## **SALEM HOUSING AUTHORITY**

Attn: HQS Inspections 360 Church Street SE Salem Oregon 97301-3707

TDD Users: Dial 711 Fax: 503-588-6465

Date Received by SHA:

Action taken:

Inspector's Initials:

housing@cityofsalem.net

Passed

Failed

## Housing Quality Standards (HQS) Repair Self-Certification

The landlord must use this form to certify in writing that the repairs have been completed to the unit prior to the deadline specified on the HQS deficiency notice. **Participant's Name: Deadline Date: Unit Address:** Inspection Date: Owner/Landlord's Name: Phone: Owner/Landlord's Address: The above unit failed its HQS inspection and is not in compliance with HUD Housing Choice Voucher Program (HCVP) requirements. After the repairs have been completed in a manner approved by the Salem Housing Authority (SHA), the Owner/Landlord must complete and sign this Repair Self-Certification form and return to Salem Housing Authority no later than the deadline date above. The form may be mailed, faxed, hand-delivered to the SHA office, or e-mailed to dpetersen@cityofsalem.net. If the Repair Certification form is not returned to SHA by the deadline date, the unit will be considered failed and the Housing Assistance Payments (HAP) will be abated (withheld) after the deadline date for completion of repairs. Please check the option that applies to your inspection: The Owner-Landlord does hereby certify that the deficiencies identified in the inspection completed on the above date have been repaired and that the unit meets minimum housing quality standards as defined in the HAP contract and HUD regulations. The signature below certifies that the required repair(s) for the owner/landlord as listed on the HQS repair notice referenced above have been completed and the unit is now in compliance with HUD HQS requirements. It is further understood that, if at any time after the execution of this certification it is determined that repairs were not completed in a satisfactory manner, all Housing Assistance Payments (HAP) made since the due date for repairs will be abated and payments already made to the landlord will be recovered by SHA. Owner/Landlords must have a documented history of HQS compliance through SHA to qualify for use of this Repair Self-Certification. SHA may verify the completeness of all repairs by a Quality Control Inspection within 90 days of the initial date of inspection. My signature below certifies that I have read, understood, and agree to the terms of this self-certification, that all repairs have been made for the inspection listed on the top of this form and that the unit listed above does comply with the HQS requirements as defined by HUD and SHA. I understand that making false statements, committing fraud, misrepresentation or providing false information of any kind may be grounds for termination of participation for both the tenant and landlord. Owner-Landlord Name: Date: Owner-Landlord Signature: Office Use Only

Unit Selected for Quality Control Inspection on: