

Anniston Housing Authority

500 Glen Addie Ave. Anniston, AL 3620

P.O. Box 2225 Anniston, AL 36202 Phone 256-236-1575 Fax 256-403-1520

HOUSING QUALITY STANDARDS (HQS) REPAIR SELF-CERTIFICATION

Please note: This form can only be used to certify that HQS deficiencies listed on the HQS Notice have been corrected. Both the Owner/Property Manager and the Participant/Tenant must use this form to certify in writing that the repairs have been completed prior to the deadline date indicated on the HQS Notice.

Inspection Date	<input type="text"/>	Re- Inspection Due Date	<input type="text"/>								
Name of Owner	<input type="text"/>	Name of Tenant	<input type="text"/>								
Owner Address	<input type="text"/>	Unit Address	<input type="text"/>								
City	<input type="text"/>	State	<input type="text"/>	Zip	<input type="text"/>	City	<input type="text"/>	State	<input type="text"/>	Zip	<input type="text"/>

The above-referenced unit failed an HQS inspection and is not in compliance with the Anniston Housing Authority Housing Choice Voucher Program (HCVP) requirements. After the repairs have been completed in a satisfactory manner, the landlord and the tenant must sign this form to certify the satisfactory completion of repairs. This form must be received prior to the deadline date indicated on the attached HQS Notice to avoid further action. The form may be mailed, hand delivered, faxed, or scanned to the above address or emailed directly to the AHA Inspection Department at sfagan@annistonhousing.org.

If repairs have not been completed by the deadline date and a signed HQS Repair Self-Certification is not returned to the inspector the unit will be considered failed. The Housing Assistance Payments (HAP) will be abated on the first of the following month, the expiration of AHA specified correction period (including extensions).

The signatures below certify that the required repair(s) have been completed and the unit is now in compliance with AHA HQS. It is further understood that if at any time after the execution of the certification it is determined that the 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 recouped by AHA.

Landlords must have a history of HQS compliance through AHA to qualify for use of this Repair Self-Certification. AHA may verify the completeness of all repairs by a "Special Inspection" within 30 days of the due date for the repairs.

Our signatures below certify that we have read, understood, and agree to the terms of this form, that all repairs have been made and that the unit listed above does comply with the HQS requirements of AHA.

We 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 Participant/Tenant and Owner/Property Manager. We further understand that making false statements, committing fraud, misrepresentation or providing false information is punishable under state and federal law.

Signature of Owner/Property Manager Date

Signature of Participant/Tenant Date