



## **FY 2013 HUDQC Study's PSI Questionnaire Housing Choice Voucher Program**

The Project Specific Information (PSI) questionnaire is provided to administrators of Public Housing, Housing Choice Voucher (HCV), Moderate Rehabilitation (Mod Rehab) units, and Section 8, Section 202 PRAC, Section 202/162 PAC, and Section 811 PRAC assisted units selected in the FY 2013 HUD Quality Control (HUDQC) Study. We use the data you provide to prepare for our data collection process.

The PSI questionnaire is divided into 5 sections, with an average completion time of 30 minutes:

- I. Project Specific Information
- II. Reference Information
- III. Rent Calculation Policies
- IV. Questions to Facilitate Data Collection
- V. Contact Information

Your answers are very important to us and we appreciate your time. If you have any questions about the survey, please feel free to contact us toll-free at (877) 392-9776 or by email at [hudqc@icfi.com](mailto:hudqc@icfi.com).

### **How We Designate “Projects” in Our Study**

Before you begin, we would like to tell you how we designate “projects” in our study. For the purpose of selecting programs of comparable size during our sampling process, we often divide up larger program sizes into smaller entities (for HCV programs this usually means selecting HCV tenants living in a specific county or city). We call each entity we select “projects” in our study. This means that the project we select may not be based on your entire program service area. For example, you may have tenants in multiple counties in your HCV program, but we may have selected to review your administration of vouchers in only one county.

Note that if you are a large PHA we may have selected multiple projects (in your Public Housing, HCV, or Mod Rehab programs) for this study. If multiple projects at your site have been selected for this study, you must complete a PSI survey for each project.

**Please complete this survey for the specific project we have identified (provided to you in the email in which this survey was attached or in the cover letter you received with a fax of this survey).**

## I. Project Specific Information

1. We will be selecting a sample of tenants participating in the Housing Choice Voucher Program living only in the county or township we have identified. Please check the information below for accuracy and make any corrections in the "Correction" fields below.

HUDQC's Project Identifier	Correction
a. PHA Name: [PHA Name]	_____
b. PHA Code: [PHA Code]	_____
c. Selected Area: [Selected Area]	_____
d. [# of HCV Participants] HCV participants in the selected area	_____

If no corrections were made above, please check this box to confirm that no corrections are needed.

2. If you want to provide any additional information about the project identified, please do so here:

\_\_\_\_\_  
\_\_\_\_\_

### HUDQC FY2013 Study Period

Unless otherwise stated, **all questions in this survey refer to our study period of November 1, 2012 to October 31, 2013.**

### Special Circumstances

HUD gives special permission to programs/sites to design and implement non-standard policies and procedures for calculating rent. Note that for the purpose of this study, Moving to Work is not considered a special demonstration project.

3. Is the project selected for this study considered a special demonstration project?

Yes  No

**If you selected yes above, please answer Section A on the next page.**

4. Is your project part of a Moving to Work (MTW) program?

Yes  No  Not Applicable (not associated with a PHA)

**If you selected yes above, please answer Section B on the next page.**

**If your project is a special demonstration, please answer these questions.**

Please explain how your project's policies and procedures related to rent calculation differ from standard HUD policy:

---

---

---

**Section  
A**

We may need additional information about your special project policies. Please provide us with the contact information of the staff we should contact for follow up questions regarding your special demonstration project:

Name: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Email: \_\_\_\_\_

**If your project is a special demonstration, you do not need to complete the rest of the survey.**  
Please fax this survey to toll-free (800) 823-0127 or email it to [hudqc@icfi.com](mailto:hudqc@icfi.com).

**If your project is a Moving to Work program, please answer these questions.**

Does your project have a special recertification schedule that differs from HUD-standard annual recertification for all households?

Yes     No

If yes, please explain your MTW recertification schedule:

---

---

**Please proceed with completing the rest of the survey.**

**Section  
B**

5. Did your PHA administer any of the following special housing types for HCV participants in the county or township we have identified? Please check all that apply.

- Single Room Occupancy
- Congregate Housing
- Group Homes

- Shared Housing
- Cooperative Housing
- Manufactured Home Space Rental

6. Does your PHA administer Enhanced Vouchers for HCV participants in the county or township we have identified?     Yes     No

**II. Reference Information**

7. What passbook rate was used to impute asset income for 50058 transactions effective November 1, 2012 through October 31, 2013? For each rate entered please indicate the period it was used:

*Please enter rates as percentages. For example, enter two percent as “2” (do not enter as “0.02”). If your project is using the rate currently, please enter today’s date as the “End Date.”*

	<b>Start Date</b>	<b>End Date</b>
Rate: _____ %	Period used: _____ to _____	
Rate: _____ %	Period used: _____ to _____	

8. What is the project’s minimum rent? \$ \_\_\_\_\_ *If there is no minimum rent, please enter 0.*

9. Does your project have Welfare Rent?

Yes     No

If yes, we will need information about the Welfare Rent Schedule(s) used for transactions effective November 1, 2012 to October 31, 2013. You can list your schedule here or you can send us a copy. *More information about sending project documentation can be found at the end of Section II.*

---

---

10. Does your project have any special payment standard areas or policies at your project?

Yes     No

Some examples of special payment standard policies include:

- exception rent areas
- success rate payment standards
- manufactured home retail space
- exception payment standards for elderly/disabled households

11. If your policy changed at some point within our study period of November 1, 2012 to October 31, 2013, please be explicit about the date of change and the policy in place before and after the change:

---

---

12. Please select the primary method your PHA used to determine reasonable rent:
- Comparing rents of one or more specific comparable unit(s) to the assisted unit
  - Comparing the average rent from a large survey of comparable units to the rent requested for the assisted unit.
  - Comparing rents based on a point system. Points are awarded based on unit conditions and/or specific attributes or amenities.
  - Using comparable units and rents listed by the owner/property manager in the Request for Tenancy Approval Form HUD-52517.
  - Staff determines acceptable rent based on knowledge of the local rental market.
  - Other – Please explain: \_\_\_\_\_
13. Did your project use a software program to determine rent reasonableness?
- No       Yes – please list the name of the software program: \_\_\_\_\_
14. Did your project subcontract the determination of rent comparability to an outside organization?
- No       Yes – please list the name of the subcontractor: \_\_\_\_\_

**Request for Policy and Rent Calculation Documents**

At this time we would like to request that you send us documents related to rent and income calculation for your project. Note that we need documents that were used for transactions effective during our study timeframe of Nov. 1, 2012 to Oct. 31, 2013, unless otherwise indicated.

**We require the following documents:**

- Approved Administrative Plan
- Utility Allowance Schedule (for geographic areas in the county or township we have identified)
- Payment Standards (for the last 2 fiscal years, from November 2011- October 2013)  
*If applicable, please send any maps identifying where various PS amounts apply.*
- Welfare Rents, if applicable
- Policy and procedural guidance related to rent and income calculation

We will reference the documents you provide us to calculate rent and measure improper payments during our review of your files. It is important that documentation accurately reflects your policies.

**Mail Documents to:**  
ICF International  
Attn: HUDQC Study  
11785 Beltsville Dr., Ste.300  
Calverton, MD 20705

**Fax Documents to:**  
Toll-free (800) 823-0127

**Email Documents to:**  
[hudqc@icfi.com](mailto:hudqc@icfi.com)

**III. Rent Calculation Policies**

15. Please provide the page number(s) and/or chapter and section where we can reference the specified policies in the document(s) you have sent or will send us. Please indicate the name of the specific document you are referring to.

<b>Policy Topic</b>	<b>Reference Document &amp; Page/Section</b>
a. Seasonal Income	_____
b. Child Support Income	_____
c. Asset Income	_____
d. Medical Expenses	_____
e. Disability Assistance Expenses	_____
f. Childcare Expenses	_____
g. Zero-Income Households	_____

16. We will reference the document(s) you provide us to calculate rent and measure improper payments during our review of your files. If you would like to provide any additional explanation regarding policies or procedures related to rent or income calculation at your project, please do so here:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

17. **Moving to Work Projects** - If you are an MTW project and have any additional instructions or explanations that you would like to add, please do so here:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

***Note:** If your policy changed at some point within our study period of November 1, 2012 to October 31, 2013, please indicate the date of the change and explain the policy in place before the change.*

**PIH Notice 2013-03 (HA), Issued on January 22, 2013**

Questions #18-20 refer to policy changes established by PIH Notice 2013-03.

18. In reference to PIH Notice 2013-03, PHAs may choose to use either actual past income or projected future income to determine a household's annual income. Please indicate the method your project used to determine a household's annual income for transactions effective November 2012 to October 2013:

- We use actual past income to determine annual income
- We did not change our policy and continue to use projected future income
- Other – Please explain:

---

If your project chose to use actual past income or some other income determination method, what date was the policy implemented? \_\_\_\_\_

19. Has your project adopted a policy for households with assets less than \$5,000 that allows these households to self-certify their asset amount and asset income?

- Yes
- No

If yes, what was the date this policy was effective at your project? \_\_\_\_\_

If yes, please describe the application of this policy at your project:

---

---

20. Has your project adopted a policy to streamline recertification for elderly and disabled households with 100% fixed income?

- Yes
- No

If yes, what was the date this policy was effective at your project? \_\_\_\_\_

If yes, please describe the application of this policy at your project:

---

---

**IV. Questions to Facilitate Data Collection**

21. Where is rent reasonableness information for households stored?

- Tenant files (either electronic or paper)
- Paper-based rent reasonableness documentation stored in one area
- Other electronic database system (not specifically in a tenant file)
- Other – Please identify the location of rent comparability documents for households in your project: \_\_\_\_\_

22. What document should our data collectors review to determine utilities for which the household is responsible?

- Allowances for Tenant Furnished Utilities (form HUD 52667)
- Request for Tenancy Approval form (form HUD 52517)
- Housing Assistance Payment Contract (form HUD 52641)
- Inspection Report
- Lease
- Other – Please identify the document here: \_\_\_\_\_

23. Does the project use form HUD-52667 (Allowances for Tenant Furnished Utilities) to show the calculation of a household’s utility allowance?

- Yes     No – Please identify the document used: \_\_\_\_\_

24. Is there a flat fee charge for utilities or other amenities that is not listed on form HUD-52667 (Allowances for Tenant Furnished Utilities)?

- Yes     No

If yes, please provide the utility/amenity, the flat fee amount, and a description of how a file reviewer will be able to determine if a flat fee is applicable?

\_\_\_\_\_

\_\_\_\_\_

25. When did your project conduct Criminal Background Checks? Please check all that apply.

- During screening at initial certification
- During recertification
- When a household member turned 18 years old
- When screening new household members
- If there were reason to believe someone was involved in a criminal activity
- Other – Please describe other times you would conduct a criminal background check: \_\_\_\_\_



26. Where did your project keep documentation showing that criminal background checks for household members were conducted?

- There is a form in the tenant file showing that we performed the check.
- There is a note in the tenant file showing that we performed the check.
- Criminal background checks were not printed out or were destroyed and there is no evidence that we conducted the review.
- In a location other than the tenant file or we have another procedure not listed above – Please identify location or clarify procedure here: \_\_\_\_\_

27. When did your project conduct sex offender screenings? Please check all that apply.

- During screening at initial certification
- During recertification
- When a household member turned 18 years old
- When screening new household members
- If there was reason to believe someone was involved in a sexual offense
- Other – Please describe other times you would conduct a sex offender check: \_\_\_\_\_

28. Where did your project keep documentation showing that sex offender screenings for household members were conducted?

- There is a form in the tenant file showing that we performed the check
- There is a note in the tenant file showing that we performed the check
- Sex offender reports were not printed out or were destroyed and there is no evidence that we conducted the review.
- In a location other than the tenant file or we have another procedure not listed above – Please identify location or clarify procedure here: \_\_\_\_\_

29. For move-ins and recertification transactions effective November 1, 2012 to October 31, 2013, are documents related to income calculation scanned and stored electronically?

- Yes      No
- Some documents are electronically stored and some are only on paper. Please explain here:

\_\_\_\_\_

30. Does your project use a questionnaire or checklist to gather information from the household during the move-in and recertification interview?

- Yes      No

31. How will our data collectors access tenant files (50058/50059 forms and supporting documentation) when they are at your project site?

- Paper tenant files will be provided to data collectors for review
- Data collectors will be given systems access to print out tenant file documentation
- Other: \_\_\_\_\_

32. Where does your project store EIV reports for households in the project?

- They are printed and stored in paper files, by household
- They are printed and stored in paper files, by a category other than household
- They are scanned and saved electronically in our systems
- The project does not keep EIV reports. The project completes a form or writes a note in the file stating that the EIV report was reviewed
- Other: \_\_\_\_\_

## V. Contact Information

Please remember that “project” refers to tenants participating in the HCV program and living in the county or township we have identified.

**Contact Information for Project Sites** - When we start collecting data, we will need to know where tenant files are stored. Please provide the name, address, and contact information for the project site where tenant files for the above listed project can be located:

### Primary Contact

Name of Site Contact: \_\_\_\_\_

Site Contact Phone Number: \_\_\_\_\_

Site Contact Email: \_\_\_\_\_

Office’s Hours of Operation: \_\_\_\_\_

Office Name: \_\_\_\_\_

Project Address: \_\_\_\_\_

### Secondary Contact

Name of Site Contact: \_\_\_\_\_

Site Contact Phone Number: \_\_\_\_\_

Site Contact Email: \_\_\_\_\_

Office’s Hours of Operation: \_\_\_\_\_

Office Name: \_\_\_\_\_

Project Address: \_\_\_\_\_

**Study Contact Information** - We would like to contact you if we have questions about the answers you provided in this survey or other questions about the project. Please provide your contact information below:

Name of Site Contact: \_\_\_\_\_

Site Contact Phone Number: \_\_\_\_\_

Site Contact Email: \_\_\_\_\_

Office’s Hours of Operation: \_\_\_\_\_

Office Name: \_\_\_\_\_

Project Address: \_\_\_\_\_

We need an **alternate study contact** who can answer questions about the project in the event that you are not available. Please provide information for an alternate study contact below:

Name of Site Contact: \_\_\_\_\_

Site Contact Phone Number: \_\_\_\_\_

Site Contact Email: \_\_\_\_\_

Office’s Hours of Operation: \_\_\_\_\_

Office Name: \_\_\_\_\_

Project Address: \_\_\_\_\_

<b>Next Steps</b>
-------------------

**Project Specific Questionnaire (PSQ)**

In a few months we will be sending your project a longer survey called the Project Staff Questionnaire. The PSQ asks questions related to project staff, training, quality control practices, and recertification procedures.

**Field Interviewer/Data Collector**

Additionally, we will be sending out a HUDQC Field Interviewer to your project site sometime between December 2013 and April 2014. If you have any scheduling issues or conflicts that you know of at this time, please let us know here or you can always email us at [hudqc@icfi.com](mailto:hudqc@icfi.com):

---

---

**General Feedback**

You can provide general feedback to us about this survey here or, if you prefer, you can email us your comments and feedback at [hudqc@icfi.com](mailto:hudqc@icfi.com):

---

---

---

<b>Thank You for Your Participation</b>
---

Thank you for completing the HUDQC Study FY2013 Project Specific Information questionnaire. Your answers are very important to us and we appreciate your time.

As stated at the beginning of the PSI, if you are a large PHA or manage multiple project-based rental assistance sites, we may have selected multiple projects for this study. If this is the case for your PHA, you must complete this survey for **EACH** project that has been selected.

**Thanks Again!**