

# Comparison PHA Survey: Follow-Up

MTW Evaluation: Landlord Incentives

Last Modified: September 29, 2024

## Study Overview and Introduction to Survey

Thank you very much for taking the time to complete this brief survey. HUD has hired Abt Global to learn about landlords in the HCV program.

Your PHA has been selected for the study so we can understand efforts that PHAs are making to increase landlord acceptance of Housing Choice Vouchers in their communities. The goal of this study is to better understand how different factors, including local market conditions and PHA activities, influence landlord's willingness to rent to voucher holders.

In this survey, we will ask you about your agency's activities related to landlord recruitment, retention, and engagement and related topics.. We will use this information to help us understand the activities of PHAs.

Your responses will be used for research purposes only, not for compliance monitoring or funding determinations. We may share your responses with HUD and in public-facing reports about this study. However, when we share your responses with HUD or in reports about the study, we will remove your name and your agency's name and PHA code.

This survey has been reviewed by the Office of Management and Budget (OMB) under the Paperwork Reduction Act of 1995. The OMB control number is XXXX-XXXX, expiring XX-XXXXX. We expect the survey to take less than 30 minutes to complete.

By completing this survey, you consent to participate in this study. Feel free to share the survey with other staff as needed to answer the questions. If you cannot or do not want to answer a question, you may skip it and move to the next one.

If you have any questions about this survey, please contact Nishi Kumar, PHA Survey Lead, at nishi kumar@abtassoc.com or 617-520-2680.

Public Reporting Burden for this information collection is estimated to average 30 minutes per respondent, including time to review the information in the Study Overview and Introduction to the Survey. The MTW Evaluation: Landlord Incentives is a study of the implementation and impacts of providing selected incentives to landlords to participate in the Housing Choice Voucher (HCV) program. This information is being collected to establish a follow-up measure of PHA activities that could affect landlord participation in the HCV program. PHAs are not required to respond. The information requested is protected and held confidential in accordance with 5 U.S.C. § 552a (Privacy Act of 1974) and OMB Circular No. A-130.

# **Survey Questions**

## Part A: Contact Information

| 1. | Please confirm | your PHA | information | and your | contact | information | below. |
|----|----------------|----------|-------------|----------|---------|-------------|--------|
|----|----------------|----------|-------------|----------|---------|-------------|--------|

• PHA Name: [prepopulated]

• PHA Code: [prepopulated]

• Staff Contact Name: [prepopulated] • Staff Contact Position: [prepopulated]

• Staff Contact Phone: [prepopulated] Staff Contact Email: [prepopulated]

### Part B: PHA Background

| 2.  | Since [YEAR OF LAST SURVEY], have there been any new state laws or local ordinances within |  |  |  |  |
|---|--|--|--|--|--|
|   | your PHA's service area that prohibit landlords from discriminating against tenants with a |  |  |  |  |
|   | voucher?   |  |  |  |  |
|   | □ Yes – Please indicate when this ordinance or law was implemented: [MM/YY]                |  |  |  |  |
|   | □ No   |  |  |  |  |
| 3. Does your agency base rents on Small Area Fair Market Rents (SAFMR) or Fair Ma   |  |  |  |  |  |
|   | (FMR)?   |  |  |  |  |
|   | □ SAFMR (skip to Q5)   |  |  |  |  |
|   | □ FMR  |  |  |  |  |
| 4. Based on your FMR, what your current payment standard (on average if different b |  |  |  |  |  |
|   | size)?   |  |  |  |  |
|   | •% of FMR ( <i>Skip to Q6</i> )  |  |  |  |  |
| 5. Based on your SAFMR, what is your agency's:                                      |  |  |  |  |  |
|   | <ul> <li>Lowest payment standard:% of SAFMR</li> </ul>                                     |  |  |  |  |
|   | <ul> <li>Highest payment standard:% of SAFMR</li> </ul>                                    |  |  |  |  |

#### Part C: Landlord Relationships & Incentives

| 6. | Is your  | s your agency currently encountering any of the following challenges related to recruiting or |  |  |  |
|----|----------|---|--|--|--|
|    | retainir | retaining landlords for the HCV program? Check all that apply.                                |  |  |  |
|    |          | Payment standards not competitive with market rents   |  |  |  |
|    |          | Limited supply of rental housing  |  |  |  |
|    |          | Poor housing quality/available rentals do not meet inspection standards                       |  |  |  |
|    |          | Negative perceptions of HCV tenants among landlords   |  |  |  |
|    |          | Negative perceptions of PHA or HUD among landlords  |  |  |  |
|    |          | Landlord concerns about HCV inspection process  |  |  |  |
|    |          | Landlord concerns about delays in lease-up  |  |  |  |
|    |          | Landlord concerns about evictions or other recourse for lease violations                      |  |  |  |
|    |          | Landlord concerns about timeliness of payments  |  |  |  |
|    |          | Other, please describe:   |  |  |  |
| 7. | Does v   | our agency currently provide any of the following resources/supports to engage landlords?     |  |  |  |

Check all that apply.

 Dedicated landlord liaison □ Landlord advisory board

- □ Landlord-facing website
   □ Partnerships with landlord industry groups
   □ Landlord training or learning events
   □ Direct deposit of rental payments to landlords
   □ Shorter (less than one year) HCV leases
   □ Other, please describe: \_\_\_\_\_
- □ [TBD other options may be added if additional flexibilities are made available to PHAs during study period]
- 8. Does your agency currently offer any of the following to increase landlord participation in HCV? Check all that apply.
  - ☐ Inspection flexibilities (e.g., reduced inspection schedule, pre-qualifying units)
  - ☐ Financial incentives for landlords (e.g., signing bonus, damage claims)
  - □ Enhanced payment standards (e.g. increased payment standards, changed to SAFMR)
  - □ Other please describe: [Open]

#### Part D: Inspection Flexibilities

- 9. You indicated that your agency has implemented inspection flexibilities to increase landlord participation in the HCV Program. Does your agency currently offer any of the following inspection flexibilities?
  - □ Pre-inspecting units for HQS approval before a RFTA is completed
    - When did your agency begin offering pre-inspection? [MM/YY]
    - Which units/landlords are eligible for pre-inspection (for example, newly-constructed units only)? [Open]
    - How long does the pre-inspection remain valid before move-in (for example, 30 days or 60 days)? [Open]
    - How many units have passed a pre-inspection? Indicate the time period for this information. [Number; between MM/YY MM/YY]
    - How many pre-qualified units resulted in a successful lease-up during the same time period? [Number]
    - Did your agency seek a HUD waiver to implement pre-inspections?
  - □ Reducing the frequency of HQS inspections
    - When did your agency begin offering a reduced inspection schedule? [MM/YY]
    - Which units/landlords are eligible for a reduced inspection schedule (e.g., new units only)? [Open]
    - What is the minimum frequency for HQS inspections for HCV units (e.g., biennial, triennial)? [Open]
    - Did your agency seek a HUD waiver to implement this policy?
  - □ Waiving the mandatory initial HQS inspection
    - When did your agency begin offering a waiver of the initial HQS inspection?
       [MM/YY]
    - Which units/landlords are eligible for a waiver of the initial inspection (e.g. newly-constructed units only; passed HQS within the past 3 years, etc)?
    - How many units have received a waiver of the initial inspection? Indicate the time period for this information. [Number; between MM/YY MM/YY]
    - Did your agency seek a HUD waiver to implement this policy?
  - □ Other inspection flexibility, please describe [Open]

• Please tell us more details about this inspection flexibility, including eligibility criteria and the number of units that have received this flexibility.

#### Part E: Financial Incentives for Landlords

- 10. You indicated that your agency has implemented direct financial incentives for landlords. Does your PHA currently offer any of the following financial incentives for landlords? Check all that apply, even if they are not currently active.
  - □ Payments for vacancy loss during turnover
    - When did your agency begin offering vacancy loss payments? [MM/YY]
    - Which landlords/units are eligible for vacancy loss payments?
    - What is the maximum vacancy loss payment that can be made for a single landlord/unit?
    - How many vacancy loss payments have been made to landlords? Indicate the time period for this information. [Number; between MM/YY MM/YY]
    - What is the total value of vacancy loss payments that have been made to landlords during the same time period? [\$Value]
  - □ Reimbursement for tenant-caused damages
    - When did your agency begin offering damage reimbursements? [MM/YY]
    - Which landlords/units are eligible for damage reimbursements?
    - What is the maximum damage reimbursement that can be made for a single landlord/unit?
    - How many damage reimbursement payments have been made to landlords? How many vacancy loss payments have been made to landlords? Indicate the time period for this information. [Number; between MM/YY MM/YY]
    - What is the total value of damage reimbursement payments that have been made to landlords during the same time period? [\$Value]
  - □ Signing bonus for new landlords/units
    - When did your agency begin offering signing bonuses? [MM/YY]
    - Which landlords/units are eligible for the signing bonus?
    - What is the maximum signing bonus payment that can be made for a single landlord/unit?
    - How many signing bonus payments have been made to landlords? How many vacancy loss payments have been made to landlords? Indicate the time period for this information. [Number; between MM/YY – MM/YY]
    - What is the total value of signing bonus payments that have been made to landlords during the same time period? [\$Value]
  - □ Renewal bonus for returning landlords/units
    - When did your agency begin offering renewal bonuses? [MM/YY]
    - Which landlords/units are eligible for the renewal bonus?
    - What is the maximum renewal bonus payment that can be made for a single landlord/unit?
    - How many renewal bonus payments have been made to landlords? How many vacancy loss payments have been made to landlords? Indicate the time period for this information. [Number; between MM/YY – MM/YY]
    - What is the total value of renewal bonus payments that have been made to landlords during the same time period? [\$Value]
  - □ Security deposit assistance

- When did your agency begin offering security deposit assistance? [MM/YY]
- Which landlords/units are eligible for security deposit assistance?
- What is the maximum security deposit assistance payment that can be made for a single landlord/unit?
- How many security deposit assistance payments have been made to landlords?
   How many vacancy loss payments have been made to landlords? Indicate the time period for this information. [Number; between MM/YY MM/YY]
- What is the total value of security deposit assistance payments that have been made to landlords during the same time period? [\$Value]
- □ Landlord referral bonus
  - When did your agency begin offering referral bonuses? [MM/YY]
  - Which landlords/units are eligible for the referral bonus?
  - What is the maximum referral bonus payment that can be made for a single landlord/unit?
  - How many referral bonus payments have been made to landlords? Indicate the time period for this information. [Number; between MM/YY MM/YY]
  - What is the total value of referral bonus payments that have been made to landlords during the same time period? [\$Value]
- □ Other financial incentive, please describe [Open]
  - When did your agency begin offering this financial incentive?
  - Which landlords/units are eligible for this financial incentive?
  - How many of these incentive payments have been made to landlords? Indicate the time period for this information. [Number; between MM/YY MM/YY]
  - What is the total value of the incentive payments made to landlords during the same time period?
- 11. What source(s) of funding is your agency using to pay for landlord financial incentives? Check all that apply.

| HCV HAP funds                         |
|---------------------------------------|
| HCV Admin Fee or Admin Fee reserves   |
| Public Housing Operating/Capital fund |
| State or local funding                |
| Philanthropic funding                 |
| Other place describes                 |

#### Part H: Other

- 12. Since [YEAR OF LAST SURVEY] have there been any other program changes or activities that might impact landlord participation in the HCV program (for example, a new outreach campaign or a new landlord liaison staff)? If so, please describe these changes.
- 13. Since [YEAR OF LAST SURVEY], have there been other changes within your jurisdiction that may have led to changes in landlord participation in the HCV Program (for example, legislative or political changes, market shifts, or natural disasters affecting the rental market)? If so, please describe below.
- 14. Is there anything else you would like to share with the study team about your PHA's efforts to increase landlord participation in the HCV Program?

Thank you for participating in this survey. We appreciate your support in this research.