COVID-19 Supplemental Payment (CSP) Request

U.S. Department of Housing and Urban Development Office of Housing Federal Housing Commissioner

OMB Approval No. 2502-XXXX (Exp. XX/CC/CC)

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оф. <u>Е</u>	Project/Management Company Email Address	Á CSP Request Type (I or II) Complete Parts I to III to determ	ine)
Part I. Am	nounts Requested for Eligible COVID-19 Operating	Expense Increases	
			Requested Amount
1. Payroll Co	sts: Custodial or Other Operational Staff (OT or other staff increase) (6	510)	
2. Contract S	Services: Cleaning/Sanitizing or Security Services (6520/6530)		
3. Payroll Co	sts: Administrative Functions (OT or increase in hours if part-time) (63	10)	
4. Contract S	Services: Administrative Functions (6390)		
5. Cleaning/S	Sanitizing Supplies and PPE (6515/6590)		
6 Office Equi	pment/ IT (6311)		
7. Other Allov	wable Costs (Specify Budget Line)		
8 . Total Req	uest Part I (calculated field)		-
	ultifamily Service Coordination for the Elderly and lition 8 and Section 202 Properties Only; see Notice H 2020-X, Section		
9. Payroll Co	sts (OT or Increase in hours if Part-Time) (MFSC) (6900)		
10. Coordina	tor Contract Services (MFSC) (6900)		
11. Office Eq	uipment/IT (MFSC) (6900)		
12. PPE (MF	SC) (6900)		
13. Total Red	quest Part II (calculated field)		
14. TOTAL C	COVID-19 Supplemental Payment Requested (calculated field; sum	of lines 8 and 13)	_
Part III. C	alculation of Tier I Standard Payment Cap		
	of Assisted Units Under Contract		
	ed Allowance (calculated field; - per unit)		-
17. Additiona	al Property Allowance (\$1k) Where Designated to Serve the Elderly (se	e Notice H 2020-X. Footnote 3)	
	Property Allocation	•	
	e for Ongoing Service Coordination (Eligible Budget-Based Coordinate	ors Only)	
(calcula	e for Ongoing Service Coordination (Eligible Budget-Based Coordinate ted field: lesser of \$3.000 or line 13 total)	ors Only)	
	e for Ongoing Service Coordination (Eligible Budget-Based Coordinate ted field; lesser of \$3,000 or line 13 total) Tier 1 Standard Payment* (calculated field)	ors Only)	
20. Maximur	ted field; lesser of \$3,000 or line 13 total)		
20. Maximur * Tier 1 payme	ted field; lesser of \$3,000 or line 13 total) m Tier 1 Standard Payment* (calculated field) nts are only available to the extent required for eligible project cost increase		
20. Maximum * Tier 1 payme. Part IV. Ti Properties re for amounts a	ted field; lesser of \$3,000 or line 13 total) m Tier 1 Standard Payment* (calculated field)	s and will not exceed the total on line 14. 1) do not need to complete Part IV and shown in the complete of t	The state of the s
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Financial Need Justification for Tier II (Only Required for Properties with Recent Surplus Cash; See Notice H 2020-08, Section VIII) th supplemental pages needed. **T V. Other Supplemental Information (Both Tier I and Tier II Requests) tas this property/ownership entity received funding from other assistance program authorized by the CARES Act (P.L. Public Law 116-136)? (YN)	
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f yes, which program? How much was awarded/provided?	(Y/N)
Do you currently have a budget-based rent increase pending with HUD? (Y/N)	(Y/N)

Part V. Certification and Acceptance of Terms

Owner's Certification: I certify that 1) the requested payment was computed in accordance with HUD's Housing Notice H-2020-XX. It reflects only expenses incurred from March 27, 2020 and July 31, 2020 for eligible activities and purposes. (2) No amount included on this funding request has been paid from other forms of governmental or philanthropic assistance provided to address the impact of COVID-19. (3) I have considered current project funds and anticipated revenues over the next 12 months and require this funding in order to address project operating costs. (4) If receiving CSP assistance for a Section 8 HAP contract, I agree to deposit an amount equal to the amount of the CSP in the residual receipt account, prior to taking any cash distributions before July 31, 2021. Or, if the Section 8 contract and governing regulations do not require the project owner to maintain a residual receipt account, I agree that upon taking distributions at any point from the issue date of this notice through July 31, 2021, an amount at least equal to the amount of the CSP must be retained in the operating account to address future project costs, over-and-above the resources needed for current operating requirements. (5) The property and ownership are in good standing with HUD, as defined in in Section VII of Housing Notice 2020-XX. (6) If receiving CSP assistance for a Section 8 HAP contract that expires within 120-days, I anticipate renewal of the contract and have not communicated intent to opt-out. (7) Upon request by the Department of Housing and Urban Development, its duly authorized representative, or the Comptroller General of the United States, I will make available for audit all books, records and documents related to this assistance payment for which funds are in. Warning: HUD will prosecute false claims & statements, which may result in criminal conviction and/or the imposition of criminal fines and/or civil penalties, to the full extent allowed by law.

29. Owner/Owner Agent Signature

30. Date O/A Signature

Part VI. HUD/CA Use Only

- 31. Date Received by HUD/CA
- 32. Total Amount Eligible for Payment (enter \$0 for incomplete of otherwise ineligible requests)
- 33. Notes on Any Disallowed Costs:
- 34. Approved By (Print Name)
- 35. Approver Signature

36. Date Approved

This form must be completed by owners to request payment of supplemental assistance that offsets cost increases incurred by owners operating under contracts with HUD for project-based rental assistance under Section 8, Section 202, and Section 811. Please consult Housing Notice H-20-X for additional information on eligibility requirements.

The Department of Housing & Urban Development is authorized to collect this information by the Coronavirus Aid, Relief, and Economic Security Act (CARES Act) (Pub. L. 116-136). The CARES act provided an additional \$1 billion under the heading *Project-Based Rental Assistance* (PBRA) for Section 8 properties, \$50 million under the heading *Housing for the Elderly* (Section 202), and \$15 million under the heading *Housing for Persons with Disabilities* (Section 811) to "prevent, prepare for, and respond to coronavirus, including to provide additional funds to maintain normal operations and take other necessary actions during the period that the program is impacted by coronavirus."

The owner/agent must provide all information in order to be considered for a COVID-19 Supplemental Payment. The information provided will be used by HUD to determine if a request may be funded and the appropriate level of funding to provide.

HUD may disclose this information to Federal, state, and local agencies when relevant to civil, criminal, or regulatory investigations and prosecutions. Otherwise, it will not be disclosed or released outside of HUD, except as permitted or required by law. HUD does not promise confidentiality but will not disclose data on specific tenants. No questions of a sensitive nature are asked in this form.

Public reporting burden for this collection of information is estimated to average 1.1 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.

control number