	No, Fail	Inconclusive		
<b>2.1 Kitchen Area Present</b>	Is there a kitchen?	<input type="checkbox"/>	<input type="checkbox"/>			
<b>2.2 Electricity</b>	Are there at least one working outlet and one working, permanently installed light fixture?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
<b>2.3 Electrical Hazards</b>	Is the kitchen free from electrical hazards?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
<b>2.4 Security</b>	Are all windows and doors that are accessible from the outside lockable?	<input type="checkbox"/>	<input type="checkbox"/>			
<b>2.5 Window Condition</b>	Are all windows free of signs of deterioration or missing or broken out panes?	<input type="checkbox"/>	<input type="checkbox"/>			
<b>2.6 Ceiling Condition</b>	Is the ceiling sound and free from hazardous defects?	<input type="checkbox"/>	<input type="checkbox"/>			
<b>2.7 Wall Condition</b>	Are the walls sound and free from hazardous defects?	<input type="checkbox"/>	<input type="checkbox"/>			
<b>2.8 Floor Condition</b>	Is the floor sound and free from hazardous defects?	<input type="checkbox"/>	<input type="checkbox"/>			
<b>2.9 Lead-Based Paint</b>	Are all painted surfaces free of deteriorated paint? If no, does deteriorated surfaces exceed two square feet and/or less than 10% of a component?	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/> Not Applicable	
<b>2.10 Stove or Range with Oven</b>	Is there a working oven, and a stove (or range) with top burners that work? If no oven and stove (or range) are present, is there a microwave oven and, if microwave is owner-supplied, do other tenants have microwaves instead of an oven and stove (or range)?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
<b>2.11 Refrigerator</b>	Is there a refrigerator that works and maintains a temperature low enough so that food does not spoil over a reasonable period of time?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
<b>2.12 Sink</b>	Is there a kitchen sink that works with hot and cold running water?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
<b>2.13 Space for Storage, Preparation, and Serving of Food</b>	Is there space to store, prepare, and serve food?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		

**Additional Comments:** (Give Item Number)(Use an additional page if necessary)

Comments continued on a separate page Yes ☐ No ☐

### 3. Bathroom

#### 3.1 Bathroom Present

Most units have easily identifiable bathrooms (i.e., a separate room with toilet, washbasin and tub or shower). In some cases, however, you will encounter units with scattered bathroom facilities (i.e., toilet, washbasin and tub or shower located in separate parts of the unit). At a minimum, there must be an enclosure around the toilet. In this case, count the enclosure around the toilet as the bathroom and proceed with 3.2-3.9 below, with respect to this enclosure. If there is more than one bathroom that is normally used, rate the one that is in best condition for Part 3. If there is a second bathroom that is also used, complete Part 4 of the checklist for this room. (See Inspection Manual for additional notes on rating the second bathroom.)

#### 3.2 - 3.9 Explanation for these items is the same as that provided for "Living Room" with the following modifications:

##### 3.2 Electricity

Note: The requirement is that at least one permanent light fixture is present and working

##### 3.3 Electrical Hazards

Note: In addition to the previously mentioned hazards, outlets that are located where water might splash or collect are considered an electrical hazard.

##### 3.5 Window Condition

Note: The absence of a window does not fail this item in the bathroom (see item 3.13, Ventilation, for relevance of window with respect to ventilation). If there is no window, but a working vent system is present, check "Pass."

##### 3.7 Wall Condition

Note: Include under nonhazardous defects (that would pass, but should be noted) the following: broken or loose tile; deteriorated grouting at tub/wall and tub/floor joints, or tiled surfaces; water stains.

##### 3.8 Floor Condition

Note: Include under nonhazardous defects (that would pass, but should be noted) the following: missing floor tiles; water stains.

#### 3.10 Flush Toilet in Enclosed Room in Unit

The toilet must be contained within the unit, be in proper operating condition, and be available for the exclusive use of the occupants of the unit (i.e., outhouses or facilities shared by occupants of other units are not acceptable). It must allow for privacy.

Not working means: the toilet is not connected to a water supply; it is not connected to a sewer drain; it is clogged; it does not have a trap; the connections, vents or traps are faulty to the extent that severe leakage of water or escape of gases occurs; the flushing mechanism does not function properly. If the water to the unit has been turned off, check "Inconclusive." Obtain verification from owner or manager that facility works properly when water is turned on.

Comment to the right of the form if the toilet is "present, exclusive, and working," but has the following types of defects: constant running; chipped or broken porcelain; slow draining.

If drain blockage is more serious and occurs further in the sewer line, causing backup, check item 7.6, "Fail," under the plumbing and heating part of the checklist. A sign of serious sewer blockage is the presence of numerous backed-up drains.

#### 3.11 Fixed Wash Basin or Lavatory in Unit

The wash basin must be permanently installed (i.e., a portable wash basin does not satisfy the requirement). Also, a kitchen sink used to pass the requirements under Part 2 of the checklist (kitchen facilities) cannot also serve as the bathroom wash basin. The wash basin may be located separate from the other bathroom facilities (e.g., in a hallway).

Not working means: the wash basin is not connected to a system that will deliver hot and cold running water; it is not connected to a properly operating drain; the connectors (or vents or traps) are faulty to the extent that severe leakage of water or escape of sewer gases occurs. If the water to the unit or the hot water unit has been turned off, check "Inconclusive." Obtain verification from owner or manager that the system is in working condition.

Comment to the right of the form if the wash basin is "present and working," but has the following types of minor defects: insufficient water pressure; dripping faucets; minor leaks; cracked or chipped porcelain; slow drain (see discussion above under 3.10).

#### 3.12 Tub or Shower in Unit

Not present means that neither a tub nor shower is present in the unit. Again, these facilities need not be in the same room with the rest of the bathroom facilities. They must, however, be private.

Not working covers the same requirements detailed above for wash basin (3.11).

Comment to the right of the form if the tub or shower is present and working, but has the following types of defects: dripping faucet; minor leaks; cracked porcelain; slow drain (see discussion under 3.10); absent or broken support rod for shower curtain.

#### 3.13 Ventilation

Working vent systems include: ventilation shafts (non-mechanical vents) and electric fans. Electric vent fans must function when switch is turned on. (Make sure that any malfunctions are not due to the fan not being plugged in.) If electric current to the unit has not been turned on (and there is no operable window), check "Inconclusive." Obtain verification from owner or manager that system works. Note: exhaust vents must be vented to the outside, attic, or crawlspace.

### 3. Bathroom

For each numbered item, check one box only.

Item No.	Description	Decision			If Fail, what repairs are necessary? If Inconclusive, give details. If Pass with comments, give details.	If Fail or Inconclusive, date (mm/dd/yyyy) of final approval
		Yes, Pass	No, Fail	Inconclusive		
<b>3.1 Bathroom Present</b> (See description)	Is there a bathroom?	<input type="checkbox"/>	<input type="checkbox"/>			
<b>3.2 Electricity</b>	Is there at least one permanently installed light fixture?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
<b>3.3 Electrical Hazards</b>	Is the bathroom free from electrical hazards?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
<b>3.4 Security</b>	Are all windows and doors that are accessible from the outside lockable?	<input type="checkbox"/>	<input type="checkbox"/>			
<b>3.5 Window Condition</b>	Are all windows free of signs of deterioration or missing or broken out panes?	<input type="checkbox"/>	<input type="checkbox"/>			
<b>3.6 Ceiling Condition</b>	Is the ceiling sound and free from hazardous defects?	<input type="checkbox"/>	<input type="checkbox"/>			
<b>3.7 Wall Condition</b>	Are the walls sound and free from hazardous defects?	<input type="checkbox"/>	<input type="checkbox"/>			
<b>3.8 Floor Condition</b>	Is the floor sound and free from hazardous defects?	<input type="checkbox"/>	<input type="checkbox"/>			
<b>3.9 Lead-Based Paint</b>	Are all painted surfaces free of deteriorated paint? If no, does deteriorated surfaces exceed two square feet and/or more than 10% of a component?	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/> Not Applicable	
<b>3.10 Flush Toilet in Enclosed Room in Unit</b>	Is there a working toilet in the unit for the exclusive private use of the tenant?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
<b>3.11 Fixed Wash Basin or Lavatory in Unit</b>	Is there a working, permanently installed wash basin with hot and cold running water in the unit?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
<b>3.12 Tub or Shower</b>	Is there a working tub or shower with hot and cold running water in the unit?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
<b>3.13 Ventilation</b>	Are there operable windows or a working vent system?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		

**Additional Comments:** (Give Item Number)(Use an additional page if necessary)

Comments continued on a separate page Yes ☐ No ☐

## 4. Other Room Used for Living and Halls

Complete an "Other Room" checklist for as many "other rooms used for living" as are present in the unit and not already noted in Parts 1, 2, and 3 of the checklist. See the discussion below for definition of "used for living." Also complete an "Other Room" checklist for all entrance halls, corridors, and staircases that are located within the unit and are part of the area used for living. If a hall, entry and/or stairway are contiguous, rate them as a whole (i.e., as part of one space).

Additional forms for rating "Other Rooms" are provided in the check-list.

**Definition of "used for living."** Rooms "used for living" are areas of the unit that are walked through or lived in on a regular basis. Do not include rooms or other areas that have been permanently, or near permanently, closed off or areas that are infrequently entered. For example, do not include a utility room, attached shed, attached closed-in porch, basement, or garage if they are closed off from the main living area or are infrequently entered. Do include any of these areas if they are frequently used (e.g., a finished basement/play-room, a closed-in porch that is used as a bedroom during summer months). Occasional use of a washer or dryer in an otherwise unused room does not constitute regular use.

If the unit is vacant and you do not know the eventual use of a particular room, complete an "Other Room" checklist if there is any chance that the room will be used on a regular basis. If there is no chance that the room will be used on a regular basis, do not include it (e.g., an unfinished basement) since it will be checked under Part 5, All Secondary Rooms (Rooms not used for living).

### 4.1 Room Code and Room Location

Enter the appropriate room code given below:

#### Room Codes:

- 1 Bedroom or any other room used for sleeping (regardless of type of room)
- 2 = Dining Room or Dining Area
- 3 = Second Living Room, Family Room, Den, Playroom, TV Room
- 4 = Entrance Halls, Corridors, Halls, Staircases
- 5 = Additional Bathroom (also check presence of sink trap and clogged toilet)
- 6 = Other

**Room Location:** Write on the line provided the location of the room with respect to the unit's width, length and floor level as if you were standing outside the unit facing the entrance to the unit:

right/left/center: record whether the room is situated to the right, left, or center of the unit.

front/rear/center: record whether the room is situated to the back, front or center of the unit.

floor level: identify the floor level on which the room is located.

If the unit is vacant, you may have some difficulty predicting the eventual use of a room. Before giving any room a code of 1 (bedroom), the room must meet all of the requirements for a "room used for sleeping" (see items 4.2 and 4.5).

### 4.2 - 4.9 Explanations of these items are the same as those provided for "Living Room" with the following modifications:

#### 4.2 Electricity/Illumination

If the room code is not a "1," the room must have a means of natural or artificial illumination such as a permanent light fixture, wall outlet present, or light from a window in the room or near the room. If any required item is missing, check "Fail." If the electricity is turned off, check "Inconclusive."

#### 4.5 Window Condition

Any room used for sleeping must have at least one window. If the windows in sleeping rooms are designed to be opened, at least one window must be operable. The minimum standards do not require a window in "other rooms." Therefore, if there is no window in another room not used for sleeping, check "Pass," and note "no window" in the area for comments.

#### 4.6 Smoke Detectors

At least one battery-operated or hard-wired smoke detector must be present and working on each level of the unit, including the basement, but not the crawl spaces and unfinished attic.

Smoke detectors must be installed in accordance with and meet the requirements of the National Fire Protection Association Standard (NFPA) 74 (or its successor standards).

If the dwelling unit is occupied by any hearing-impaired person, smoke detectors must have an alarm system designed for hearing-impaired persons as specified in NFPA 74 (or successor standards).

If the unit was under HAP contract prior to April 24, 1993, owners who installed battery-operated or hard-wired smoke detectors in compliance with HUD's smoke detector requirements, including the regulations published on July 30, 1992 (57 FR 33846), will not be required subsequently to comply with any additional requirements mandated by NFPA 74 (i.e. the owner would not be required to install a smoke detector in a basement not used for living purposes, nor would the owner be required to change the location of the smoke detectors that have already been installed on the other floors of the unit). In this case, check "Pass" and note under comments.

### Additional Notes

For staircases, the adequacy of light and condition of the stair rails and railings is covered under Part 8 of the checklist (General Health and Safety)

#### 4. Other Rooms Used for Living and Halls For each numbered item, check one box only.

##### 4.1 Room Location

\_\_\_\_\_ right/left/center: the room is situated to the right, left, or center of the unit.

\_\_\_\_\_ front/rear/center: the room is situated to the back, front or center of the unit.

\_\_\_\_\_ floor level: the floor level on which the room is located.

##### Room Code

- ☐ 1 = Bedroom or Any Other Room Used for Sleeping (regardless of type of room)
- ☐ 2 = Dining Room or Dining Area
- ☐ 3 = Second Living Room, Family Room, Den, Playroom, TV Room
- ☐ 4 = Entrance Halls, Corridors, Halls, Staircases
- ☐ 5 = Additional Bathroom (also check presence of sink trap and clogged toilet)
- ☐ 6 = Other:

Item No.	Description	Decision			If Fail, what repairs are necessary? If Inconclusive, give details. If Pass with comments, give details.	If Fail or Inconclusive, date (mm/dd/yyyy) of final approval
		Yes, Pass	No, Fail	Inconclusive		
<b>4.2 Electricity/Illumination</b>	If Room Code is a 1, are there at least two working outlets or one working outlet and one working, permanently installed light fixture?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
	If Room Code is not a 1, is there a means of illumination?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
<b>4.3 Electrical Hazards</b>	Is the room free from electrical hazards?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
<b>4.4 Security</b>	Are all windows and doors that are accessible from the outside lockable?	<input type="checkbox"/>	<input type="checkbox"/>			
<b>4.5 Window Condition</b>	If Room Code is a 1, is there at least one window?	<input type="checkbox"/>	<input type="checkbox"/>			
	And, regardless of Room Code, are all windows free of signs of severe deterioration or missing or broken-out panes?	<input type="checkbox"/>	<input type="checkbox"/>			
<b>4.6 Ceiling Condition</b>	Is the ceiling sound and free from hazardous defects?	<input type="checkbox"/>	<input type="checkbox"/>			
<b>4.7 Wall Condition</b>	Are the walls sound and free from hazardous defects?	<input type="checkbox"/>	<input type="checkbox"/>			
<b>4.8 Floor Condition</b>	Is the floor sound and free from hazardous defects?	<input type="checkbox"/>	<input type="checkbox"/>			
<b>4.9 Lead-Based Paint</b>	Are all painted surfaces free of deteriorated paint?	<input type="checkbox"/>	<input type="checkbox"/>			
	If no, does deteriorated surfaces exceed two square feet and/or more than 10% of a component?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Not Applicable		
<b>4.10 Smoke Detectors</b>	Is there a working smoke detector on each level?	<input type="checkbox"/>	<input type="checkbox"/>			
	Do the smoke detectors meet the requirements of NFPA 74?	<input type="checkbox"/>	<input type="checkbox"/>			
	In units occupied by the hearing impaired, is there an alarm system connected to the smoke detector?	<input type="checkbox"/>	<input type="checkbox"/>			

**Additional Comments:** (Give Item Number)(Use an additional page if necessary)

Comments continued on a separate page Yes ☐ No ☐

#### 4. Supplemental for Other Rooms Used for Living and Halls

For each numbered item, check one box only.

##### 4.1 Room Location

\_\_\_\_\_ right/left/center: the room is situated to the right, left, or center of the unit.  
 \_\_\_\_\_ front/rear/center: the room is situated to the back, front or center of the unit.  
 \_\_\_\_\_ floor level: the floor level on which the room is located.

##### Room Code

- ☐ 1 = Bedroom or Any Other Room Used for Sleeping (regardless of type of room)  
☐ 2 = Dining Room or Dining Area  
☐ 3 = Second Living Room, Family Room, Den, Playroom, TV Room  
☐ 4 = Entrance Halls, Corridors, Halls, Staircases  
☐ 5 = Additional Bathroom (also check presence of sink trap and clogged toilet)  
☐ 6 = Other:

Item No.	Description	Decision			If Fail, what repairs are necessary? If Inconclusive, give details. If Pass with comments, give details.	If Fail or Inconclusive, date (mm/dd/yyyy) of final approval
		Yes, Pass	No, Fail	Inconclusive		
<b>4.2 Electricity/Illumination</b>	If Room Code is a 1, are there at least two working outlets or one working outlet and one working, permanently installed light fixture? If Room Code is not a 1, is there a means of illumination?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
<b>4.3 Electrical Hazards</b>	Is the room free from electrical hazards?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
<b>4.4 Security</b>	Are all windows and doors that are accessible from the outside lockable?	<input type="checkbox"/>	<input type="checkbox"/>			
<b>4.5 Window Condition</b>	If Room Code is a 1, is there at least one window? And, regardless of Room Code, are all windows free of signs of severe deterioration or missing or broken-out panes?	<input type="checkbox"/>	<input type="checkbox"/>			
<b>4.6 Ceiling Condition</b>	Is the ceiling sound and free from hazardous defects?	<input type="checkbox"/>	<input type="checkbox"/>			
<b>4.7 Wall Condition</b>	Are the walls sound and free from hazardous defects?	<input type="checkbox"/>	<input type="checkbox"/>			
<b>4.8 Floor Condition</b>	Is the floor sound and free from hazardous defects?	<input type="checkbox"/>	<input type="checkbox"/>			
<b>4.9 Lead-Based Paint</b>	Are all painted surfaces free of deteriorated paint? If no, does deteriorated surfaces exceed two square feet and/or more than 10% of a component?	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/> Not Applicable	
<b>4.10 Smoke Detectors</b>	Is there a working smoke detector on each level? Do the smoke detectors meet the requirements of NFPA 74? In units occupied by the hearing impaired, is there an alarm system connected to the smoke detector?	<input type="checkbox"/>	<input type="checkbox"/>			

**Additional Comments:** (Give Item Number)(Use an additional page if necessary)

Comments continued on a separate page Yes ☐ No ☐



#### 4. Supplemental for Other Rooms Used for Living and Halls

For each numbered item, check one box only.

##### 4.1 Room Location

\_\_\_\_\_ right/left/center: the room is situated to the right, left, or center of the unit.  
 \_\_\_\_\_ front/rear/center: the room is situated to the back, front or center of the unit.  
 \_\_\_\_\_ floor level: the floor level on which the room is located.

##### Room Code

- ☐ 1 = Bedroom or Any Other Room Used for Sleeping (regardless of type of room)  
☐ 2 = Dining Room or Dining Area  
☐ 3 = Second Living Room, Family Room, Den, Playroom, TV Room  
☐ 4 = Entrance Halls, Corridors, Halls, Staircases  
☐ 5 = Additional Bathroom (also check presence of sink trap and clogged toilet)  
☐ 6 = Other:

Item No.	Description	Decision			If Fail, what repairs are necessary? If Inconclusive, give details. If Pass with comments, give details.	If Fail or Inconclusive, date (mm/dd/yyyy) of final approval
		Yes, Pass	No, Fail	Inconclusive		
<b>4.2 Electricity/Illumination</b>	If Room Code is a 1, are there at least two working outlets or one working outlet and one working, permanently installed light fixture? If Room Code is not a 1, is there a means of illumination?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
<b>4.3 Electrical Hazards</b>	Is the room free from electrical hazards?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
<b>4.4 Security</b>	Are all windows and doors that are accessible from the outside lockable?	<input type="checkbox"/>	<input type="checkbox"/>			
<b>4.5 Window Condition</b>	If Room Code is a 1, is there at least one window? And, regardless of Room Code, are all windows free of signs of severe deterioration or missing or broken-out panes?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
<b>4.6 Ceiling Condition</b>	Is the ceiling sound and free from hazardous defects?	<input type="checkbox"/>	<input type="checkbox"/>			
<b>4.7 Wall Condition</b>	Are the walls sound and free from hazardous defects?	<input type="checkbox"/>	<input type="checkbox"/>			
<b>4.8 Floor Condition</b>	Is the floor sound and free from hazardous defects?	<input type="checkbox"/>	<input type="checkbox"/>			
<b>4.9 Lead-Based Paint</b>	Are all painted surfaces free of deteriorated paint? If no, does deteriorated surfaces exceed two square feet and/or more than 10% of a component?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Not Applicable	
<b>4.10 Smoke Detectors</b>	Is there a working smoke detector on each level? Do the smoke detectors meet the requirements of NFPA 74? In units occupied by the hearing impaired, is there an alarm system connected to the smoke detector?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		

**Additional Comments:** (Give Item Number)(Use an additional page if necessary)

Comments continued on a separate page Yes ☐ No ☐

#### 4. Supplemental for Other Rooms Used for Living and Halls

For each numbered item, check one box only.

##### 4.1 Room Location

\_\_\_\_\_ right/left/center: the room is situated to the right, left, or center of the unit.  
 \_\_\_\_\_ front/rear/center: the room is situated to the back, front or center of the unit.  
 \_\_\_\_\_ floor level: the floor level on which the room is located.

##### Room Code

- 1 = Bedroom or Any Other Room Used for Sleeping (regardless of type of room)  
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 5 = Additional Bathroom (also check presence of sink trap and clogged toilet)  
 6 = Other:

Item No.	Description	Decision			If Fail, what repairs are necessary? If Inconclusive, give details. If Pass with comments, give details.	If Fail or Inconclusive, date (mm/dd/yyyy) of final approval
		Yes, Pass	No, Fail	Inconclusive		
<b>4.2 Electricity/Illumination</b>	If Room Code is a 1, are there at least two working outlets or one working outlet and one working, permanently installed light fixture? If Room Code is not a 1, is there a means of illumination?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
<b>4.3 Electrical Hazards</b>	Is the room free from electrical hazards?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
<b>4.4 Security</b>	Are all windows and doors that are accessible from the outside lockable?	<input type="checkbox"/>	<input type="checkbox"/>			
<b>4.5 Window Condition</b>	If Room Code is a 1, is there at least one window? And, regardless of Room Code, are all windows free of signs of severe deterioration or missing or broken-out panes?	<input type="checkbox"/>	<input type="checkbox"/>			
<b>4.6 Ceiling Condition</b>	Is the ceiling sound and free from hazardous defects?	<input type="checkbox"/>	<input type="checkbox"/>			
<b>4.7 Wall Condition</b>	Are the walls sound and free from hazardous defects?	<input type="checkbox"/>	<input type="checkbox"/>			
<b>4.8 Floor Condition</b>	Is the floor sound and free from hazardous defects?	<input type="checkbox"/>	<input type="checkbox"/>			
<b>4.9 Lead-Based Paint</b>	Are all painted surfaces free of deteriorated paint? If no, does deteriorated surfaces exceed two square feet and/or more than 10% of a component?	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/> Not Applicable	
<b>4.10 Smoke Detectors</b>	Is there a working smoke detector on each level? Do the smoke detectors meet the requirements of NFPA 74? In units occupied by the hearing impaired, is there an alarm system connected to the smoke detector?	<input type="checkbox"/>	<input type="checkbox"/>			

**Additional Comments:** (Give Item Number)(Use an additional page if necessary)

Comments continued on a separate page Yes ☐ No ☐

## 5. All Secondary Rooms (Rooms not used for living)

### 5. Secondary Rooms (Rooms not used for living)

If any room in the unit did not meet the requirements for "other room used for living" in Part 4, it is to be considered a "secondary room (not used for living)." Rate all of these rooms together (i.e., a single Part 5 checklist for all secondary rooms in the unit).

Inspection is required of the following two items since hazardous defects under these items could jeopardize the rest of the unit, even if present in rooms not used for living: 5.2 Security, 5.3 Electrical Hazards. Also, be observant of any other potentially hazardous features in these rooms and record under 5.4

#### 5.1 None

If there are no "Secondary Rooms (rooms not used for living)," check "None" and go on to Part 6.

#### 5.2 - 5.4 Explanations of these items is the same as those provided for "Living Room"

#### Additional Note

In recording "other potentially hazardous features," note (in the space provided) the means of access to the room with the hazard and check the box under "Inconclusive." Discuss the hazard with the HA inspection supervisor to determine "Pass" or "Fail." Include defects like: large holes in floor, walls or ceilings; evidence of structural collapse; windows in condition of severe deterioration; and deteriorated paint surfaces.

## 6. Building Exterior

### 6.1 Condition of Foundation

"Unsound or hazardous" means foundations with severe structural defects indicating the potential for structural collapse; or foundations that allow significant entry of ground water (for example, evidenced by flooding of basement).

### 6.2 Condition of Stairs, Rails, and Porches

"Unsound or hazardous" means: stairs, porches, balconies, or decks with severe structural defects; broken, rotting, or missing steps; absence of a handrail when there are extended lengths of steps (generally four or more consecutive steps); absence of or insecure railings around a porch or balcony which is approximately 30 inches or more above the ground.

### 6.3 Condition of Roof and Gutters

"Unsound and hazardous" means: The roof has serious defects such as serious buckling or sagging, indicating the potential of structural collapse; large holes or other defects that would result in significant air or water infiltration (in most cases severe exterior defects will be reflected in equally serious surface defects within the unit, e.g., buckling, water damage). The gutters, downspouts and soffits (area under eaves) shows serious decay and have allowed the entry of significant air or water into the interior of the structure. Gutters and downspouts are, however, not required to pass. If the roof is not observable and there is no sign of interior water damage, check "Pass."

### 6.4 Condition of Exterior Surfaces

See definition above for roof, item 6.3.

### 6.5 Condition of Chimney

The chimney should not be seriously leaning or showing evidence of significant disintegration (i.e., many missing bricks).

### 6.6 Lead-Based Paint: Exterior Surfaces

Housing Choice Voucher Units If the unit was built January 1, 1978 or after, no child under age six will occupy or currently occupies, is a 0-BR, elderly or handicapped unit with no children under age six on the lease or expected, has been certified lead-based paint free by a certified lead-based paint inspector (no lead-based paint present or no lead-based paint present after removal of lead), check NA and do not inspect painted surfaces. Visual assessment for deteriorated paint applies to all exterior painted surfaces (building components) associated with the assisted unit including windows, window sills, exterior walls, floors, porches, railings, doors, decks, stairs, play areas, garages, fences or other areas if frequented by children under age six.

All deteriorated paint surfaces **more than 20 sq. ft. on exterior surfaces** must be stabilized (corrected) in accordance with all safe work practice requirements. **If the painted surface is less than 20 sq. ft., only stabilization is required. Clearance testing is not required.** Stabilization means removal of deteriorated paint, repair of the substrate, and application of a new protective coating or paint. Lead-Based Paint Owner Certification is required following stabilization activities except for *de minimis level* repairs.

### 6.7 Manufactured Homes: Tie Downs

Manufactured homes must be placed on a site in a stable manner and be free from hazards such as sliding and wind damage. Manufactured homes must be securely anchored by a tie down device which distributes and transfers the loads imposed by the unit to appropriate ground anchors so as to resist wind overturning and sliding, unless a variation has been approved by the HUD Field Office.

## 5. All Secondary Rooms (Rooms not used for living) For each numbered item, check one box only.

Item No.	Description	Decision			If Fail, what repairs are necessary? If Inconclusive, give details. If Pass with comments, give details.	If Fail or Inconclusive, date (mm/dd/yyyy) of final approval
		Yes, Pass	No, Fail	Inconclusive		
5.1	None <input type="checkbox"/> Go to Part 6					
5.2	<b>Security</b> Are all windows and doors that are accessible from the outside lockable?	<input type="checkbox"/>	<input type="checkbox"/>			
5.3	<b>Electrical Hazards</b> Are all these rooms free from electrical hazards?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
5.4	<b>Other Potentially Hazardous Features</b> Are all of these rooms free of any other potentially hazardous features? For each room with an "other potentially hazardous feature," explain the hazard and the means of control of interior access to the room.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
6.0	<b>Building Exterior</b>					
6.1	<b>Condition of Foundation</b> Is the foundation sound and free from hazards?	<input type="checkbox"/>	<input type="checkbox"/>			
6.2	<b>Condition of Stairs, Rails, and Porches</b> Are all the exterior stairs, rails, and porches sound and free from hazards?	<input type="checkbox"/>	<input type="checkbox"/>			
6.3	<b>Condition of Roof and Gutters</b> Are the roof, gutters, and downspouts sound and free from hazards?	<input type="checkbox"/>	<input type="checkbox"/>			
6.4	<b>Condition of Exterior Surfaces</b> Are exterior surfaces sound and free from hazards?	<input type="checkbox"/>	<input type="checkbox"/>			
6.5	<b>Condition of Chimney</b> Is the chimney sound and free from hazards?	<input type="checkbox"/>	<input type="checkbox"/>			
6.6	<b>Lead-Based Paint: Exterior Surfaces</b> Are all painted surfaces free of deteriorated paint? If no, does deteriorated surfaces exceed 20 sq. ft. of total exterior surface area?	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/> Not Applicable	
6.7	<b>Manufactured Homes: Tie Downs</b> If the unit is a manufactured home, is it properly placed and tied down? If not a manufactured home, check "Not Applicable."	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/> Not Applicable	

**Additional Comments:** (Give Item Number)(Use an additional page if necessary)

Comments continued on a separate page Yes ☐ No ☐

## 7. Heating and Plumbing

### 7.1 Adequacy of Heating Equipment

"Adequate heat" means that the heating system is capable of delivering enough heat to assure a healthy environment in the unit (appropriate to the climate). The HA is responsible for defining what constitutes a healthy living environment in the area of the country in which it operates. Local codes (city or state codes) should be instructive in arriving at a reasonable local definition. For example, for heat adequacy, local codes often require that the unit's heating facility be capable of maintaining a given temperature level during a designated time period. Portable electric room heaters or kitchen stoves or ranges with a built-in heat unit are not acceptable as a primary source of heat for units located in areas where climate conditions require regular heating.

"Directly or indirectly to all rooms used for living" means:

"Directly" means that each room used for living has a heat source (e.g., working radiator; working hot air register; baseboard heat)

"Indirectly" means that, if there is no heat source present in the room, heat can enter the room easily from a heated adjacent room (e.g. a dining room may not have a radiator, but would receive heat from the heated living room through a large open archway).

If the heating system in the unit works, but there is some question whether a room without a heat source would receive adequate indirect heat, check "Inconclusive" and verify adequacy from tenant or owner (e.g., unheated bedroom at the end of a long hallway).

How to determine the capability of the heating system: If the unit is occupied, usually the quickest way to determine the capability of the heating system over time is to question the tenant. If the unit is not occupied, or the tenant has not lived in the unit during the months when heat would be needed, check "Inclusive." It will be necessary to question the owner on this point after the inspection has been completed and, if possible, to question other tenants (if it is a multi-unit structure) about the adequacy of heat provided. Under some circumstances, the adequacy of heat can be determined by a simple comparison of the size of the heating system to the area to be heated. For example, a small permanently installed space heater in a living room is probably inadequate for heating anything larger than a relatively small apartment.

### 7.2 Safety of Heating Equipment

Examples of "unvented fuel burning space heaters" are: portable kerosene units; unvented open flame portable units.

"Other unsafe conditions" include: breakage or damage to heating system such that there is a potential for fire or other threats to safety; improper connection of flues allowing exhaust gases to enter the living area; improper installation of equipment (e.g., proximity of fuel tank to heat source, absence of safety devices); indications of improper use of equipment (e.g., evidence of heavy build-up of soot, creosote, or other substance in the chimney); disintegrating equipment; combustible materials near heat source or flue. See Inspection Manual for a more detailed discussion of the inspection of safety aspects of the heating systems.

If you are unable to gain access to the primary heating system in the unit check "Inconclusive." Contact the owner or manager for verification of safety of the system. If the system has passed a recent local inspection, check "Pass." This applies especially to units in which heat is provided by a large scale, complex central heating system that serves multiple units (e.g., a boiler in the basement of a large apartment building). In most cases, a large scale heating system for a multi-unit building will be subject to periodic safety inspections by a local public agency. Check with the owner or manager to determine the date and outcome of the last such inspection, or look for an inspection certificate posted on the heating system.

### 7.3 Ventilation and Adequacy of Cooling

If the tenant is present and has occupied the unit during the summer months, inquire about the adequacy of air flow. If the tenant is not present or has not occupied the unit during the summer months, test a sample of windows to see that they open (see Inspection Manual for instruction).

"Working cooling equipment" includes: central (fan) ventilation system; evaporative cooling system; room or central air conditioning.

Check "Inconclusive" if there are no operable windows and it is impossible, or inappropriate, to test whether a cooling system works. Check with other tenants in the building (in a multi-unit structure) and with the owner or manager for verification of the adequacy of ventilation and cooling.

### 7.4 Water Heater

"Location presents hazard" means that the gas or oil water heater is located in living areas or closets where safety hazards may exist (e.g., water heater located in very cluttered closet with cloth and paper items stacked against it). Gas water heaters in bedrooms or other living areas must have safety dividers or shields.

Water heaters must have a temperature- pressure relief valve and discharge line (directed toward the floor or outside of the living area) as a safeguard against build up of steam if the water heater malfunctions. If not, they are not properly equipped and shall fail.

To pass, gas or oil fired water heaters must be vented into a properly installed chimney or flue leading outside. Electric water heaters do not require venting.

If it is impossible to view the water heater, check "Inconclusive."

Obtain verification of safety of system from owner or manager.

Check "Pass" if the water heater has passed a local inspection. This applies primarily to hot water that is supplied by a large scale complex water heating system that serves multiple units (e.g., water heating system in large apartment building). Check in the same manner described for heating system safety, item 7.2, above.

### 7.5 Water Supply

If the structure is connected to a city or town water system, check "Pass." If the structure has a private water supply (usually in rural areas) inquire into the nature of the supply (probably from the owner) and whether it is approvable by an appropriate public agency.

**General note:** If items 7.5, 7.6, or 7.7 are checked "Inconclusive," check with owner or manager for verification of adequacy.

### 7.6 Plumbing

"Major leaks" means that main water drain and feed pipes (often located in the basement) are seriously leaking. (Leaks present at specific facilities have already been evaluated under the checklist items for "Bathroom" and "Kitchen.")

"Corrosion" (causing serious and persistent levels of rust or contamination in the drinking water) can be determined by observing the color of the drinking water at several taps. Badly corroded pipes will produce noticeably brownish water. If the tenant is currently occupying the unit, he or she should be able to provide information about the persistence of this condition. (Make sure that the "rusty water" is not a temporary condition caused by city or town maintenance of main water lines.) See general note under 7.5.

### 7.7 Sewer Connection

If the structure is connected to the city or town sewer system, check "Pass." If the structure has its own private disposal system (e.g., septic field), inquire into the nature of the system and determine whether this type of system can meet appropriate health and safety regulations.

The following conditions constitute "evidence of sewer back up": strong sewer gas smell in the basement or outside of unit; numerous clogged or very slow drains; marshy areas outside of unit above septic field. See general note under 7.5.

## 7. Heating and Plumbing

For each numbered item, check one box only.

Item No.	Description	Decision			If Fail, what repairs are necessary? If Inconclusive, give details. If Pass with comments, give details.	If Fail or Inconclusive, date (mm/dd/yyyy) of final approval
		Yes, Pass	No, Fail	Inconclusive		
<b>7.1 Adequacy of Heating Equipment</b>	Is the heating equipment capable of providing adequate heat (either directly or indirectly) to all rooms used for living?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
<b>7.2 Safety of Heating Equipment</b>	Is the unit free from unvented fuel burning space heaters or any other types of unsafe heating conditions?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
<b>7.3 Ventilation and Adequacy of Cooling</b>	Does the unit have adequate ventilation and cooling by means of openable windows or a working cooling system?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
<b>7.4 Water Heater</b>	Is the water heater located, equipped, and installed in a safe manner?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
<b>7.5 Water Supply</b>	Is the unit served by an approvable public or private sanitary water supply?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
<b>7.6 Plumbing</b>	Is plumbing free from major leaks or corrosion that causes serious and persistent levels of rust or contamination of the drinking water?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
<b>7.7 Sewer Connection</b>	Is plumbing connected to an approvable public or private disposal system, and is it free from sewer back-up?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		

**Additional Comments:** (Give Item Number)

Comments continued on a separate page Yes ☐ No ☐

## 8. General Health and Safety

### 8.1 Access to Unit

“Through another unit” means that access to the unit is only possible by means of passage through another dwelling unit.

### 8.2 Exits

“Acceptable fire exit” means that the building must have an alternative means of exit that meets local or State regulations in case of fire; this could include:

An openable window if the unit is on the first floor or second floor or easily accessible to the ground.

A back door opening on to a porch with a stairway leading to the ground.

Fire escape, fire ladder, or fire stairs.

“Blocked” means that the exit is not useable due to conditions such as debris, storage, door or window nailed shut, broken lock.

Important note: The HA has the final responsibility for deciding whether the type of emergency exit is acceptable, although the tenant should assist in making the decision.

### 8.3 Evidence of Infestation

“Presence of rats, or severe infestation by mice or vermin” (such as roaches) is evidenced by: rat holes; droppings; rat runs; numerous settings of rat poison. If the unit is occupied, ask the tenant,

### 8.4 Garbage and Debris

“Heavy accumulation” means large piles of trash and garbage, discarded furniture, and other debris (not temporarily stored awaiting removal) that might harbor rodents. This may occur inside the unit, in common areas, or outside. It usually means a level of accumulation beyond the capacity of an individual to pick up within an hour or two.

### 8.5 Refuse Disposal

“Adequate covered facilities” includes: trash cans with covers, garbage chutes, “dumpsters” (i.e., large scale refuse boxes with lids); trash bags (if approvable by local public agency). “Approvable by local public agency” means that the local Health and Sanitation Department (city, town or county) approves the type of facility in use. Note: During the period when the HA is setting up its inspection program, it will check with the local health and sanitation department to determine which types of facilities are acceptable and include this in the inspection requirements.

If the unit is vacant and there are no adequate covered facilities present, check “Inconclusive.” Contact the owner or manager for verification of facilities provided when the unit is occupied.

### 8.6 Interior Stairs and Common Halls

“Loose, broken, or missing steps” should fail if they present a serious risk of tripping or falling.

A handrail is required on extended sections of stairs (generally four or more consecutive steps). A railing is required on unprotected heights such as around stairwells.

“Other hazards” would be conditions such as bare electrical wires and tripping hazards.

**Housing Choice Voucher Units** If the unit was built January 1, 1978, or after, no child under six will occupy or currently occupies it, is a 0-BR, elderly or handicapped unit with no children under six on the lease or expected, has been certified lead-based paint free by a certified lead-based paint inspector (no lead-based paint present or no lead-based paint present after removal of lead-based paint.), check NA and do not inspect painted surfaces.

This requirement applies to all painted surfaces (building components) within the unit. (Do not include tenant belongings). Surfaces to receive a visual assessment for deteriorated paint include walls, floors, ceilings, built in cabinets (sink bases), baseboards, doors, door frames, windows systems including

mullions, sills, or frames and any other painted building component within the unit. Deteriorated paint includes any painted surface that is peeling, chipping, chalking, cracking, damaged or otherwise separated from the substrate.

All deteriorated paint surfaces **more than 2 sq. ft. in any one interior room or space, or more than 10% of the total surface area of an interior type of component with a small surface area (i.e., window sills, baseboards, and trim)** must be stabilized (corrected) in accordance with all safe work practice requirements and clearance is required. **If the deteriorated painted surface is less than 2 sq. ft. or less than 10% of the component, only stabilization is required. Clearance testing is not required.** Stabilization means removal of deteriorated paint, repair of the substrate, and application of a new protective coating or paint. Lead-Based Paint Owner Certification is required following stabilization activities, except for *de minimis level* repairs.

### 8.7 Other Interior Hazards

Examples of other hazards might be: a broken bathroom fixture with a sharp edge in a location where it represents a hazard; a protruding nail in a doorway.

### 8.8 Elevators

Note: At the time the HA is setting up its inspection program, it will determine local licensing practices for elevators. Inspectors should then be aware of these practices in evaluating this item (e.g., check inspection date). If no elevator check “Not Applicable.”

### 8.9 Interior Air Quality

If the inspector has any questions about whether an existing poor air quality condition should be considered dangerous, he or she should check with the local Health and Safety Department (city, town or county).

### 8.10 Site and Neighborhood Conditions

Examples of conditions that would “seriously and continuously endanger the health or safety of the residents” are:

- other buildings on, or near the property, that pose serious hazards (e.g., dilapidated shed or garage with potential for structural collapse),
- evidence of flooding or major drainage problems,
- evidence of mud slides or large land settlement or collapse,
- proximity to open sewage,
- unprotected heights (cliffs, quarries, mines, sandpits),
- fire hazards,
- abnormal air pollution or smoke which continues throughout the year and is determined to seriously endanger health, and
- continuous or excessive vibration of vehicular traffic (if the unit is occupied, ask the tenant).

### 8.11 Lead-Based Paint: Owner Certification

If the owner is required to correct any lead-based paint hazards at the property including deteriorated paint or other hazards identified by a visual assessor, a certified lead-based paint risk assessor, or certified lead-based paint inspector, the PHA must obtain certification that the work has been done in accordance with all applicable requirements of 24 CFR Part 35. The Lead-Based Paint Owner Certification must be received by the PHA before the execution of the HAP contract or within the time period stated by the PHA in the owner HQS violation notice. Receipt of the completed and signed Lead-Based Paint Owner Certification signifies that all HQS lead-based paint requirements have been met and no re-inspection by the HQS inspector is required.

## 8. General Health and Safety

For each numbered item, check one box only.

Item No.	Description	Decision			If Fail, what repairs are necessary? If Inconclusive, give details. If Pass with comments, give details.	If Fail or Inconclusive, date (mm/dd/yyyy) of final approval
		Yes, Pass	No, Fail	Inconclusive		
<b>8.1 Access to Unit</b>	Can the unit be entered without having to go through another unit?	<input type="checkbox"/>	<input type="checkbox"/>			
<b>8.2 Exits</b>	Is there an acceptable fire exit from this building that is not blocked?	<input type="checkbox"/>	<input type="checkbox"/>			
<b>8.3 Evidence of Infestation</b>	Is the unit free from rats or severe infestation by mice or vermin?	<input type="checkbox"/>	<input type="checkbox"/>			
<b>8.4 Garbage and Debris</b>	Is the unit free from heavy accumulation of garbage or debris inside and outside?	<input type="checkbox"/>	<input type="checkbox"/>			
<b>8.5 Refuse Disposal</b>	Are there adequate covered facilities for temporary storage and disposal of food wastes, and are they approvable by a local agency?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
<b>8.6 Interior Stairs and Common Halls</b>	Are interior stairs and common halls free from hazards to the occupant because of loose, broken, or missing steps on stairways; absent or insecure railings; inadequate lighting; or other hazards?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
<b>8.7 Other Interior Hazards</b>	Is the interior of the unit free from any other hazard not specifically identified previously?	<input type="checkbox"/>	<input type="checkbox"/>			
<b>8.8 Elevators</b>	Where local practice requires, do all elevators have a current inspection certificate? If local practice does not require this, are they working and safe?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Not Applicable	
<b>8.9 Interior Air Quality</b>	Is the unit free from abnormally high levels of air pollution from vehicular exhaust, sewer gas, fuel gas, dust, or other pollutants?	<input type="checkbox"/>	<input type="checkbox"/>			
<b>8.10 Site and Neighborhood Conditions</b>	Are the site and immediate neighborhood free from conditions which would seriously and continuously endanger the health or safety of the residents?	<input type="checkbox"/>	<input type="checkbox"/>			
<b>8.11 Lead-Based Paint: Owner Certification</b>	If the owner of the unit is required to correct any deteriorated paint or lead-based paint hazards at the property, has the Lead-Based Paint Owner's Certification been completed, and received by the PHA? If the owner was not required to correct any deteriorated paint or lead-based paint hazards, check NA.	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/> Not Applicable	

**Additional Comments:** (Give Item Number)

Comments continued on a separate page Yes ☐ No ☐





This page is to be completed if the household has a child or children under the age of 6.

The purpose for completing this section of the HUD Inspection is to ensure the tribe / TDHE has established procedures to eliminate, as far as practicable, lead-based paint hazards in housing occupied by families receiving the tenant-based rental assistance that have children under the age of 6 living in the unit.

Client Identification Number: \_\_\_\_\_

Date of Inspection: \_\_\_\_\_

<b>20 Common Areas</b> <b>Check One Box ONLY</b>	If <b>PASS</b> , give comments and details. If <b>FAIL</b> , what repairs are necessary? If <b>INCONCLUSIVE</b> , give details.	If <b>FAIL</b> or <b>INCONCLUSIVE</b> , Date (mm/dd/yyyy) of Final Approval.
<b>20.1 Hallways</b> Are all painted surfaces free of deteriorated paint? <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> INCONCLUSIVE <b>PASS FAIL</b>		
<b>20.2 Stairways</b> Are all painted surfaces free of deteriorated paint? <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> INCONCLUSIVE <b>PASS FAIL</b>		
<b>20.3 Laundry Room</b> Are all painted surfaces free of deteriorated paint? <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> INCONCLUSIVE <b>PASS FAIL</b>		
<b>20.4 Recreational Room</b> Are all painted surfaces free of deteriorated paint? <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> INCONCLUSIVE <b>PASS FAIL</b>		
<b>20.5 Playgrounds</b> Are all painted surfaces free of deteriorated paint? <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> INCONCLUSIVE <b>PASS FAIL</b>		
<b>20.6 Community Centers</b> Are all painted surfaces free of deteriorated paint? <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> INCONCLUSIVE <b>PASS FAIL</b>		
<b>20.7 On-Site Day Care</b> Are all painted surfaces free of deteriorated paint? <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> INCONCLUSIVE <b>PASS FAIL</b>		





## Housing

### Vision

To see that every tribal citizen can access housing that meets their individual needs and is free from any form of discrimination.

### Mission Statement

To provide affordable, decent, safe and sanitary housing for Tribal members through supportive and orderly community development; offer services that support social, physical and community housing activities and education to promote harmony, cooperation and values.

### News From Our Housing Department



988 Suicide and Crisis Lifeline

Some Samish Indian Nation Housing Department programs are limited to specific service areas. The Samish Indian Nation's ten county service area covers Clallam, Island, Jefferson, King, Kitsap, Pierce, San Juan, Skagit, Snohomish, and Whatcom.

Program	Description
Homelessness Prevention	<p>Have you received a Three-Day Notice to Pay or Vacate? Are you facing eviction for nonpayment of rent?</p> <p>This might be the program for you. If eligible, we may be able to assist you in catching up on past due amounts. <a href="#">Click for more detail.</a></p>

Program	Description
Rapid Re-Housing	<p>Are you living in an overcrowded situation? Are you living in your car or van or tent? Have you just lost your home?</p> <p>This might be the program for you. If eligible, we may be able to assist you in finding a new place to live, financial assistance, and budgeting. Click for more detail.</p>
Tenant Based Rental Assistance (TBRA)	<p>Having trouble finding an affordable place to live? Are you having trouble paying rent each month?</p> <p>This might be the program for you. If eligible, we may be able to find you a more affordable place to live and/or assist with rental payments. Click for more detail.</p>
Swoleqwelh	<p>Have you recently had an unexpected expense to where you are having trouble making your housing/rent payments? Are your monthly housing/rent payments so high you are unable to tend to cultural needs or attend cultural events?</p> <p>This might be the program for you. This is a grant-funded program to support citizens in maintaining housing goals as well as expanding cultural and tribal involvement. Click for more detail.</p>
Low Income Home Energy Assistance Program (LIHEAP)	<p>Heating bill too high? Electric bill unmanageable? Are you an elder, person with a disability, or have someone under the age of 6 years old with you and need cooling in the summer or heat in the winter?</p> <p>This might be the program for you. If eligible, this program can help you with weatherization, energy payments, and help you be more energy efficient. Click for more detail.</p>
Emergency Food Assistance Program (EFAP)	<p>Running out of food before your next paycheck? Unable to afford healthy foods?</p> <p>This might be the program for you. If eligible, this program supplies vouchers and/or bulk purchases for citizens. Click for more detail.</p>
COVID-19 Flex funding	<p>Have you been impacted by COVID-19? Lost your job or decreased hours due to COVID-19? Unable to purchase food, clothes, or other necessary items?</p> <p>This might be the program for you. If eligible, this program covers rent, office supplies, utility assistance, childcare, etc. Contact for more detail.</p>

## Housing and Program Policies

- ▶ Tenant Based Rental Assistance Draft Only
- ▶ Flex Funds
- ▶ Low-Income Home Water Assistance Program
- ▶ Low-Income Home Energy Assistance Program
- ▶ Tribal Indian Housing Block Grant COVID-19
- ▶ Homelessness Prevention - Rapid Rehousing
- ▶ Conflict of Interest
- ▶ Landlord-Tenant Information

### HOUSING

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[Low Income Home Energy Assistance Program](#)

[Low Income Home Water Assistance Program](#)

[Xwch'angteng Housing](#)

[Rapid Re-Housing](#)

[Tenant Based Rental Assistance](#)

[Homelessness Prevention](#)

[Emergency Food Assistance Program](#)

[Flex Funds](#)

## PUBLIC NOTICES

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### ▼ 2021

- ▶ 2021 Annual Performance Report - IHBG
- ▶ 2021 Annual Performance Report - IHBG - COVID19
- ▶ 2021 IHBG American Rescue Plan Act - Annual Performance Report
- ▶ 2021 Indian Housing Block Grant Application - American Rescue Plan
- ▶ 2021 Indian Housing Block Grant Application

### ▶ 2023

### ▼ 2022

- ▶ 2022 Annual Performance Report
- ▶ 2022 Indian Housing Block Grant
- ▶ 2022 HUD Income Limits
- ▶ 2022 Fair Market Rents

### ▶ 2020

- ▶ Code of Conduct for HUD Grant Programs required by HUD
- ▶ Federal Register 24 CFR Part 1000
- ▶ Native American Housing Assistance Self-Determination Statute
- ▶ X - ERR Levels of Compliance Guide - HUD

## CONTACT

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**TOLL FREE** (877) 470-8737

**FAX** (360) 899-5193

**E-mail**

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**Event Listings**

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**Growing Cultural Plants - Virtual**

Growing Cultural Plants - Virtual

**Dates:** 21 – 21 Feb, 2023

**More Details**

**Growing Cultural Plants - Hybrid**

Anacortes, Washington  
Growing Cultural Plants - Hybrid

**Dates:** 25 – 25 Feb, 2023

**More Details**

**Chat & Craft**

Chat & Craft

**Dates:** 28 – 28 Feb, 2023

**More Details**

**Book Club: Neither Wolf Nor Dog - Virtual**

Book Club: Neither Wolf Nor Dog - Virtual

**Dates:** 02 – 02 Mar, 2023

**More Details**

**Samish Elders Virtual Spring Gathering**

Samish Elders Virtual Spring Gathering

**Dates:** 03 – 03 Mar, 2023

**More Details**

**History Talk with Chairman Tom Wooten - Virtual**

History Talk with Chairman Tom Wooten - Virtual

**Dates:** 07 – 07 Mar, 2023

**More Details**

**History Talk with Chairman Tom Wooten - Hybrid**

Anacortes, WA  
History Talk with Chairman Tom Wooten - Hybrid

**Dates:** 11 – 11 Mar, 2023

**More Details**

**Drum Making Class - Virtual**

Drum Making Class - Virtual

**Dates:** 21 – 21 Mar, 2023

**More Details**

**Drum Making Class - In-Person**

Anacortes, WA  
Drum Making Class - In-Person

**Dates:** 25 – 25 Mar, 2023

**More Details**

**Blankets in Coast Salish Culture - Virtual****Blankets in Coast Salish Culture - In Person**

Anacortes, Washington  
Blankets in Coast Salish Culture - In Person

**Dates:** 15 – 15 Apr, 2023

**More Details**

**Samish Elders Virtual Bingo Fun!**

Samish Elders Virtual Bingo Fun!

**Dates:** 28 – 28 Apr, 2023

**More Details**



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2022 Turnaway Report for Rapid Rehousing (Homeless)				FOR ALL PROGRAMS																
Count the Household only ONCE. If they have several characteristics, use the Head of Household Information																				
Except for Column B -Count all Households Samish and Non-Samish																				
HH = Households																				
	# of Households Turned Away			Head of Household Demographics (Total Should Match)						Households W/ or W/Out Children (Total Should Match)			Turnaway Reasons Total Should Match							
	How many were Samish HH	Non Samish Household	Total	How many HH were Elders	How many HH had a persons with a Disability	How many HH were Veterans	HOH aged 18 - 24	HH does not meet any characteristics	Total	Households w/out Children	Households with Children	Total	Over Income	Unable to Verify Tribal Enrollment	Opt out of Service	Paperwork not Completed within 30 days	Services Declined / Not Eligible	Program Not Available / Not Offered	*Out of Service Area	Total for Households
2022																				
January	4	23	27	5	1	0	2	19	27	18	9	27	0	1	1	3	20	0	2	27
February	4	15	19	4	1	1	0	13	19	16	3	19	1	3	1	1	13	0	0	19
March	1	11	12	0	0	0	2	10	12	11	1	12	1	0	1	2	8	0	0	12
April	2	13	15	2	0	0	2	11	15	9	6	15	0	2	1	4	5	2	1	15
May	1	1	2	0	0	0	0	2	2	0	2	2	0	0	1	0	0	1	0	2
June	1	11	12	0	2	0	3	7	12	11	1	12	0	1	1	3	3	4	0	12
July	3	17	20	4	1	0	0	15	20	10	10	20	1	0	1	5	7	5	1	20
August	1	8	9	0	0	0	0	9	9	5	4	9	0	1	0	1	4	3	0	9
September	1	7	8	0	0	0	1	7	8	6	2	8	0	1	0	3	3	0	1	8
October									0			0								0
November									0			0								0
December									0			0								0
<b>Total</b>	<b>18</b>	<b>106</b>	<b>124</b>	<b>15</b>	<b>5</b>	<b>1</b>	<b>10</b>	<b>93</b>	<b>124</b>	<b>86</b>	<b>38</b>	<b>124</b>	<b>3</b>	<b>9</b>	<b>7</b>	<b>22</b>	<b>63</b>	<b>15</b>	<b>5</b>	<b>124</b>
<b>* if out of Service Area list the area</b>																				
Alaska																				
Spokane County																				
Franklin County																				
Denver Colorado																				
Clark County																				
<b>Services Needed</b>																				
Ongoing Rental Assistance				No TBRA Spots Available																
Down Payment Assistance																				
Homeowners Assistance																				