

LOUISVILLE METRO HOUSING AUTHORITY

PROPOSED REVISIONS TO: HOUSING CHOICE VOUCHER (HCV) PROGRAM ADMINISTRATIVE PLAN

- Section 1. Introduction**
- Section 7. Moves with continued assistance**
- Section 13. Inspection policies, housing quality standards, and damage claims**
- Appendix 3C. Notice to applications/participants regarding their rights under the violence against women act**
- Appendix 3D. Emergency transfer plan for victims of domestic violence, dating violence, sexual assault, or stalking**
- Appendix 3E. Certification of domestic violence, dating violence, sexual assault, or stalking (HUD-5382)**
- Appendix 3F. Emergency transfer request for domestic violence, dating violence, sexual assault, or stalking (HUD-5383)**
- Appendix 9. Special referral program**

**PUBLIC COMMENT WELCOME FROM
JUNE 1 – JULY 2, 2018**

Proposed revisions are denoted in red

SUMMARY

1. INTRODUCTION

Revise Table 1-1 to include additional Special Referral Programs (Section 1 C)
Revise language to update VAWA title and HUD form number (Section 1 F)
Add “Notice to Applicants/Participants Regarding Their Rights Under the Violence Against Women Act (VAWA)” to required postings (Section 1 G).

7. MOVES WITH CONTINUED ASSISTANCE

Add VAWA protected tenants into moves (Section 7 A)
Add Emergency transfer policies related to VAWA (Section 7 C).

13. INSPECTION POLICIES, HOUSING QUALITY STANDARDS, AND DAMAGE CLAIMS

Reference to Lead-Based paint policy (Section 13 C)
Revise blood lead levels for children under 6 years of age (Section 13 D).
Add language requiring risk assessment and exemption language regarding multifamily units, hazard reduction, data collection, and record keeping (Section 13 D)
Add exemptions to HQS acceptability criteria for single room occupancy, congregate housing, group homes, shared homes, cooperative housing, and manufactured homes (Section 13 E).

APPENDIX 3C – 3F

Add forms for use regarding VAWA

APPENDIX 9: SPECIAL REFERRAL PROGRAMS

Delete higher education requirement for Family Scholar House.
Add Louisville Metro Government ShelterWorks to MTW Special Referral programs.

1. INTRODUCTION

[...]

C. HCV PROGRAM FLEXIBILITIES PROVIDED THROUGH MOVING TO WORK (MTW)

This HCV Administrative Plan is aligned with the Moving to Work (MTW) Agreement by and between HUD and the LMHA, as amended and restated on April 15, 2008, and including any subsequent amendments thereto. The MTW Agreement governs and supersedes, as appropriate, applicable federal laws, rules, regulations, contracts, and agreements that have been or will be waived and/or modified by the MTW Agreement and subsequent amendments to the Agreement.

This Administrative Plan, in conjunction with the approved MTW Annual Plan, together comprise the operational policies of the Housing Authority's HCV Program.

With HUD approval, the LMHA has implemented a number of specific activities made possible by the regulatory flexibilities provided through the MTW Program. The activities that impact the HCV Program are as follows:

Table 1-1: Moving to Work (MTW) Activities

Activity #	Activity Description
1-2005	Special Referral Program: Center for Women & Families (under 44-2015)
2-2005	MTW inspections protocol
3-2006	HCV Homeownership Program: Distribution of HCV Homeownership Assistance
4-2007	Alternate year Re-Examinations of Disabled Families and Participant Families where Head, Co-Head, or spouse is at least 55 years of age
6-2008	Earned income disregard for Elderly Families
7-2008	Special Referral Program: Day Spring (under 44-2015)
8-2008	Standard medical deduction for Elderly and Disabled Families
11-2009	HCV Homeownership Program: Flexibility in third-party verifications
13-2009	HCV Homeownership Program: Exception payment standards
15-2009	Special Referral Program: Louisville Scholar House (under 44-2015)
20-2010	Special Referral Program: Downtown Family Scholar House (under 44-2015)
27-2011	Deduction of Child Care Expenses for purpose of determining eligibility
30-2012	Special Referral Program: 100,000 Homes Initiative (under 44-2015)
31-2012	Special Referral Program: Stoddard Johnston Scholar House (under 44-2015)
32-2012	Elimination of earned income disregard for Non-Elderly Families
34-2012	Special Referral Program: Wellspring (Youngland Avenue facility) (under 44-2015)
35-2012	Special Referral Programs (under 44-2015): Coalition for the Homeless, Wellspring (Bashford Manor and Ardery facilities), Choices Inc., Kentucky Cabinet for Health & Family Services/KHC, Choose Well, Family and Children's Place St. Vincent de Paul, House of Ruth, Louisville Metro Government Office of Resilience and Community Services.
36-2013	MTW Special Referral Program – Wellspring at Bashford Manor/Newburg (under 44-2015)
38-2013	Special Referral Program: Parkland Scholar House (under 44-2015)
39-2014	Contract rent increase limit
40-2014	Financial aid disregard in calculation of Total Tenant Payment
42-2015	MTW Special Referral Program – Centerstone (under 44-2015)
43-2015	HUD/MDRC rent reform demonstration for HCV Households
44-2015	Combined reporting of MTW Special Referral Programs
46-2017	MTW Special Referral Program – Riverport Scholar House (under 44-2015)
47-2017	MTW Special Referral Program – ChooseWell Communities (under 44-2015)
48-2018	Local Project-Based Voucher Program
49-2018	Beecher Terrace CNI Revitalization – Broader Use of Funds to Support Development of Off-Site, Mixed-Income Replacement Housing
50-2018	Increasing Housing Options for Relocating Beecher Terrace Families

[...]

F. PROTECTIONS FOR VICTIMS OF DOMESTIC VIOLENCE, DATING VIOLENCE, SEXUAL ASSAULT, OR STALKING¹

1. Protections Provided Under the Violence Against Women Act²

The LMHA will provide notice to HCV Applicant and Participant Families of the following protections available to them under the Violence Against Women and Department of Justice Reauthorization Act of 2005, as amended (see Appendix 3.C for a copy of this notice). Such notice will also describe the limitations of these protections, and will be provided together with Form HUD-5382, *Certification of Domestic Violence, Dating Violence, Sexual Assault, or Stalking* (see Appendix 3.E). Notice will be provided at the time an Applicant or Participant is admitted to or denied residency in a dwelling unit and with any notification of eviction or termination of assistance.

These protections are equally available to both men and women and are available regardless of perceived or actual Gender Identity or Sexual Orientation.

Notice will also be provided to Owners of their rights and obligations under the Act.

a. Protections Available to Applicant Families

Admission to the HCV Program shall not be denied on the basis that the Applicant is or has been a victim of Domestic Violence, Dating Violence, Sexual Assault, or Stalking, if the Applicant otherwise qualifies for assistance or admission.

b. Protections Available to Participant Families

- i. An incident or incidents of actual or threatened Domestic Violence, Dating Violence, Sexual Assault, or Stalking will not be construed as a serious or repeated Lease violation by the victim or threatened victim of the Domestic Violence, Dating Violence, Sexual Assault, or Stalking, or as good cause to terminate the tenancy of, occupancy rights of, or assistance to the victim;

¹ 81 FR 221, “Violence Against Women Reauthorization Act of 2013: Implementation in HUD Housing Programs”; 24 CFR 5.20001-5,2011, Subpart L and 24 CFR 982.53, “Equal Opportunity Requirements and Protection for Victims of Domestic Violence, Dating Violence, or Stalking”

² 24 CFR 5.2005, “VAWA Protections”; 24 CFR 5.2009, “Remedies Available to Victims of Domestic Violence, Dating Violence, or Stalking in HUD-Assisted Housing,” as updated by 78 FR 47717, *The Violence Against Women Reauthorization Act of 2013: Overview of Applicability to HUD Programs*, 6 August 2013. See also: Henriquez, Sandra B, “Letter from the HUD Assistant Secretary for Public and Indian Housing to Public Housing Agency Executive Directors,” 30 September 2013.

- ii. Criminal activity directly related to Domestic Violence, Dating Violence, Sexual Assault, or Stalking, engaged in by a Household Member or any Guest or Other Person Under the Tenant's Control, shall not be cause for termination of tenancy of, occupancy rights of, or assistance to the victim, if the Tenant or an Affiliated Individual of the Tenant is the victim;

[...]

b. *Forms of Documentation*

Documentation of a claimed incident or incidents of actual or threatened Domestic Violence, Dating Violence, Sexual Assault, or Stalking may be accomplished in one of the following ways:

- i. HUD-Approved Certification Form (Form HUD-5382)

Documentation may consist of a HUD-approved certification form (Form HUD-5382) indicating that the individual is a victim of Domestic Violence, Dating Violence, Sexual Assault, or Stalking, and that the incident or incidents in question are bona fide incidents of such actual or threatened abuse. Such certification must include the name of the perpetrator only if the name of the perpetrator is safe to provide and is known to the victim, and may be based solely on the personal signed attestation of the victim. A copy of Form HUD-5382 can be found in Appendix 3.E;

[...]

G. HCV PROGRAM INFORMATION TO BE POSTED IN LMHA OFFICES

The LMHA will post, in each of its offices in a conspicuous place and at a height easily read by all persons, including persons with mobility disabilities, the following information:

1. The Housing Choice Voucher (HCV) Administrative Plan;³
2. Notice of the status of the waiting list (opened or closed);
3. Addresses of all LMHA offices, telephone numbers, TDD (Telecommunications Device for the Deaf) numbers, and hours of operation;
4. Income limits for admission;
5. Informal review and informal hearing procedures;
6. Fair Housing Poster;⁴

³ 24 CFR 982.54, "Administrative Plan"

⁴ 24 CFR 110.15, "Location of Posters"

7. Equal Opportunity in Employment Poster; and
8. The Housing Authority's SEMAP score and designation.⁵
9. Notice to Applicants/Participants Regarding Their Rights Under the Violence Against Women Act (VAWA)

[...]

⁵ Public Housing Agencies that participate in HUD's Moving to Work (MTW) Demonstration Program, including the LMHA, are exempt from the SEMAP process. Instead, these agencies maintain a "High Performer" status for the duration of their participation in the MTW Program.

7. MOVES WITH CONTINUED ASSISTANCE¹

Participating families are allowed to move to another unit after the initial lease has expired, if the landlord and the participant have mutually agreed to terminate the lease, or if the Louisville Metro Housing Authority (LMHA) has terminated the HAP contract. LMHA will issue the family a new Housing Choice Voucher if the family does not owe the LMHA or any other Housing Authority money, has not violated a Family Obligation, has not moved or been issued a Housing Choice Voucher within the last 12 months, and if LMHA has sufficient funding for continued assistance. If the move is necessitated for a reason other than family choice, the 12-month requirement will be waived.

A. WHEN A FAMILY MAY MOVE

For families already participating in the Housing Choice Voucher (HCV) Program, LMHA will allow the family to move to a new unit if:

1. The assisted lease for the current unit has terminated, or will be terminated with the consent of the owner;
2. The owner has given the resident a notice to vacate, has commenced an action to evict the family for reasons other than lease violations, or has obtained a court judgment or other process allowing the owner to evict the participant for reasons other than violations of the lease;
3. The participant has given notice of lease termination (if the participant has a right to terminate the lease on notice to the owner) and the owner certifies that the participant is in substantial compliance with the lease; or
4. **The family or a member of the family is or has been the victim of domestic violence, dating violence, sexual assault, or stalking as provided in 24 CFR part 5, subpart L (Protection for Victims of Domestic Violence, Dating violence, Sexual Assault, or Stalking).**

[...]

C. EMERGENCY TRANSFERS²

A tenant who is a victim of domestic violence, dating violence, sexual assault, or stalking, as provided in HUD's regulations at 24 CFR part 5, subpart L, is eligible for an emergency

¹ 24 CFR 982.354, "Moves with continued tenant-based assistance"

² 81 FR 221. "Violence Against Women Reauthorization Act of 2013: Implementation in HUD Housing Programs" and "Louisville Metro Housing Authority Emergency Transfer Plan for Victims of Domestic Violence, Dating Violence, Sexual Assault, or Stalking"

transfer, if the tenant reasonably believes that there is a threat of imminent harm from further violence if the tenant remains within the same unit. If the tenant is a victim of sexual assault, the tenant may also be eligible to move if the sexual assault occurred on the premises within the 90-calendar-day period preceding a request for an emergency transfer. Tenants who are not in good standing may still request an emergency transfer if they meet the eligibility requirements in this section.

The tenant shall notify LMHA's Section 8 office by submitting an emergency transfer request (Appendix 3F) or a written request that includes either:

1. A statement expressing that the tenant reasonably believes that there is a threat of imminent harm from further violence if the tenant were to remain in the same dwelling unit assisted under LMHA's program; OR
2. A statement that the tenant was a sexual assault victim and that the sexual assault occurred on the premises during the 90-calendar-day period preceding the tenant's request for an emergency relocation.

LMHA will provide reasonable accommodations to this policy for individuals with disabilities.

Confidentiality

LMHA will keep confidential any information that the tenant submits in requesting an emergency transfer, and information about the emergency transfer, unless the tenant gives LMHA written permission to release the information on a time limited basis, or disclosure of the information is required by law or required for use in an eviction proceeding or hearing regarding termination of assistance from the covered program. This includes keeping confidential the new location of the dwelling unit of the tenant, if one is provided, from the person(s) that committed an act(s) of domestic violence, dating violence, sexual assault, or stalking against the tenant.

Emergency Transfer Timing and Availability

LMHA cannot guarantee that a move request will be approved or how long it will take to process a transfer request. For emergency transfer, LMHA may provide an emergency termination of the HAP contract and expedite the relocation process. The tenant will have priority for receiving the next available voucher if not currently eligible.

LMHA may assist the tenant in identifying other housing providers who may have safe and available units to which the tenant could move. At the tenant's request, LMHA will also assist tenants in contacting the local organizations offering assistance to victims of domestic violence, dating violence, sexual assault, or stalking that are attached to this plan.

Safety and Security of Tenants

Pending processing of the relocation and the actual relocation, if it is approved and occurs, the tenant is urged to take all reasonable precautions to be safe.

[...]

13. INSPECTION POLICIES, HOUSING QUALITY STANDARDS, AND DAMAGE CLAIMS¹

[...]

C. HOUSING QUALITY STANDARDS (HQS²)

[...]

I. Lead-based Paint

[...]

For units occupied by environmental intervention blood lead level (lead poisoned) children under six years of age, a risk assessment must be conducted (paid for by LMHA), and the owner must complete hazard reduction activities if lead hazards are identified during the risk assessment. **All policies and procedures in accordance to Section 13 D must be followed.**

[...]

D. LEAD-BASED PAINT REQUIREMENTS AND RESPONSIBILITIES³

[...]

7. Requirements for Children with Environmental Intervention Blood Lead Level

Elevated blood levels in children under 6 years of age occurs when there are at least 5 micrograms of lead per deciliter of blood. Should LMHA receive information regarding an environmental intervention blood lead level child under age six from the family, owner, or other sources not associated with the medical health community, the Housing Authority will immediately verify the information with a public health department or other medical health care provider.

¹ 24 CFR 982.401, "Housing quality standards (HQS)"

² 24 CFR 982.401

³ PIH 2017-13 (HA), "Guidance on HUD's Lead Safe Housing Rule Pertaining to Elevated Blood Lead Levels for the Public Housing, Housing Choice Voucher, and Project Based Voucher System"

If either the public health department or private medical health agency provides verification that the child has an environmental intervention blood lead level, **LMHA and/or the owner will notify the HUD field office representative within 5 business days via email.** LMHA will proceed to complete a risk assessment of the unit, common areas and exterior surfaces as outlined in Subsection H below. This requirement does not apply if the public health department has already conducted an evaluation between the date the child's blood was last sampled and the receipt of notification of the child's condition.

If LMHA receives a report of an environmental intervention blood lead level child from any source other than the public health department, the Housing Authority will notify the public health department within five working days.

HUD has defined environmental intervention blood lead level as a confirmed concentration of lead in whole blood equal or greater than 20 ug/dL (micrograms of lead per deciliter) for a single test or 15-19 ug/dL in two tests taken at least three months apart in children under age six.

8. Risk Assessment

Within 15 calendar days of the notification to LMHA by a public health department or medical health care provider, the Housing Authority will complete a risk assessment of the dwelling or “index” unit, including common areas servicing the dwelling unit, if the child lived in the unit at the time the child's blood was sampled. If the public health department has already conducted an evaluation between the date the child's blood was last sample and the receipt of notification of the child's condition, the risk assessment by LMHA is not required.

LMHA will only utilize persons trained and certified by an EPA or state-approved agency to perform risk assessments. The risk assessment will identify the appropriate method of correction if correction is required.

The risk assessment will involve an on-site investigation to determine the existence, nature, severity, and location of lead-based paint hazards. The investigation will include dust and soil sampling, visual evaluation, and may include paint inspections (tests for lead in paint). The assessor will issue a report to the housing authority explaining the results of the investigation, as well as option and requirements for reducing lead-based paint hazards. Upon receipt of the risk assessment, LMHA shall immediately notify the owner of its results.

The owner must notify the building residents of the results of the risk assessment within 15 calendar days of receipt of the risk assessment results from LMHA.

In a multiunit building, the owner must conduct a risk assessment in the index unit, common areas, and any other assisted units in the property with a child under the age of 6. Risk assessment of areas other than the index unit must be conducted within 30

calendar days of receiving results for a property with twenty other covered units or fewer and within 60 calendar days for a property with more than twenty other covered units.

If the unit, along with other units in a multiunit building, is scheduled for redevelopment or demolition and the tenants are relocated within 15 calendar days, a full risk assessment is not needed.

9. Hazard Reduction

The owner must complete reduction of identified lead-based paint hazards as identified in the risk assessment as outlined in Subsection H of this Section within 30 calendar days (or date specified by LMHA if an extension is granted for exterior surfaces).

Hazard reduction activities may include paint stabilization, abatement, interim controls, or dust and soil contamination control. The appropriate method of correction will be identified in the risk assessment.

Hazard reduction will be considered complete by LMHA when a clearance examination has been completed and the report indicates that all identified hazards have been treated and clearance has been achieved, or when the public health department certifies that the hazard reduction is complete. The owner or LMHA must notify the local HUD field office of the results of the clearance examination within 10 business days of passing.

The owner must notify all building residents of any hazard reduction activities within 15 calendar days of completion of activities. **The owner must also notify LMHA and the HUD field office of the results of clearance within 10 business days of passing.**

Like paint stabilization compliance, when LMHA receives the owner's certification, this will signal compliance with lead hazard reduction activities.

Failure by the owner to complete hazard reduction activities (including clearance) within 30 calendar days (or later if LMHA grants an extension for exterior surfaces) of notification constitutes a violation of HQS, and appropriate action against the owner will be taken if a program family occupies the unit. If the unit is vacant when the Housing Authority notifies the owner, the unit may not be reoccupied by another assisted family, regardless of the ages of children in the family, until compliance with the lead-based paint requirement is completed.

10. LMHA Data Collection and Record Keeping

Quarterly, LMHA will attempt to obtain from the public health department having jurisdiction in the same area as the Housing Authority, the names and addresses of children under age six with an identified environmental intervention blood lead level.

LMHA will match information received from the health department with information about program families. If a match occurs, the Housing Authority will follow all procedures for notifying owners and conducting risk assessments as stated above.

Quarterly, LMHA will report a list of addresses of units occupied by children under age six, receiving assistance to the public health department, unless the health department indicates in writing that such a report is not necessary.

LMHA will inform owners of lead-based paint regulations especially those related to prohibited and safe work practices, resident protection during lead-based paint activities, and notification requirements. This will be accomplished through written material provided by the Housing Authority.

LMHA is responsible for issuing and maintaining in the file the notification to the owner of any needed corrections and appropriate methods to correct lead hazards, and of the deadline for completing the corrections.

LMHA is responsible for ensuring compliance with regulations.

E. EXCEPTIONS TO THE HQS ACCEPTABILITY CRITERIA

LMHA will utilize the acceptability criteria as outlined above with applicable State and local codes.

LMHA allows participating households to use their housing choice voucher program assistance in a number of specialized housing types. Each of the special housing types described below is targeted to households with particular needs. The program housing quality standards (HQS) generally apply to all units, but each special type of housing has additional unique HQS standards as outlined below.

Single Room Occupancy (SRO)

Pursuant to 24 CFR 982.605, a single room occupancy (SRO) unit must meet all the HQS performance requirements and acceptability criteria in §982.401 with the exception of:

A. Sanitary Facilities

1. At least one flush toilet that can be used in privacy, lavatory basin, and bathtub or shower, in proper operating condition, must be supplied for each six persons or fewer residing in the SRO housing.
2. If SRO units are leased only to males, flush urinals may be substituted for not more than one-half the required number of flush toilets. However, there must be at least one flush toilet in the building.

3. Every lavatory basin and bathtub or shower must be supplied at all times with an adequate quantity of hot and cold running water.
4. All of these facilities must be in proper operating condition, and must be adequate for personal cleanliness and the disposal of human waste. The facilities must utilize an approvable public or private disposal system.
5. Sanitary facilities must be reasonably accessible from a common hall or passageway to all persons sharing them. These facilities may not be located more than one floor above or below the SRO unit. Sanitary facilities may not be located below grade unless the SRO units are located on that level.

B. Space and Security

1. No more than one person may reside in an SRO unit.
2. An SRO unit must contain at least one hundred ten square feet of floor space.
3. An SRO unit must contain at least four square feet of closet space for each resident (with an unobstructed height of at least five feet). If there is less closet space, space equal to the amount of the deficiency must be subtracted from the area of the habitable room space when determining the amount of floor space in the SRO unit. The SRO unit must contain at least one hundred ten square feet of remaining floor space after subtracting the amount of the deficiency in minimum closet space.
4. Exterior doors and windows accessible from outside an SRO unit must be lockable.

C. Access

1. Access doors to an SRO unit must have locks for privacy in proper operating condition.
2. An SRO unit must have immediate access to two or more approved means of exit, appropriately marked, leading to safe and open space at ground level, and any means of exit required by State and local law.
3. The resident must be able to access an SRO unit without passing through any other unit.

D. Sprinkler System

A sprinkler system that protects all major spaces, hard wired smoke detectors, and such other fire and safety improvements as State or local law may require must be

installed in each building. The term “major spaces” means hallways, large common areas, and other areas specified in local fire, building, or safety codes.

E. Lead-based Paint

Since the SRO units will not house children, the housing quality standards in §982.401(j), concerning lead-based paint, do not apply to SRO housing.

Congregate Housing

Pursuant to 24 CFR 982.609, a congregate housing unit must meet all the HQS performance requirements and acceptability criteria in §982.401 with the exception of:

A. Space and Security

The dwelling unit does not require a kitchen area

B. Food Preparation and Refuse Disposal

1. The unit must contain a refrigerator of appropriate size.
2. There must be central kitchen and dining facilities on the premises. These facilities:
 - i. Must be located within the premises, and accessible to the residents;
 - ii. Must contain suitable space and equipment to store, prepare, and serve food in a sanitary manner;
 - iii. Must be used to provide a food service that is provided for the residents, and that is not provided by the residents; and
 - iv. Must be for the primary use of residents of the congregate units and be sufficient in size to accommodate the residents.
3. There must be adequate facilities and services for the sanitary disposal of food waste and refuse, including facilities for temporary storage where necessary.

Group Home

Pursuant to 24 CFR 982.614, a group home unit must meet all the HQS performance requirements and acceptability criteria in §982.401 with the exception of:

A. Sanitary facilities

1. There must be a bathroom in the unit. The unit must contain, and an assisted resident must have ready access to: a flush toilet that can be used in privacy; a fixed basin with hot and cold running water; and a shower or bathtub with hot and cold running water.
2. All of these facilities must be in proper operating condition, and must be adequate for personal cleanliness and the disposal of human waste. The facilities must utilize an approvable public or private disposal system.
3. The unit may contain private or common sanitary facilities. However, the facilities must be sufficient in number so that they need not be shared by more than four residents of the group home.
4. Sanitary facilities in the group home must be readily accessible to and usable by residents, including persons with disabilities.

B. Food preparation and service

1. The unit must contain a kitchen and a dining area. There must be adequate space to store, prepare, and serve foods in a sanitary manner.
2. Food preparation and service equipment must be in proper operating condition. The equipment must be adequate for the number of residents in the group home. The unit must contain the following equipment: a stove or range, and oven; a refrigerator; and a kitchen sink with hot and cold running water. The sink must drain into an approvable public or private disposal system.
3. There must be adequate facilities and services for the sanitary disposal of food waste and refuse, including facilities for temporary storage where necessary.
4. The unit may contain private or common facilities for food preparation and service.

C. Space and security

1. The unit must provide adequate space and security for the assisted person.
2. The unit must contain a living room, kitchen, dining area, bathroom, and other appropriate social, recreational or community space. The unit must contain at least one bedroom of appropriate size for each two persons.
3. Doors and windows that are accessible from outside the unit must be lockable.

D. Structure and material

1. The unit must be structurally sound to avoid any threat to the health and safety of the residents, and to protect the residents from the environment.

2. Ceilings, walls, and floors must not have any serious defects such as severe bulging or leaning, loose surface materials, severe buckling or noticeable movement under walking stress, missing parts or other significant damage. The roof structure must be firm, and the roof must be weathertight. The exterior or wall structure and exterior wall surface may not have any serious defects such as serious leaning, buckling, sagging, cracks or large holes, loose siding, or other serious damage. The condition and equipment of interior and exterior stairways, halls, porches, walkways, etc., must not present a danger of tripping or falling. Elevators must be maintained in safe operating condition.
3. The group home must be accessible to and usable by a resident with disabilities.

E. Site and neighborhood

The site and neighborhood must be reasonably free from disturbing noises and reverberations and other hazards to the health, safety, and general welfare of the residents. The site and neighborhood may not be subject to serious adverse environmental conditions, natural or manmade, such as dangerous walks or steps, instability, flooding, poor drainage, septic tank back-ups, sewage hazards or mud slides, abnormal air pollution, smoke or dust, excessive noise, vibrations or vehicular traffic, excessive accumulations of trash, vermin or rodent infestation, or fire hazards. The unit must be located in a residential setting.

Shared Home

Pursuant to 24 CFR 982.618, a shared housing unit must meet all the HQS performance requirements and acceptability criteria in §982.401 with the exception of:

Facilities available for family

The facilities available for the use of an assisted family in shared housing under the family's lease must include (whether in the family's private space or in the common space) a living room, sanitary facilities in accordance with §982.401(b), and food preparation and refuse disposal facilities in accordance with §982.401(c).

A. Space and security:

1. Each unit must contain private space for each assisted family, plus common space for shared use by the residents of the unit. Common space must be appropriate for shared use by the residents.
2. The private space for each assisted family must contain at least one bedroom for each two persons in the family. The number of bedrooms in the private space of an assisted family may not be less than the family unit size.
3. A zero or one bedroom unit may not be used for shared housing.

Cooperative housing

Pursuant to 24 CFR 982.619, a cooperative housing unit must meet all the HQS performance requirements and acceptability criteria in §982.401 with the exception of:

The family is responsible for a breach of the HQS that is caused by any of the following:

1. The family fails to perform any maintenance for which the family is responsible in accordance with the terms of the cooperative occupancy agreement between the cooperative member and the cooperative;
2. The family fails to pay for any utilities that the cooperative is not required to pay for, but which are to be paid by the cooperative member;
3. The family fails to provide and maintain any appliances that the cooperative is not required to provide, but which are to be provided by the cooperative member; or
4. Any member of the household or guest damages the dwelling unit or premises (damages beyond ordinary wear and tear).

Manufactured home

Pursuant to 24 CFR 982.621, a manufactured home must meet all the HQS performance requirements and acceptability criteria in §982.401. A manufactured home also must meet the following requirements:

1. Performance requirement. A manufactured home must be placed on the site in a stable manner, and must be free from hazards such as sliding or wind damage.
2. Acceptability criteria. A manufactured home must be securely anchored by a tie-down device that distributes and transfers the loads imposed by the unit to appropriate ground anchors to resist wind overturning and sliding.

[...]

***C. NOTICE TO APPLICANTS / PARTICIPANTS REGARDING THEIR
RIGHTS UNDER THE VIOLENCE AGAINST WOMEN ACT***

Louisville Metro Housing Authority¹
Notice of Occupancy Rights under the Violence Against Women Act²

To all Tenants and Applicants

The Violence Against Women Act (VAWA) provides protections for victims of domestic violence, dating violence, sexual assault, or stalking. VAWA protections are not only available to women, but are available equally to all individuals regardless of sex, gender identity, or sexual orientation.³ The U.S. Department of Housing and Urban Development (HUD) is the Federal agency that oversees that **Louisville Metro Housing Authority (LMHA)** is in compliance with VAWA. This notice explains your rights under VAWA. A HUD-approved certification form is attached to this notice. You can fill out this form to show that you are or have been a victim of domestic violence, dating violence, sexual assault, or stalking, and that you wish to use your rights under VAWA.”

Protections for Applicants

If you otherwise qualify for assistance under **LMHA**, you cannot be denied admission or denied assistance because you are or have been a victim of domestic violence, dating violence, sexual assault, or stalking.

Protections for Tenants

If you are receiving assistance under **LMHA**, you may not be denied assistance, terminated from participation, or be evicted from your rental housing because you are or have been a victim of domestic violence, dating violence, sexual assault, or stalking. Also, if you or an affiliated individual of yours is or has been the victim of domestic violence, dating violence, sexual assault, or stalking by a member of your household or any guest, you may not be denied rental assistance or occupancy rights under **LMHA** solely on the basis of criminal activity directly relating to that domestic violence, dating violence, sexual assault, or stalking. Affiliated individual means your spouse, parent, brother, sister, or child, or a person to whom you stand in the place of a parent or guardian (for example, the affiliated individual is in your care, custody, or control); or any individual, tenant, or lawful occupant living in your household.

Removing the Abuser or Perpetrator from the Household

LMHA may divide (bifurcate) your lease in order to evict the individual or terminate the assistance of the individual who has engaged in criminal activity (the abuser or perpetrator) directly relating to domestic violence, dating violence, sexual assault, or stalking.

If **LMHA** chooses to remove the abuser or perpetrator, **LMHA** may not take away the rights of eligible tenants to the unit or otherwise punish the remaining tenants. If the evicted abuser or perpetrator was the sole tenant to have established eligibility for assistance under the program, **LMHA** must allow the tenant who is or has been a victim and other household members to remain in the unit for a period of time, in order to establish eligibility under the program or under another HUD housing program covered by VAWA, or, find alternative housing. In removing the abuser or perpetrator from the household, **LMHA** must follow Federal, State, and local eviction procedures. In order to divide a lease, **LMHA** may, but is not required to, ask you for documentation or certification of the incidences of domestic violence, dating violence, sexual assault, or stalking.

¹ The notice uses **LMHA** for housing provider but the housing provider should insert its name where **LMHA** is used. HUD’s program-specific regulations identify the individual or entity responsible for providing the notice of occupancy rights.

² Despite the name of this law, VAWA protection is available regardless of sex, gender identity, or sexual orientation.

³ Housing providers cannot discriminate on the basis of any protected characteristic, including race, color, national origin, religion, sex, familial status, disability, or age. HUD-assisted and HUD-insured housing must be made available to all otherwise eligible individuals regardless of actual or perceived sexual orientation, gender identity, or marital status.

Moving to Another Unit

Upon your request, **LMHA** may permit you to move to another unit, subject to the availability of other units, and still keep your assistance. In order to approve a request, **LMHA** may ask you to provide documentation that you are requesting to move because of an incidence of domestic violence, dating violence, sexual assault, or stalking. If the request is a request for emergency transfer, the housing provider may ask you to submit a written request or fill out a form where you certify that you meet the criteria for an emergency transfer under VAWA. The criteria are:

- (1) **You are a victim of domestic violence, dating violence, sexual assault, or stalking.** If your housing provider does not already have documentation that you are a victim of domestic violence, dating violence, sexual assault, or stalking, your housing provider may ask you for such documentation, as described in the documentation section below.
- (2) **You expressly request the emergency transfer.** Your housing provider may choose to require that you submit a form, or may accept another written or oral request.
- (3) **You reasonably believe you are threatened with imminent harm from further violence if you remain in your current unit.** This means you have a reason to fear that if you do not receive a transfer you would suffer violence in the very near future.

OR

You are a victim of sexual assault and the assault occurred on the premises during the 90-calendar-day period before you request a transfer.

If you are a victim of sexual assault, then in addition to qualifying for an emergency transfer because you reasonably believe you are threatened with imminent harm from further violence if you remain in your unit, you may qualify for an emergency transfer if the sexual assault occurred on the premises of the property from which you are seeking your transfer, and that assault happened within the 90-calendar-day period before you expressly request the transfer.

LMHA will keep confidential requests for emergency transfers by victims of domestic violence, dating violence, sexual assault, or stalking, and the location of any move by such victims and their families. **LMHA**'s emergency transfer plan provides further information on emergency transfers, and **LMHA** must make a copy of its emergency transfer plan available to you if you ask to see it.

Documenting You Are or Have Been a Victim of Domestic Violence, Dating Violence, Sexual Assault or Stalking

LMHA can, but is not required to, ask you to provide documentation to "certify" that you are or have been a victim of domestic violence, dating violence, sexual assault, or stalking. Such request from **LMHA** must be in writing, and **LMHA** must give you at least 14 business days (Saturdays, Sundays, and Federal holidays do not count) from the day you receive the request to provide the documentation. **LMHA** may, but does not have to, extend the deadline for the submission of documentation upon your request. You can provide one of the following to **LMHA** as documentation. It is your choice which of the following to submit if **LMHA** asks you to provide documentation that you are or have been a victim of domestic violence, dating violence, sexual assault, or stalking.

- A complete HUD-approved certification form given to you by **LMHA** with this notice, that documents an incident of domestic violence, dating violence, sexual assault, or stalking. The form will ask for your name, the date, time, and location of the incident of domestic violence, dating violence, sexual assault, or stalking, and a description of the incident. The certification form provides for including the name of the abuser or perpetrator if the name of the abuser or perpetrator is known and is safe to provide.
- A record of a Federal, State, tribal, territorial, or local law enforcement agency, court, or administrative agency that documents the incident of domestic violence, dating violence, sexual assault, or stalking. Examples of such records include police reports, protective orders, and restraining orders, among others.
- A statement, which you must sign, along with the signature of an employee, agent, or volunteer of a victim service provider, an attorney, a medical professional or a mental health professional (collectively, "professional") from whom you sought assistance in addressing domestic violence, dating violence, sexual assault, or stalking, or the effects of abuse, and with the professional selected by you attesting under penalty of perjury that he or she believes that the incident or incidents of domestic violence, dating violence, sexual assault, or stalking are grounds for protection.
- Any other statement or evidence that **LMHA** has agreed to accept.

If you fail or refuse to provide one of these documents within the 14 business days, **LMHA** does not have to provide you with the protections contained in this notice. If **LMHA** receives conflicting evidence that an incident of domestic violence, dating violence, sexual assault, or stalking has been committed (such as certification forms from two or more members of a household each claiming to be a victim and naming one or more of the other petitioning household members as the abuser or perpetrator), **LMHA** has the right to request that you provide third-party documentation within thirty 30 calendar days in order to resolve the conflict. If you fail or refuse to provide third-party documentation where there is conflicting evidence, **LMHA** does not have to provide you with the protections contained in this notice.

Confidentiality

LMHA must keep confidential any information you provide related to the exercise of your rights under VAWA, including the fact that you are exercising your rights under VAWA. **LMHA** must not allow any individual administering assistance or other services on behalf of **LMHA** (for example, employees and contractors) to have access to confidential information unless for reasons that specifically call for these individuals to have access to this information under applicable Federal, State, or local law. **LMHA** must not enter your information into any shared database or disclose your information to any other entity or individual. **LMHA**, however, may disclose the information provided if:

- You give written permission to **LMHA** to release the information on a time limited basis.
- **LMHA** needs to use the information in an eviction or termination proceeding, such as to evict your abuser or perpetrator or terminate your abuser or perpetrator from assistance under this program.
- A law requires **LMHA** or your landlord to release the information.

VAWA does not limit **LMHA**'s duty to honor court orders about access to or control of the property. This includes orders issued to protect a victim and orders dividing property among household members in cases where a family breaks up.

Reasons a Tenant Eligible for Occupancy Rights under VAWA May Be Evicted or Assistance May Be Terminated

You can be evicted and your assistance can be terminated for serious or repeated lease violations that are not related to domestic violence, dating violence, sexual assault, or stalking committed against you. However, **LMHA** cannot hold tenants who have been victims of domestic violence, dating violence, sexual assault, or stalking to a more demanding set of rules than it applies to tenants who have not been victims of domestic violence, dating violence, sexual assault, or stalking. The protections described in this notice might not apply, and you could be evicted and your assistance terminated, if **LMHA** can demonstrate that not evicting you or terminating your assistance would present a real physical danger that:

- 1) Would occur within an immediate time frame, and
- 2) Could result in death or serious bodily harm to other tenants or those who work on the property.

If **LMHA** can demonstrate the above, **LMHA** should only terminate your assistance or evict you if there are no other actions that could be taken to reduce or eliminate the threat.

Other Laws

VAWA does not replace any Federal, State, or local law that provides greater protection for victims of domestic violence, dating violence, sexual assault, or stalking. You may be entitled to additional housing protections for victims of domestic violence, dating violence, sexual assault, or stalking under other Federal laws, as well as under State and local laws.

Non-Compliance with The Requirements of This Notice

You may report a covered housing provider's violations of these rights and seek additional assistance, if needed, by contacting or filing a complaint with **the local HUD field office at 601 West Broadway, Rm 110; Louisville, KY 40202 or (502) 582-5251.**

For Additional Information

- You may view a copy of HUD's final VAWA rule at <https://www.hud.gov/sites/documents/5720-F-03VAWAFINRULE.PDF>. Additionally, **LMHA** must make a copy of HUD's VAWA regulations available to you if you ask to see them.
- For questions regarding VAWA, please contact **Assistant Director of Leased Housing (Section 8) at 502-569-6955 or Regional Director (Public Housing) at 502-569-3400.**
- For help regarding an abusive relationship, you may call the National Domestic Violence Hotline at 1-800-799-7233 or, for persons with hearing impairments, 1-800-787-3224 (TTY). You may also contact **The Center for Women and Families toll-free crisis line at 1-844-BE-SAFE-1 (or 1-844-237-2331 x1). The crisis line is available 24 hours a day/365 days a year. The Center for Women and Families serves violence victims and are available regardless of perceived or actual gender identity or sexual orientation.**
- For tenants who are or have been victims of stalking seeking help may visit the National Center for Victims of Crime's Stalking Resource Center at <https://www.victimsofcrime.org/our-programs/stalking-resource-center>.
- For help regarding sexual assault, you may contact **The Center for Women and Families**
- Victims of stalking seeking help may contact **The Center for Women and Families.**

***D. EMERGENCY TRANSFER PLAN FOR VICTIMS OF DOMESTIC
VIOLENCE, DATING VIOLENCE, SEXUAL ASSAULT, OR
STALKING***

Louisville Metro Housing Authority
Emergency Transfer Plan for Victims of Domestic Violence, Dating Violence, Sexual Assault, or Stalking

Emergency Transfers

Louisville Metro Housing Authority (LMHA) is concerned about the safety of its tenants, and such concern extends to tenants who are victims of domestic violence, dating violence, sexual assault, or stalking. In accordance with the Violence Against Women Act (VAWA),¹ **LMHA** allows tenants who are victims of domestic violence, dating violence, sexual assault, or stalking to request an emergency transfer from the tenant's current unit to another unit. The ability to request a transfer is available regardless of sex, gender identity, or sexual orientation.² The ability of **LMHA** to honor such request for tenants currently receiving assistance, however, may depend upon a preliminary determination that the tenant is or has been a victim of domestic violence, dating violence, sexual assault, or stalking, and on whether **LMHA** has another dwelling unit that is available and is safe to offer the tenant for temporary or more permanent occupancy.

This plan identifies tenants who are eligible for an emergency transfer, the documentation needed to request an emergency transfer, confidentiality protections, how an emergency transfer may occur, and guidance to tenants on safety and security. This plan is based on a model emergency transfer plan published by the U.S. Department of Housing and Urban Development (HUD), the Federal agency that oversees that **LMHA** is in compliance with VAWA.

Eligibility for Emergency Transfers

A tenant who is a victim of domestic violence, dating violence, sexual assault, or stalking, as provided in HUD's regulations at 24 CFR part 5, subpart L is eligible for an emergency transfer, if: the tenant reasonably believes that there is a threat of imminent harm from further violence if the tenant remains within the same unit. If the tenant is a victim of sexual assault, the tenant may also be eligible to transfer if the sexual assault occurred on the premises within the 90-calendar-day period preceding a request for an emergency transfer. A tenant requesting an emergency transfer must expressly request the transfer in accordance with the procedures described in this plan. Tenants who are not in good standing may still request an emergency transfer if they meet the eligibility requirements in this section.

Emergency Transfer Request Documentation

To request an emergency transfer, the tenant shall notify **LMHA**'s management office and submit a written request (Form HUD-5383) for a transfer to **Section 8; 801 Vine St.; Louisville, KY 40204 OR Public Housing; 420 S 8th St.; Louisville, KY 40203. LMHA** will provide reasonable accommodations to this policy for individuals with disabilities. The tenant's written request for an emergency transfer should include either:

1. A statement expressing that the tenant reasonably believes that there is a threat of imminent harm from further violence if the tenant were to remain in the same dwelling unit assisted under **LMHA**'s program;
OR

¹ Despite the name of this law, VAWA protection is available to all victims of domestic violence, dating violence, sexual assault, and stalking, regardless of sex, gender identity, or sexual orientation.

² Housing providers cannot discriminate on the basis of any protected characteristic, including race, color, national origin, religion, sex, familial status, disability, or age. HUD-assisted and HUD-insured housing must be made available to all otherwise eligible individuals regardless of actual or perceived sexual orientation, gender identity, or marital status.

2. A statement that the tenant was a sexual assault victim and that the sexual assault occurred on the premises during the 90-calendar-day period preceding the tenant's request for an emergency transfer.

Confidentiality

LMHA will keep confidential any information that the tenant submits in requesting an emergency transfer, and information about the emergency transfer, unless the tenant gives LMHA written permission to release the information on a time limited basis, or disclosure of the information is required by law or required for use in an eviction proceeding or hearing regarding termination of assistance from the covered program. This includes keeping confidential the new location of the dwelling unit of the tenant, if one is provided, from the person(s) that committed an act(s) of domestic violence, dating violence, sexual assault, or stalking against the tenant. See the Notice of Occupancy Rights under the Violence against Women Act for All Tenants for more information about LMHA's responsibility to maintain the confidentiality of information related to incidents of domestic violence, dating violence, sexual assault, or stalking.

Emergency Transfer Timing and Availability

LMHA cannot guarantee that a transfer request will be approved or how long it will take to process a transfer request. LMHA will, however, act as quickly as possible to move a tenant who is a victim of domestic violence, dating violence, sexual assault, or stalking to another unit, subject to availability and safety of a unit. If a tenant reasonably believes a proposed transfer would not be safe, the tenant may request a transfer to a different unit. If a unit is available, the transferred tenant must agree to abide by the terms and conditions that govern occupancy in the unit to which the tenant has been transferred. LMHA may be unable to transfer a tenant to a particular unit if the tenant has not or cannot establish eligibility for that unit.

If LMHA has no safe and available units for which a tenant who needs an emergency is eligible, LMHA will assist the tenant in identifying other housing providers who may have safe and available units to which the tenant could move. At the tenant's request, LMHA will also assist tenants in contacting the local organizations offering assistance to victims of domestic violence, dating violence, sexual assault, or stalking that are attached to this plan.

Safety and Security of Tenants

Pending processing of the transfer and the actual transfer, if it is approved and occurs, the tenant is urged to take all reasonable precautions to be safe.

Tenants who are or have been victims of domestic violence are encouraged to contact the National Domestic Violence Hotline at 1-800-799-7233, or a local domestic violence shelter, for assistance in creating a safety plan. For persons with hearing impairments, that hotline can be accessed by calling 1-800-787-3224 (TTY). Tenants may also contact the Center for Women and Families 24 hours a day, 365 days a year through their toll-free crisis line at 1-844-BE-SAFE-1 (1-844-237-2331 x1).

Tenants who have been victims of sexual assault may call the Rape, Abuse & Incest National Network's National Sexual Assault Hotline at 800-656-HOPE, or visit the online hotline at <https://ohl.rainn.org/online/>.

Tenants who are or have been victims of stalking seeking help may visit the National Center for Victims of Crime's Stalking Resource Center at <https://www.victimsofcrime.org/our-programs/stalking-resource-center>.

For help regarding sexual assault or stalking, you may contact the Center for Women and Families 24 hours a day, 365 days a year through their toll-free crisis line at 1-844-BE-SAFE-1 (1-844-237-2331 x1).

***E. CERTIFICATION OF DOMESTIC VIOLENCE, DATING
VIOLENCE, SEXUAL ASSAULT, OR STALKING (HUD-5382)***

**CERTIFICATION OF
DOMESTIC VIOLENCE,
DATING VIOLENCE,
SEXUAL ASSAULT, OR STALKING,
AND ALTERNATE DOCUMENTATION**

**U.S. Department of Housing
and Urban Development**

OMB Approval No. 2577-0286
Expires until further notice

Purpose of Form: The Violence Against Women Act (“VAWA”) protects applicants, tenants, and program participants in certain HUD programs from being evicted, denied housing assistance, or terminated from housing assistance based on acts of domestic violence, dating violence, sexual assault, or stalking against them. Despite the name of this law, VAWA protection is available to victims of domestic violence, dating violence, sexual assault, and stalking, regardless of sex, gender identity, or sexual orientation.

Use of This Optional Form: If you are seeking VAWA protections from your housing provider, your housing provider may give you a written request that asks you to submit documentation about the incident or incidents of domestic violence, dating violence, sexual assault, or stalking.

In response to this request, you or someone on your behalf may complete this optional form and submit it to your housing provider, or you may submit one of the following types of third-party documentation:

- (1) A document signed by you and an employee, agent, or volunteer of a victim service provider, an attorney, or medical professional, or a mental health professional (collectively, “professional”) from whom you have sought assistance relating to domestic violence, dating violence, sexual assault, or stalking, or the effects of abuse. The document must specify, under penalty of perjury, that the professional believes the incident or incidents of domestic violence, dating violence, sexual assault, or stalking occurred and meet the definition of “domestic violence,” “dating violence,” “sexual assault,” or “stalking” in HUD’s regulations at 24 CFR 5.2003.
- (2) A record of a Federal, State, tribal, territorial or local law enforcement agency, court, or administrative agency; or
- (3) At the discretion of the housing provider, a statement or other evidence provided by the applicant or tenant.

Submission of Documentation: The time period to submit documentation is 14 business days from the date that you receive a written request from your housing provider asking that you provide documentation of the occurrence of domestic violence, dating violence, sexual assault, or stalking. Your housing provider may, but is not required to, extend the time period to submit the documentation, if you request an extension of the time period. If the requested information is not received within 14 business days of when you received the request for the documentation, or any extension of the date provided by your housing provider, your housing provider does not need to grant you any of the VAWA protections. Distribution or issuance of this form does not serve as a written request for certification.

Confidentiality: All information provided to your housing provider concerning the incident(s) of domestic violence, dating violence, sexual assault, or stalking shall be kept confidential and such details shall not be entered into any shared database. Employees of your housing provider are not to have access to these details unless to grant or deny VAWA protections to you, and such employees may not disclose this information to any other entity or individual, except to the extent that disclosure is: (i) consented to by you in writing in a time-limited release; (ii) required for use in an eviction proceeding or hearing regarding termination of assistance; or (iii) otherwise required by applicable law.

**TO BE COMPLETED BY OR ON BEHALF OF THE VICTIM OF DOMESTIC VIOLENCE,
DATING VIOLENCE, SEXUAL ASSAULT, OR STALKING**

1. Date the written request is received by victim: _____

2. Name of victim: _____

3. Your name (if different from victim's): _____

4. Name(s) of other family member(s) listed on the lease: _____

5. Residence of victim: _____

6. Name of the accused perpetrator (if known and can be safely disclosed): _____

7. Relationship of the accused perpetrator to the victim: _____

8. Date(s) and times(s) of incident(s) (if known): _____

10. Location of incident(s): _____

In your own words, briefly describe the incident(s): _____ _____ _____ _____
--

This is to certify that the information provided on this form is true and correct to the best of my knowledge and recollection, and that the individual named above in Item 2 is or has been a victim of domestic violence, dating violence, sexual assault, or stalking. I acknowledge that submission of false information could jeopardize program eligibility and could be the basis for denial of admission, termination of assistance, or eviction.

Signature _____ Signed on (Date) _____

Public Reporting Burden: The public reporting burden for this collection of information is estimated to average 1 hour per response. This includes the time for collecting, reviewing, and reporting the data. The information provided is to be used by the housing provider to request certification that the applicant or tenant is a victim of domestic violence, dating violence, sexual assault, or stalking. The information is subject to the confidentiality requirements of VAWA. This agency may not collect this information, and you are not required to complete this form, unless it displays a currently valid Office of Management and Budget control number.

F. EMERGENCY TRANSFER REQUEST FOR VICTIMS OF DOMESTIC VIOLENCE, DATING VIOLENCE, SEXUAL ASSAULT, OR STALKING (HUD-5383)

**EMERGENCY TRANSFER
REQUEST FOR CERTAIN
VICTIMS OF DOMESTIC
VIOLENCE, DATING VIOLENCE,
SEXUAL ASSAULT, OR STALKING**

**U.S. Department of Housing
and Urban Development**

OMB Approval No. 2577-0286
Expires until further notice

Purpose of Form: If you are a victim of domestic violence, dating violence, sexual assault, or stalking, and you are seeking an emergency transfer, you may use this form to request an emergency transfer and certify that you meet the requirements of eligibility for an emergency transfer under the Violence Against Women Act (VAWA). Although the statutory name references women, VAWA rights and protections apply to all victims of domestic violence, dating violence, sexual assault or stalking. Using this form does not necessarily mean that you will receive an emergency transfer. See your housing provider's emergency transfer plan for more information about the availability of emergency transfers.

The requirements you must meet are:

(1) You are a victim of domestic violence, dating violence, sexual assault, or stalking.

If your housing provider does not already have documentation that you are a victim of domestic violence, dating violence, sexual assault, or stalking, your housing provider may ask you for such documentation. In response, you may submit Form HUD-5382, or any one of the other types of documentation listed on that Form.

(2) You expressly request the emergency transfer. Submission of this form confirms that you have expressly requested a transfer. Your housing provider may choose to require that you submit this form, or may accept another written or oral request. Please see your housing provider's emergency transfer plan for more details.

(3) You reasonably believe you are threatened with imminent harm from further violence if you remain in your current unit. This means you have a reason to fear that if you do not receive a transfer you would suffer violence in the very near future.

OR

You are a victim of sexual assault and the assault occurred on the premises during the 90-calendar-day period before you request a transfer. If you are a victim of sexual assault, then in addition to qualifying for an emergency transfer because you reasonably believe you are threatened with imminent harm from further violence if you remain in your unit, you may qualify for an emergency transfer if the sexual assault occurred on the premises of the property from which you are seeking your transfer, and that assault happened within the 90-calendar-day period before you submit this form or otherwise expressly request the transfer.

Submission of Documentation: If you have third-party documentation that demonstrates why you are eligible for an emergency transfer, you should submit that documentation to your housing provider if it is safe for you to do so. Examples of third party documentation include, but are not limited to: a letter or other documentation from a victim service provider, social worker, legal assistance provider, pastoral counselor, mental health provider, or other professional from whom you have sought assistance; a current restraining order; a recent court order or other court records; a law enforcement report or records; communication records from the perpetrator of the violence or family members or friends of the perpetrator of the violence, including emails, voicemails, text messages, and social media posts.

Confidentiality: All information provided to your housing provider concerning the incident(s) of domestic violence, dating violence, sexual assault, or stalking, and concerning your request for an

emergency transfer shall be kept confidential. Such details shall not be entered into any shared database. Employees of your housing provider are not to have access to these details unless to grant or deny VAWA protections or an emergency transfer to you. Such employees may not disclose this information to any other entity or individual, except to the extent that disclosure is: (i) consented to by you in writing in a time-limited release; (ii) required for use in an eviction proceeding or hearing regarding termination of assistance; or (iii) otherwise required by applicable law.

TO BE COMPLETED BY OR ON BEHALF OF THE PERSON REQUESTING A TRANSFER

1. Name of victim requesting an emergency transfer: _____

2. Your name (if different from victim's) _____

3. Name(s) of other family member(s) listed on the lease: _____

4. Name(s) of other family member(s) who would transfer with the victim: _____

5. Address of location from which the victim seeks to transfer: _____

6. Address or phone number for contacting the victim: _____

7. Name of the accused perpetrator (if known and can be safely disclosed): _____

8. Relationship of the accused perpetrator to the victim: _____

9. Date(s), Time(s) and location(s) of incident(s): _____

10. Is the person requesting the transfer a victim of a sexual assault that occurred in the past 90 days on the premises of the property from which the victim is seeking a transfer? If yes, skip question 11. If no, fill out question 11. _____

11. Describe why the victim believes they are threatened with imminent harm from further violence if they remain in their current unit.

12. If voluntarily provided, list any third-party documentation you are providing along with this notice: _____

This is to certify that the information provided on this form is true and correct to the best of my knowledge, and that the individual named above in Item 1 meets the requirement laid out on this form for an emergency transfer. I acknowledge that submission of false information could jeopardize program eligibility and could be the basis for denial of admission, termination of assistance, or eviction.

Signature _____ Signed on (Date) _____

APPENDIX 9: SPECIAL REFERRAL PROGRAMS

Using regulatory flexibilities provided through the Department of Housing and Urban Development's Moving to Work (MTW) Program, the Louisville Metro Housing Authority (LMHA) has created a number of unique Special Referral Programs in partnership with local social service organizations. These programs assist traditionally underserved populations, including the homeless and those with severe mental illness, by combining rental assistance with wraparound social services.

Special Referral Program Applicants must meet both Housing Choice Voucher (HCV) Program eligibility requirements and any additional eligibility criteria of the social service partner.

Families interested in participating in one of these Special Referral Programs should contact the social service partner directly. Contact information for each partner agency is listed on the following page.

Note: Participants in a number of these programs are required to reside in housing units designated by the partner agency. Other programs allow participants to select a housing unit anywhere within the LMHA jurisdiction, subject to the same limits normally imposed on unit selection in the tenant-based HCV Program. Prospective Applicants should contact the social service partner directly to find out whether or not they will be required to live at a certain housing site.

Louisville Metro Housing Authority Special Referral Programs

Social Service Partner	Population Served	Contact Information			Vouchers Available
		Address	Phone ¹	Web	
Center for Accessible Living (Mainstream Program)	Families where head-of-household or spouse is disabled	305 W. Broadway, Suite 200, 40202	Voice: 589-6620 TTY: 589-6690	www.calky.org/services/housing	300
Center for Women & Families	Victims of domestic or sexual violence	927 S. 2 nd St., 40206	581-7200	www.thecenteronline.org	22
Centerstone	People with Severe Mental Illness	101 W. Muhammad Ali Blvd, 40202	589-1100	www.sevencounties.org	50
Choices	Homeless Families	419 S. Shelby St, 40202	585-3780	www.choiceshome.org	5
ChooseWell Communities	Pregnant or post-partum mothers who have completed addiction treatment	323 W. Broadway, #504, 40202	800-520-4914	www.choosewell.org/what-we-do/project-thrive/	70
Coalition for the Homeless	Homeless Families with school-age child(ren)	1300 S. 4th St., #250, 40208	636-9550	http://louhomeless.org	20
Coalition for the Homeless	Chronically homeless Families transitioning from temporary homeless services vouchers	1300 S. 4th St., #250, 40208	636-9550	http://louhomeless.org	100
Day Spring	Adults with developmental disabilities	3430 Day Spring Court, 40213	636-5990	http://dayspringky.org	4
Family & Children's Place	Those leaving an institution who are also at risk of homelessness	525 Zane St., 40203	893-3900	www.familyandchildrensplace.org/our-services/homeless-prevention-services/	10
Family Scholar House	One parent Families & foster care alumni who are Independent Students. Eligible Family Member must pursue college degree.	403 Reg Smith Circle, 40208	584-8090	www.familyscholarhouse.org	284
Home of the Innocents	Homeless youth ages 18-24 & their dependents	1100 E. Market St., 40206	596-1000	www.homeoftheinnocents.org	10
House of Ruth	Individuals who are homeless & HIV-positive	607 E. St. Catherine St., 40203	587-5080	www.houseofruth.net/our-programs/glade-house/	10
Kentucky Cabinet for Health & Family Services	Families where housing is the only remaining issue preventing reunification of	CHFS DCBS Jefferson Regional	595-4732		70

¹ Area code is 502 unless otherwise noted.

Louisville Metro Housing Authority (LMHA)
Housing Choice Voucher Administrative Plan
For Approval: July 17, 2018

Social Service Partner	Population Served	Contact Information			Vouchers Available
		Address	Phone ¹	Web	
(Partnership for Families)	child(ren) with parents or child(ren) being removed from household	Office 908 W. Broadway, 4 East, 40203			
Kentucky Cabinet for Health & Family Services / Kentucky Housing Corporation	Families where at least one Family Member has a severe psychiatric illness	CHFS DCBS Jefferson Regional Office 908 W. Broadway, 4 East, 40203	595-4732		10
Kentucky Department for Behavioral Health	Individuals with severe & persistent psychiatric illness	100 Fair Oaks Ln., 4E- B, Frankfort, KY, 40621	564-4527	http://dbhdid.ky.gov	60
Louisville Substance Abuse & Mental Health Administration Community Consortium (100,000 Homes Initiative)	Chronically Homeless Families	712 E. Muhammad Ali Blvd, 40202	568-6972	www.fhclouisville.org/health-services/healthcare-for-the-homeless	130
Phoenix Health Center	Families leaving HUD's Shelter + Care Program	712 E. Muhammad Ali Blvd, 40202	568-6972	www.fhclouisville.org/health-services/healthcare-for-the-homeless	10
St. Vincent DePaul	Families with children where the family is homeless or at risk of homelessness	1015-C S. Preston St., 40203	584-2480	www.svdplou.org/housing-programs/	10
Wellspring	Individuals with severe & persistent psychiatric illness or intellectual disabilities	PO Box 1927, 40201	753-1456	www.wellspring-house.org	23
Louisville Metro Government Office of Resilience and Community Services	Homeless individuals participating in ShelterWorks program	701 W Ormsby, 40203	574-4377	Louisvilleky.gov/government/resilience-and-community-services	10

