

Affirmative Fair Housing Marketing Plan

U.S. Department of Housing and Urban Development
Office of Fair Housing and Equal Opportunity and Ohio Department of Development

1.a. Applicant's Name, Address (City, State, Zip Code), Phone and Fax 	1.c. Type of Application <input type="checkbox"/> Housing Tax Credit <input type="checkbox"/> HDAP 1.f. For Multi-Family Only <input type="checkbox"/> Elderly <input type="checkbox"/> Non-Elderly	1.d. Number of Units 1.g. Approximate Starting Dates: Advertising: Occupancy:	1.e. Price Range or Rental Range From \$ To \$																				
1.b. Project Name, Location (including City, State, Zip Code)	1.h. County: 1.j. Managing Sales Agent's Name and Address: City, State, Zip Code		1.i. Census Tract:																				
2. Type of Affirmative Marketing Plan: (Mark only one, see instructions) <input type="checkbox"/> Project Plan <input type="checkbox"/> Minority Area <input type="checkbox"/> White (non-minority) Area <input type="checkbox"/> Mixed Area (with _____% minority residents) <input type="checkbox"/> Annual Plan (for single-family scattered site units) Note: A separate Annual Plan must be developed for each type of census tract in which the housing is to be built/rehabilitated.	3. Direction of Marketing Activity: (indicate which group(s) in the housing market area are least likely to apply for the housing because of its location and other factors without special outreach efforts) <input type="checkbox"/> White (non-Hispanic) <input type="checkbox"/> Hasidic Jews <input type="checkbox"/> Asian or Pacific Islander <input type="checkbox"/> Hispanic <input type="checkbox"/> Disabled <input type="checkbox"/> American Indian or Alaskan Native <input type="checkbox"/> Black (non-Hispanic) <input type="checkbox"/> Families with children																						
4.a. Marketing Program: Commercial Media: (Check the type of Media to be used to advertise the availability of this housing) <input type="checkbox"/> Radio <input type="checkbox"/> TV <input type="checkbox"/> Billboards <input type="checkbox"/> Newspaper/Publications <input type="checkbox"/> Other (specify) _____ <table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="width:33%;">Name of Newspaper, Radio, or TV Station</th> <th style="width:33%;">Racial/Ethnic Identification of Readers/Audience</th> <th style="width:34%;">Size/Duration of Advertising</th> </tr> </thead> <tbody> <tr><td>1.</td><td></td><td></td></tr> <tr><td>2.</td><td></td><td></td></tr> <tr><td>3.</td><td></td><td></td></tr> <tr><td>4.</td><td></td><td></td></tr> </tbody> </table>				Name of Newspaper, Radio, or TV Station	Racial/Ethnic Identification of Readers/Audience	Size/Duration of Advertising	1.			2.			3.			4.							
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4.b. Marketing Program: Brochures, Signs, and HUD and/or Local Fair Housing Poster (1) Will brochures, letter, or handouts be used to advertise? <input type="checkbox"/> Yes <input type="checkbox"/> No If "Yes" attach a copy or submit when available. (2) For project site sign, indicate sign size _____ X _____. Logotype size _____ X _____. Attach a photograph of project sign or submit when available. (3) The local Fair Housing agency's Fair Housing Poster must be conspicuously displayed wherever sales/rentals and showings take place. Fair Housing Posters will be displayed in the: <input type="checkbox"/> Real Estate Office <input type="checkbox"/> Model Unit <input type="checkbox"/> Sales/Rental Office <input type="checkbox"/> Other (specify): _____																							
4.c. Community Contacts: To further inform the group(s) least likely to apply about the availability of the housing, the applicant agrees to establish and maintain contact with groups/organizations listed below that are located in the housing market area or SMA (provide at a minimum 3 groups/organizations other than an affiliate). If more space is needed attach an additional sheet. Notify HCP of any changes in this list. The applicant is required to analyze the effectiveness of the strategy annually and make necessary adjustments. Attach a copy of correspondence to be mailed to these groups/organizations or currently not available, maintain on file. Provide all requested information. <table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="width:30%;">Name of Group/Organization</th> <th style="width:20%;">Racial/Ethnic Identification</th> <th style="width:20%;">Approximate Date</th> <th style="width:30%;">Group/Organization Contact Person</th> </tr> </thead> <tbody> <tr><td>1.</td><td></td><td></td><td></td></tr> <tr><td>2.</td><td></td><td></td><td></td></tr> <tr><td>3.</td><td></td><td></td><td></td></tr> <tr><td>4.</td><td></td><td></td><td></td></tr> </tbody> </table>				Name of Group/Organization	Racial/Ethnic Identification	Approximate Date	Group/Organization Contact Person	1.				2.				3.				4.			
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5. Future Marketing Activities (Rental Units Only): Mark all applicable box(es). <input type="checkbox"/> Radio <input type="checkbox"/> TV <input type="checkbox"/> Newspaper/Publications <input type="checkbox"/> Brochures/Handouts <input type="checkbox"/> Site Signs <input type="checkbox"/> Community Contacts <input type="checkbox"/> Other (specify): _____																							
6. Experience and Staff Instructions: (See instructions) 6.a. Staff has experience <input type="checkbox"/> Yes <input type="checkbox"/> No 6.c. Name of Local Fair Housing Agency: Contact: Address: <div style="text-align: right;">Phone: _____</div>		6.b. On separate sheets, indicate training to be provided to staff on Federal, State, and local fair housing laws and regulations, as well as this AFHM Plan. Attach a copy of the instructions to staff regarding fair housing and the policy for referrals of housing questions and complaints to the Local Fair Housing Agency.																					
7. Additional Considerations: Adopt a policy and procedures that informs the public, potential tenants, and property owners of the Affirmative Marketing Policy/Strategy. Attach additional sheets as needed. Also, attach any additional considerations.																							
8. Changes and Revisions: By signing this form, the applicant agrees, after the appropriate consultation with OHCP or OHFA to change any part of the plan covering a multifamily project to ensure continued compliance with OHCP and OHFA's Affirmative Marketing Policy and Section 200.620 of 24 CFR of HUD's Affirmative Marketing Regulations.																							
Signature of Person Submitting this Plan and Date of Submission: <div style="text-align: right;">Date: _____</div>		Name (type or print)	Title and Name of Company																				