



U.S. DEPARTMENT OF HOUSING AND URBAN DEVELOPMENT
WASHINGTON, DC 20410-5000

OFFICE OF PUBLIC AND INDIAN HOUSING

Special Attention of:

Public Housing Agencies administering the Housing Choice Voucher and/or Public Housing Programs; Public Housing Field Office Directors; CPD Directors; Continuums of Care

NOTICE PIH 2023-13, CPD 2023-05

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Supersedes: PIH Notice 2013-15

Cross References: PIH Notice 2015-19, PIH Notice 2017-21 (HA), CPD Notice 2017-01

Subject: Guidance on housing individuals and families experiencing homelessness through the Public Housing and Housing Choice Voucher Programs

1. **Applicability:** This Notice applies to public housing agencies (PHAs) administering Public Housing and/or Housing Choice Voucher (HCV) programs and Continuums of Care (CoCs).
2. **Purpose:** This Notice supersedes previous guidance found in PIH Notice 2013-15 and identifies strategies that PHAs can pursue to expand housing opportunities for individuals and families experiencing homelessness through the Public Housing and HCV programs. Specifically, this Notice:
 - Revises the definition of homelessness for the purpose of reporting in the Inventory Management System/Public Housing Information Center (IMS/PIC) or its successor system,
 - Outlines new guidance on how PHAs and CoCs can share data derived from IMS/PIC or its successor system and the Homeless Management Information System (HMIS),
 - Provides updated guidance on:
 - o waiting list management and preferences,
 - o screening policies regarding criminal activity, substance use, and rental history,
 - o program termination and eviction policies, and
 - o information regarding pairing project-based vouchers with CoC Supportive Services¹ to create Permanent Supportive Housing

As authorized by the Consolidated Appropriations Act, 2022 (P.L. 117-103), HUD

¹ [CoC Eligible Activities – Supportive Services – HUD Exchange \(This resource was developed by a HUD funded technical assistance provider\).](#)

published PIH Notice 2022-29, awarding more than 19,000 new HCVs to PHAs that may be used as an additional resource to combat homelessness in local communities. The Fiscal Year 22 Appropriations provides that “the Secretary may specify additional terms and conditions to ensure that public housing agencies provide vouchers for use by survivors of domestic violence, or individuals and families who are homeless, as defined in section 103(a) of the McKinney-Vento Homeless Assistance Act (42 U.S.C. 11302(a)), or at risk of homelessness as defined in section 401(1) of such Act (42 U.S.C. 11360(1)).” This Notice describes how PHAs can use these new vouchers strategically by collaborating with their local CoC to establish preferences to assist individuals and families who are experiencing or at-risk of experiencing homelessness (See Section 11 of the Notice for additional information on preferences for admission). In addition to information on preferences, this Notice addresses multiple ways in which PHAs can most effectively target and serve families experiencing homelessness through updated occupancy policies.

3. **Background:** CoCs and PHAs play a critical role in the efforts to end homelessness. Across the country, PHAs administer approximately 850,000 units of public housing and 2.6 million HCV subsidies, providing safe, stable, and affordable housing for low- and extremely low-income households. Many households entering public housing or the HCV program transition from CoC-funded projects. HUD encourages PHAs to become familiar with their local CoC’s projects and coordinated entry systems to strengthen collaborations that can make each organization’s efforts more effective.

In partnership with the United States Interagency Council on Homelessness (USICH), HUD created a new initiative called [House America](#). Through this initiative, HUD invited mayors, city and county leaders, Tribal nation leaders, and governors to leverage American Rescue Plan funds as well as other Federal, Tribal, State, and local resources to nationally re-house 100,000 households experiencing homelessness through a Housing First approach and to bring 20,000 new units of affordable housing into development by December 31, 2022. Local collaboration is essential to House America’s success, requiring coordinated efforts by PHAs and CoCs to match available resources to unstably housed families. As of January 2023, 105 communities across 31 states and territories housed more than 100,00 households experiencing homelessness and added over 40,000 affordable housing units into development.

While coordinating with HUD on House America, USICH released its strategic plan, “[The Federal Strategic Plan to Prevent and End Homelessness](#)” in December 2022. To help meet the Administration’s goal of reducing homelessness by 25% by January 2025, the plan focuses on ways to provide housing and supports, homelessness response, and homeless prevention, by effectively using equity, data, and collaboration. The plan’s emphasis on equity reflects a priority of both HUD and USICH. Black, Latino, and Indigenous and Native American persons, Asian Americans and Pacific Islanders and other persons of color experience homelessness at significantly higher and disproportionate rates than White people, and eliminating these racial disparities is not only a focus of HUD and USICH but also The White House, as evidenced in the [Executive Order On Advancing Racial Equity and Support for Underserved Communities Through the Federal Government](#). The Administration has committed to advancing

equity, civil rights, racial justice, and equal opportunity by redressing inequities in policies and programs that serve as barriers to equal opportunity across the Federal Government.

HUD is expanding its guidance related to how PHAs can leverage their public housing and HCV resources to assist individuals and families who are experiencing homelessness, including how PHAs can work with their local CoC to accept referrals from a Coordinated Entry System (CES). This Notice also updates the definition of homeless for Form HUD-50058 reporting to include Categories 2 and 3 of the definition under 24 CFR 578.3.

PHAs play an integral role in offering safe, stable, and affordable housing solutions within their communities, particularly to households with the lowest incomes and greatest barriers to housing. PHAs have taken varied approaches to assist individuals and families experiencing homelessness, both through relationships with partnering organizations and by implementing thoughtful policies and procedures aimed at removing barriers to housing homeless individuals and families. This Notice also provides information on these strategies.

4. **Definitions:**

- Homeless² – The CoC program definition of homeless at 24 CFR 578.3 includes the following four “homeless” categories. Categories 1 through 3 are based on section 103(a) of the McKinney-Vento Homeless Assistance Act, whereas Category 4 is based on section 103(b) of that Act. PHAs should keep this distinction in mind when determining whether an individual or family is homeless as defined by section 103(a) of the McKinney-Vento Homeless Assistance Act.
 1. Category 1: Individual or family who lacks a fixed, regular, and adequate nighttime residence, meaning:
 - i. Has a primary nighttime residence that is a public or private place not designed for or ordinarily used as a regular sleeping accommodation for

² For purposes of programs such as the Emergency Solutions Grants and Continuum of Care Programs, section 605 of the Violence Against Women Act Reauthorization Act of 2022 (VAWA 2022) amended section 103(b) of the McKinney-Vento Homeless Assistance Act to require HUD to consider as homeless “any individual or family who— (1) is experiencing trauma or a lack of safety related to, or fleeing or attempting to flee, domestic violence, dating violence, sexual assault, stalking, or other dangerous, traumatic, or life-threatening conditions related to the violence against the individual or a family member in the individual's or family's current housing situation, including where the health and safety of children are jeopardized; (2) has no other safe residence; and (3) lacks the resources to obtain other safe permanent housing.” Rulemaking will be needed to require Emergency Solutions Grants (ESG) recipients and subrecipients, Continuums of Care (CoCs), and CoC Program recipients and subrecipients to make corresponding changes to the applicable written standards, coordinated entry policies, and documentation policies used to qualify individual and families as homeless under the CoC Program. That said, because HUD must recognize as “homeless” families and individuals who meet the new statutory criteria in section 103(b) of the McKinney-Vento Homeless Assistance Act as of October 1, 2022, ESG and CoC recipients may implement the new definition prior to HUD rulemaking, provided that ESG recipients and CoCs update the relevant written standards and policies as needed to reflect the new statutory criteria. For further information, please see [“The Violence Against Women Act Reauthorization Act of 2022: Overview of Applicability to HUD Programs,”](#) which HUD published in the Federal Register on January 4, 2023.”

- human beings, including a car, park, abandoned building, bus or train station, airport, or camping ground;
 - ii. Is living in a publicly or privately operated shelter designated to provide temporary living arrangements (including congregate shelters, transitional housing, and hotels and motels paid for by charitable organizations or by federal, state, and local government programs); or
 - iii. Is exiting an institution where the individual or family resided for 90 days or less and who resided in an emergency shelter or place not meant for human habitation immediately before entering that institution.
2. Category 2: Individual or family who will imminently lose their primary nighttime residence, provided that:
 - i. Residence will be lost within 14 days of the date of application for homeless assistance;
 - ii. No subsequent residence has been identified; and
 - iii. The individual or family lacks the resources or support networks needed to obtain other permanent housing.
 3. Category 3: Unaccompanied youth under 25 years of age, or families with children and youth, who do not otherwise qualify as homeless under this definition, but who:
 - i. Are defined as homeless under the other listed federal statutes;
 - ii. Have not had a lease, ownership interest, or occupancy agreement in permanent housing during the 60 days prior to the homeless assistance application;
 - iii. Have experienced persistent instability as measured by two moves or more during the 60-day period immediately preceding the date of applying for homeless assistance; and
 - iv. Can be expected to continue in such status for an extended period of time due to certain special needs or barriers.
 4. Category 4: Any individual or family who:
 - i. Is fleeing, or is attempting to flee, domestic violence, dating violence, sexual assault, stalking, or other dangerous or life-threatening conditions that relate to violence against the individual or a family member, including a child, that has either taken place within the individual's or family's primary nighttime residence or has made the individual or family afraid to return to their primary nighttime residence;
 - ii. Has no other residence; and
 - iii. Lacks the resources or support networks to obtain other permanent housing.
- Chronic Homelessness –
 1. A homeless individual with a disability, as defined in section 401(9) of the McKinney-Vento Homeless Assistance Act (42 U.S.C. 11360(9)), is an individual who:
 - i. Lives in a place not meant for human habitation, a safe haven, or in an emergency shelter; and

- ii. Has been homeless continuously for at least 12 months or on at least 4 separate occasions in the last 3 years, as long as the combined occasions equal at least 12 months and each break in homelessness separating the occasions included at least 7 consecutive nights of not living as described in paragraph 1(i).
 - 2. An individual who has been residing in an institutional care facility, including a jail, substance abuse or mental health treatment facility, hospital, or other similar facility, for fewer than 90 days and met all of the criteria in the preceding bullets of this definition before entering that facility; or
 - 3. A family with an adult head of household (or if there is no adult in the family, a minor head of household³) who meets all of the criteria in paragraphs 1 and 2 including a family whose composition has fluctuated while the head of household has been homeless.
- Centralized or Coordinated Assessment System (CE system) – The definition of Centralized or Coordinated Assessment is found at 24 CFR 578.3, 24 CFR 578.7(a)(8) details the responsibilities of the CoC to establish and operate this required system. In addition to the definition and responsibilities established in the Rule, HUD posted on its website, CPD-17-01: *Notice Establishing Additional Requirements for a Continuum of Care Centralized or Coordinated Assessment System*, establishing additional requirements related to the development and use of a centralized or coordinated entry assessment system. These systems help communities assess the needs of program participants and effectively match individuals and families experiencing homelessness with the most appropriate resources available to address their supportive service and housing needs. CoCs may use planning costs to design and plan for the implementation of a centralized or coordinated assessment system; however, once the system is established and operating, the costs of operating it are not eligible planning costs. CoCs must operate the system with CoC Program funds, other funds, or a combination of the two.
 - Continuum of Care (CoC) (24 CFR 578.3) – The group organized to carry out the responsibilities required under this part and that is composed of representatives of organizations, including nonprofit homeless providers, victim service providers, faith-based organizations, governments, businesses, advocates, public housing agencies, school districts, social service providers, mental health agencies, hospitals, universities, affordable housing developers, law enforcement, organizations that serve homeless and formerly homeless veterans, and homeless and formerly homeless persons to the extent these groups are represented within the geographic area and are available to participate.
 - Continuum of Care Program (24 CFR part 578) – Promotes a community-wide commitment toward the goal of ending homelessness; to provide funding for efforts by nonprofit providers, states, Indian Tribes or tribally designated housing entities (as defined in section 4 of the Native American Housing Assistance and Self Determination Act of 1996 (25 U.S.C. 4103) (TDHEs)), and local governments to

³ An individual who is a minor under the age of 18 who has been emancipated to act on his/her own behalf, including the ability to execute a contract or lease under state law. See 24 CFR § 5.504(b).

quickly rehouse homeless individuals, families, persons fleeing domestic violence, dating violence, sexual assault, and stalking, and youth while minimizing the trauma and dislocation caused by homelessness; to promote access to and effective utilization of mainstream programs by homeless individuals and families, and to optimize self-sufficiency among those experiencing homelessness.

- Disability – The inability to engage in any substantial gainful activity by reason of any medically determinable physical or mental impairment which can be expected to result in death or which has lasted or can be expected to last for a continuous period of not less than 12 months; or in the case of an individual who has attained the age of 55 and is blind, the inability by reason of such blindness to engage in substantial gainful activity requiring skills or abilities comparable to those of any gainful activity in which they have previously engaged with some regularity and over a substantial period of time.⁴
- Emergency Solutions Grant (ESG) (24 CFR part 576)– A formula grant program that provides funding to cities, urban counties, territories, and states for street outreach, emergency shelter, homelessness prevention, and rapid-rehousing.
- Family – A person or group of persons, as determined by the PHA consistent with 24 CFR 5.403, approved to reside in a unit with assistance under the program. The term “family” used in EHV/HCV context always includes a family that is comprised of a single individual as well as a group of persons under the HCV program regulations at 24 CFR 982.4.
- Homeless Management Information System (HMIS) – means the information system designated by the Continuum of Care to comply with the HUD's data collection, management, and reporting standards and used to collect client-level data and data on the provision of housing and services to homeless individuals and families and persons at-risk of homelessness.
- Housing for Persons with HIV/AIDS (HOPWA)- The only federal program dedicated to the housing needs of people living with HIV/AIDS. Under the HOPWA Program, HUD makes grants to local communities, States and nonprofit organizations for projects that benefit low-income persons living with HIV/AIDS and their families.
- House America – A partnership between HUD and The U.S. Interagency Council on Homelessness (USICH) with mayors, local government leaders, tribal nation leaders, and governors that utilize the American Rescue Plan (ARP) to address homelessness.
- Household – Includes everyone who lives in the unit, including foster children/adults and live-in aides. Household members are included when determining unit size, but are not considered family members, and have no rights to the public housing unit or Housing Choice Voucher if there are no remaining family members.
- Housing First – A model of housing assistance that prioritizes rapid placement and stability in permanent housing in which admission does not have preconditions (such as sobriety or a minimum income threshold) and in which housing assistance is not conditioned upon participation in services.

⁴42 USC § 423(d)(1)(A). For consistency with fair housing requirements, see The Fair Housing Act, 42 U.S.C. 3602(h) (defining a person with a disability as an individual who has “(1) a physical or mental impairment which substantially limits one or more of such person’s major life activities, (2) a record of having such an impairment, or (3) being regarded as having such an impairment, but such term does not include current, illegal use of or addiction to a controlled substance (as defined in section 802 of Title 21).”

- Moving On – A strategy that enables individuals and families who are able and want to move on from Permanent Supportive Housing (PSH) to do so by providing them with sustainable, affordable housing options through mainstream systems, as well as the services and resources necessary to maintain housing stability.
 - Permanent Supportive Housing (PSH) – As it relates to project-based vouchers, permanent housing in which supportive services are provided to assist homeless persons or families, in which at least one person has a disability, to live independently.
5. **Definition of Homeless for the Purpose of Completing Line 4c on Form HUD-50058:** For all new admissions, PHAs must determine whether an individual or family was homeless at admission, and this information must be reported on line 4c on Form HUD-50058. Note that while a PHA may adopt its own definition of the term *homeless* for purposes of a PHA-adopted waiting list preference, PHAs must use the definition provided in Section 4 above for purposes of reporting whether a new admission is homeless on the Form HUD-50058. The Homeless Emergency Assistance and Rapid Transition to Housing Act of 2009 (HEARTH Act) amended the McKinney Vento Act definition of homeless for HUD’s homeless assistance programs, and on December 5, 2011, HUD published its [Final Rule](#) implementing this definition.

HUD previously adopted only a portion of this definition for the purpose of reporting on Form HUD-50058 (categories 1 and 4). This Notice supersedes the definition of homeless family found in the Form HUD-50058 guide. As of this Notice, “Homeless at admission” in Section 4 is to be filled out as follows.

When using Form HUD-50058 for either the Emergency Housing Vouchers (PIH Notice 2021-15) or Stability Vouchers (PIH Notice 2022-24), PHAs should mark yes only if the applicant meets criteria in category 1, 2, or 3 of the homeless definition in 24 CFR 578.3. For any other Housing Choice Voucher, PHAs should mark yes only if the applicant meets the criteria in category 1, 2, 3, or 4 of the homeless definition in 24 CFR 578.3 or the criteria in section 103(b) of the McKinney Vento Homeless Assistance Act, as amended 42 U.S.C §11302(b).

For additional information on the Form HUD-50058, please see the Form [HUD-50058 Instruction Booklet](#).

6. **Reporting Homelessness on the Form 50058:** The Form HUD-50058 and Form HUD-50058 MTW modules allow HUD to obtain information about participants in the Public Housing and HCV programs, including the homeless status of persons entering the program. The accuracy and reliability of this information is critical to tracking the homelessness system’s collective progress towards ending homelessness. However, based on a HUD review of PIC reporting on line 4c, some PHAs are not reporting this field accurately, or are reporting “no” for all applicants, whether they are homeless or not. It is of particular importance for PHAs to record the homeless status of individuals receiving Veterans Affairs Supportive Housing (HUD-VASH), Family Unification Program (FUP), Foster Youth to Independence Initiative (FYI), EHV, Mainstream, and Non-elderly Disabled (NED), as these special purpose vouchers serve a high percentage

of people meeting the updated homeless definition (and in the case of HUD-VASH, is statutorily required to meet the definition of homeless and for FUP-Youth and FYI, must meet the definition of homeless or at-risk of homelessness). For all new admissions to Public Housing, HCV program, and all special purpose vouchers, PHAs must determine whether an individual or family was homeless at admission using the definition detailed in Section 4 above, and this information must be reported on line 4c on Form HUD-50058. HUD does not require PHAs to collect documentation or third-party verification of any kind to verify an applicant's homelessness status for the purpose of reporting on line 4c. Verbal self-verification by the applicant that any of the above criteria are true is sufficient.

To aid PHAs in accurately reporting a new admission's homelessness status on line 4c of Form HUD-50058, the PHA may find the following list of questions helpful. If the answer to any of the following questions is *yes* regarding the family's current living situation, the PHA would mark "Y" on line 4c of the Form HUD-50058 (homeless at admission).

1. Are you currently living in a car, on the street, or another place not meant for human habitation?
2. Are you currently living in an emergency shelter, transitional housing, Safe Haven⁵, or a hotel/motel paid for by a charitable organization or by federal, state, or local government programs for low-income individuals?
3. Are you exiting an institution, including a hospital, substance abuse or mental health treatment facility, or jail/prison, where you stayed for 90 days or less? If so, were you living in an emergency shelter or place not meant for human habitation immediately before entering that institution?
4. Will you be losing your primary nighttime residence within the next 14 days, with no subsequent residence identified and no resources or support networks to obtain other permanent housing?
5. Are you an unaccompanied youth under 25 years of age, who does not otherwise qualify as homeless under the HUD definition, but who is considered to be experiencing homelessness under the definition of another federal statute⁶, have not had a lease, ownership interest or occupancy agreement in permanent housing in the past 60 days, have experienced persistent instability (2 or more moves in the past 60 days), and can be expected to continue the above instability because of various barriers, including chronic disabilities, chronic physical or behavioral issues, histories of domestic violence or child abuse and neglect, or two or more barriers to employment?
6. Are you experiencing trauma or a lack of safety related to, or fleeing or attempting to flee, domestic violence, dating violence, sexual assault, stalking, human trafficking or other dangerous, traumatic, or life-threatening conditions related to the violence against you or a family member in your current housing situation?

⁵ A Safe Haven is a form of supportive housing that serves hard-to-reach homeless persons with severe mental illness who are on the street and have been unable or unwilling to participate in housing or supportive services.

⁶ Other federal definitions of homelessness include those used by the McKinney-Vento Homeless Assistance Act (42 U.S.C. § 11434(a)(2)) and the Runaway and Homeless Youth Act (42 U.S.C. § 5732a)).

Example 1: A family that lost their home because the family was no longer able to make the mortgage payments and is living in their car **would** qualify as homeless.

Example 2: An individual that had previously lived in an emergency shelter and was admitted to the hospital for a 5-day stay **would** qualify as homeless.

Example 3: An individual being released from prison after a 3-year incarceration **would not** qualify as homeless based on the length of incarceration.

Example 4: An individual that is residing in a home with their abuser, both of whom are on the lease, and does not have sufficient resources to leave the home and obtain housing independently **would** qualify as homeless.

PHAs are encouraged to partner with a CoC or other homeless services organization to assist with documenting the homelessness status of applicants. In particular, partnerships may be valuable for determining whether individuals and families qualify under categories 2 and 3 of the homeless definition, since the documentation requirements for these categories are time-sensitive (e.g., losing housing within the next 14 days). This partnership between the PHA and other organization could be simply to verify the family's homelessness status or could be more robust in which the PHA accepts referrals from the CoC's CE System. This more robust partnership is discussed further in Section 7 of this Notice.

PHAs must follow the verification requirements established in their written policies to verify homelessness status for a preference, which may include reliance on verification from partnering organizations such as CoCs.

7. **Partnering and Working Collaboratively with CoCs:** As demonstrated by the implementation of the Emergency Housing Voucher program, a partnership between the CoC and the PHA is a critical part of a community-wide effort to end homelessness. CoCs manage federal resources to assist individuals and families experiencing homelessness, while PHAs provide stable, long-term housing and housing subsidies which can help end the cycle of homelessness. HUD strongly encourages PHAs and CoCs to proactively engage in partnerships, since the communities that have been most successful in working toward ending homelessness are those where PHAs form direct partnerships with the local CoC, homeless service providers, and other agencies.

Partnerships between PHAs and CoCs allow the organizations to leverage their resources to better serve individuals and families experiencing homelessness. For example, a PHA and CoC may partner to create a PSH project in which the PHA provides a tenant-based or project-based voucher, while the CoC may be able to provide or coordinate the accompanying supportive services in accordance with program requirements. Other examples involve the creation of a Rapid Rehousing (RRH) project where supportive services are provided through the CoC program or ESG funds, while housing subsidies are supplied through an HCV or a Public Housing unit. Note that when funds are provided by both the CoC and PHA, there is a prohibition on duplication of subsidies.⁷

⁷ 24 CFR § 982.352(c)

In any partnership, CoCs and PHAs must follow the rules of the respective program that is being supported, including rules regarding admission to the program such as waiting list requirements and existing PHA preferences. [CPD Notice 2017-01](#) generally provides for all admissions to CoC and ESG programs to go through the CoC's CE system, while PHAs, with the exception of special admissions, are required to select participants from their waiting lists. For these resources to be leveraged, a PHA could establish a waiting list preference for referrals from the CoC, which would, in turn, refer clients from the CE system for the PHA resource. PHAs may choose to prioritize certain categories of homelessness, in accordance with the PHA's Admission and Continued Occupancy Plan (ACOP) or PHA Administrative plan when accepting referrals from the CoC for the PHA's waiting list, depending on identified local needs and racial equity considerations.⁸

Relationships between CoCs and PHAs can benefit both organizations. By working together, the organizations can help each other in a multitude of ways including by:

- Sharing best practices
- Identifying and prioritizing people experiencing homelessness for assistance
- Aiding in locating a unit, accessing additional services, etc.
- Providing documentation for verification purposes
- Sharing information on the physical location of people experiencing homelessness to ensure services can be provided
- Providing case management assistance to households when applying to PHA programs, including assistance with securing vital documents, and understanding relevant program requirements
 - Providing housing search assistance
 - Serving as a liaison between the PHA, family, and owner
 - Identifying and recruiting of landlords for HCV programs

PHAs and CoCs are encouraged to establish strong partnerships, as this enables PHAs to access larger networks of different homeless service providers throughout their community. A larger PHA provider network ensures that vulnerable individuals and families admitted to Public Housing or HCV programs are offered the supportive services necessary to remain stably housed and compliant with the family obligations and other requirements of the program. PHAs and CoCs can use both formal and informal approaches to build relationships, including:

- Participating in a Moving On Program strategy (see Section 13 of this Notice)
- Establishing Memorandums of Understanding (MOU) to detail specific roles and responsibilities of the partnership and leverage combined resources to create PSH and RRH (building off existing EHV MOUs as appropriate)
- Becoming members of the CoC, including PHA leadership holding a seat on the CoC Board and participation from CoC leadership on the PHA board
- PHAs participating in the CoC's HMIS and in the CoC's regular meetings, including ongoing case conference and prioritization meetings

⁸ 24 CFR § 960.206 for Public Housing, 24 CFR § 982.207 for the HCV program, and 24 CFR § 983.251(c)(3) for the PBV program.

- Providing training to PHA staff on the local strategic plan to end homelessness and the various supportive programs that may be available to Public Housing residents and HCV participants
- Providing training to CoC staff to ensure they understand how to best support the clients/participants navigating the HCV and Public Housing application process
- Engaging with other organizations that serve underserved communities (including individuals who belong to communities of color, such as Black and African American, Hispanic and Latino, Native American, Alaska Native and Indigenous, Asian American, Native Hawaiian and Pacific Islander, Middle Eastern, and North African persons; individuals who belong to communities that face discrimination based on sex, sexual orientation, and gender identity; and individuals with disabilities) to exchange ideas about outreach and assessment processes that improve equitable outcomes
- Identifying which other systems interact with the homelessness system. Start a committee with those community partners to address cross-system disparities
- Expanding opportunities for people of different races/ethnicities who have lived experience of homelessness to provide expert advice and opinions on policy, procedures, and services delivery. Consider mechanisms to compensate community partners

8. **Characteristics of an Effective CE Process:** The July 31, 2012, [CoC Program interim rule](#) requires CoCs to establish and operate “a centralized or coordinated assessment system that provides an initial, comprehensive assessment of the needs of individuals and families for housing and services with the intention of matching the homeless individual or family with the most appropriate resources.” Prior to coordinated entry (CE), limited housing resources were distributed separately by each housing provider and the most vulnerable households were not always prioritized for subsidies or PSH units.

A CE system is a centralized approach to assessing the needs, vulnerability level, and program eligibility of people experiencing homelessness and linking them to available housing programs in the community using a standardized access, assessment, prioritization, and referral process. With the exception of ESG-funded victim service providers, HUD requires all communities funded through its ESG or CoC program to implement a centralized or coordinated intake and assessment system. In many communities, Veterans Administration (VA) and Health and Human Services (HHS) funded programs partner with the CE to provide access to their units or subsidies. Each CE system is unique, giving CoCs flexibility to design processes and priorities that fit their local needs. HUD strongly encourages PHAs to participate in the CE system in their area by establishing a mechanism for referrals once an assessment has been made by the CoC.

As one of the largest providers of affordable housing in their communities, PHAs can play a critical role in the CE process. HUD encourages PHAs to connect with their local CoCs to understand their local CE design and operation (processes, tools, policies, and procedures). A typical process would likely include the following steps:

- Outreach – CoCs must conduct outreach in a variety of ways to homeless providers, shelters, and community partners, including human trafficking, domestic violence, and sexual assault providers, to ensure equal access to housing based on need and eligibility of homeless households. CoCs must also affirmatively market their housing and supportive services to eligible persons regardless of race, color, religion, sex (including gender identity and sexual orientation), disability, familial status (children under age 18, including pregnancy or seeking legal custody), or national origin who are least likely to apply in the absence of special outreach (see 24 CFR 578.93(c)(1));
- Access - A household experiencing homelessness requests help at one or multiple designated access points (e.g., emergency shelter(s), call line, or intake center(s));
- Assessment – A CoC staff member completes a standardized assessment and identifies which services and housing programs may be the best fit for a program participant;
- Prioritization – Policies documenting the prioritization process must align with existing CoC Program and ESG Program written standards established under HUD regulations 24 CFR 578(a)(9) and 24 CFR 576.400(e). The CoC’s coordinated entry policies and procedures must describe the factors and assessment information with which prioritization decisions are made for all homeless assistance in the CoC. Based on a local prioritization process, if the household meets program criteria and is a good candidate to receive long-term housing assistance, CoC staff prioritize the household for that type of assistance. Communities are always encouraged to evaluate and adjust their prioritization policies based on evolving information and circumstances, including new or improved data (to include potential disparate impacts by race/ethnicity), changing needs and priorities, and available resources;
- Referral/Placement - CoC staff refer eligible households to the PHA or other housing provider intake staff for documentation review and placement.

The structure and operations of a CE system will vary depending on many factors, including the size of the community it serves and the length of its history in building a CE process. HUD does not identify a specific assessment tool or process that CoCs should use for CE, and CoCs can choose to use different assessment tools for specific sub-populations. According to [CPD Notice 2017-01](#), “the coordinated entry process may, but is not required to include separate access points and variations in assessment processes to the extent necessary to meet the needs of the following five populations: (1) adults without children; (2) adults accompanied by children; (3) unaccompanied youth; (4) households fleeing domestic violence, dating violence, sexual assault, stalking, or other dangerous or life-threatening conditions (including human trafficking); and (5) persons at-risk of homelessness.”

A PHA can participate in their local CoC’s CE system by accepting CE system referrals of people experiencing homelessness who are eligible for and in need of the housing programs they offer, including HCV, PBVs, Public Housing, Mainstream Vouchers, NED Vouchers, FUP, FYI, Housing for Persons with HIV/AIDS (HOPWA), or PSH-funded through the CoC and supported by HCV. PHAs can also provide housing support

through EHV; however, EHV requires a direct referral from the CoC.⁹ PHAs can also use the CoC's CE system to identify households that may be eligible for any limited preference they have for people experiencing homelessness in their community. While all referrals for HUD-VASH must come directly from the PHA's partnering VA facility or designated service provider (DSP), VA facilities are encouraged to become connected with their local CE system.¹⁰

A PHA may establish a preference for families referred from the CE process in the community.¹¹ This may be a general preference or the PHA may choose to limit the number of vouchers/public housing units available under this preference.¹² Please note that this preference is somewhat different from a homeless preference since applicants would need to be referred from the CE rather than applying directly to the PHA. See section 11 of this Notice for further information on establishing a waiting list preference for referrals from a CE system.

For more information on additional CE best practices, see the following resource developed by a HUD funded TA provider: [PHA Strategies to Assist People Experiencing Homelessness Guidebook: Using Coordinated Entry to Identify People Experiencing Homelessness for Housing Assistance](#).

9. **Pairing Data from the Form 50058 with HMIS Data:** The Homeless Management Information System (HMIS) is a local information technology system used by CoCs to comply with the data collection and reporting requirements of the CoC Program interim rule found at 24 CFR 578. It is a locally administered system used to record and analyze data on program participants on the provision of housing and services for individuals and families who are homeless or at-risk of homelessness.¹³ Further, HUD and other federal partners use aggregate data from HMIS to better inform homeless policy and decision making. Note that client-level data in HMIS is only visible at the local level and must be aggregated when reported to HUD.

HMIS can be used to generate reports, assess programs, and process intake and referral information in some CE systems. The system is a valuable tool and can be used by CoCs to make data-driven decisions, increase access to housing resources for families experiencing homelessness, and evaluate efforts at advancing racial equity. To further enhance the analytical capabilities of both PHAs and CoCs, these organizations can implement data sharing agreements to share disaggregated data, facilitated in part through joint Releases of Information (ROIs). These agreements allow PHAs to link their Form 50058 data with the CoC's HMIS systems, and vice versa, enabling both organizations to understand and analyze the individual paths taken by homeless families through the

⁹ Per [PIH Notice 2021-15](#), Congress provided HUD with broad waiver authority through the American Rescue Plan Act that permitted HUD to establish this alternative requirement for EHV. In the absence of that authority, this alternative requirement would be impermissible.

¹⁰ [VA Participation in Coordinated Entry Guidance \(hudexchange.info\)](#)

¹¹ See 24 CFR § 960.206 for Public Housing, 24 CFR § 982.207 for the HCV program, and 24 CFR § 983.251(c)(3) for the PBV program.

¹² *Id.*

¹³ [HUD Exchange HMIS Data Standards](#) - This resource was developed by a HUD funded TA provider.

system of homelessness.

CoCs often have no visibility into the outcomes of families they refer to PHAs, including application approval, voucher issuance, leasing up, their time in the program, or when they exit the program. However, CoCs, PHAs, and their partners can establish [data sharing agreements](#)¹⁴ to better understand family outcomes in order to create and coordinate strategies that support equitable access to programs and improved outcomes for the families they serve.

For example, if a large number of families are receiving vouchers, but only a small number of those families successfully lease up, it may indicate a need for support in finding units, completing landlord applications, or getting paperwork returned to the PHA. Or, if families do successfully lease up but are frequently terminated within 1-2 years, it may indicate a need for increased support throughout their time within the program. Both examples highlight instances where access to data can lead to a greater understanding of the path through homelessness, enabling PHAs and CoCs to coordinate the application of additional resources most needed by the people experiencing homelessness in their communities. Viewing these disaggregated data can also help determine disparities in lease-up by race/ethnicity to examine any racial equity concerns.

CoCs and PHAs are required to create policies and procedures regarding how data is collected, used, stored, and disclosed across the homeless services system. These policies must comply with the requirement to protect clients' personally identifying information (PII) and should follow the guiding principle to only share the minimum amount of data necessary to achieve the purpose. CoCs and PHAs must be transparent in the data collection process and articulate the policies to clients in a way that they understand, and clients must be protected from denial of services they would otherwise qualify for if they do not consent to data collection or sharing. In instances where information collection is required by law, CoCs and PHAs are not required to seek consent.

10. Waiting List Management: PHA waiting lists can be a barrier to individuals and families experiencing homelessness trying to access the Public Housing and HCV programs.¹⁵ When waiting lists are long or closed, an individual or family who lacks stable housing and reliable contact information may not be able to be contacted when they come to the top of the waiting list or when waiting lists are purged, especially if it has been months or years since the application was submitted. Additionally, when PHAs reopen waiting lists for short periods of time, people experiencing homelessness may be excluded from the application process due to a lack of information about the eligibility to apply.

PHAs may establish strong outreach and intake strategies through partnerships with key CoC leadership and service providers within the CoC such as emergency shelter staff, CE staff, and housing navigators. PHAs may also alter policies and procedures to:

¹⁴ This resource was developed by a HUD funded TA provider.

¹⁵ While HUD-VASH is included in this guidance among other special purpose voucher programs, there are several HUD-VASH policies, including waiting list management, that are unique to HUD-VASH. HUD-VASH operating requirements (86 FR 53207) supersede all guidance in this notice.

- Simplify the application process for Public Housing or HCVs, including steps such as:
 - Develop a universal application with partner PHAs in the region
 - Minimize the length and number of questions used to accurately determine program eligibility and to meet regulatory requirements, providing a balance between collecting all necessary information and ensuring that the application process is clear and accessible
 - Provide multiple ways to access and submit an application as appropriate, including to ensure a PHA meets its statutory obligation to make information accessible to people with disabilities and people with limited English proficiency (LEP). For example, PHAs must take appropriate steps to ensure effective communication with individuals with disabilities through the use of auxiliary aids and services whether the application is electronic or in hard copy. PHAs must be able to process applications to accommodate individuals who are unable to access an electronic form. Otherwise, they must offer a reasonable accommodation, or alternative application processes for those populations. They must also take appropriate steps to ensure that applications are meaningful access by individuals with Limited English Proficiency (LEP) populations by translating such materials into languages other than English.
- Engage with partner organizations to help homeless households gather necessary information and documents, and ensure that requirements are explained in clear, plain language and available in multiple languages as needed
- Strengthen the process for contacting applicants on their waiting list, providing multiple forms of communication to reduce barriers for applicants without a permanent address (e.g., contacting applicants via email, text, or phone)
- Implement liberal reinstatement policies when applicants are removed from the waiting list because of non-responsiveness
- Allow updates to address information via multiple methods, including by mail, email, and online forms
- Establish flexible intake and briefing schedules
 - Provide a window of time for appointments
 - Allow for remote briefing opportunities¹⁶
- Establish nondiscriminatory preferences in admissions policies for persons experiencing homelessness, or a subset of such persons (e.g., chronically homeless, homeless veterans, homeless identified as most vulnerable through community-based assessment strategies, etc.). See Section 11 of this Notice.
- Establish admissions preferences for victims of domestic violence, dating violence, sexual assault, stalking, and human trafficking.
- Revise criminal record and substance use policies to ensure that they are not overly restrictive and that they do not discriminate in violation of the Fair Housing Act or other civil rights authorities, based on the requirements of the individual program (e.g., HCV vs. EHV). Additional best practices can be found [in HUD's Implementation of the Office of General Counsel's Guidance on Application of](#)

¹⁶ PIH Notice 2020-32

[Fair Housing Act Standards to the Use of Criminal Records by Providers of Housing and Real Estate-Related Transactions Memo \(2022 Criminal Records Memo\)](#)

- Implement flexible policies for rental history for those individuals and families without a consistent or steady rental history
- Amend the HCV Administrative Plan to provide longer initial search terms if required by rental market conditions, and simplify processes for requesting search extensions consistent with the terms of the administrative plan.

For more guidance on waiting list and applications management, please see the following resource developed by a HUD funded TA Provider: [PHA Strategies to Assist People Experiencing Homelessness Guidebook](#). As a reminder to PHAs, all actions taken in association with the application and intake process must comply with all applicable fair housing and civil rights laws, including the Violence Against Women Act. See 24 CFR 5.105(a) and 24 CFR Part 5, subpart L.

- 11. Homeless Admissions Preference:** A PHA's greatest tool for increasing program access for individuals and families experiencing homelessness is establishing a preference in the Admission and Continued Occupancy Plan (ACOP) for public housing and the Administrative Plan for HCV. The adoption of preferences is at the discretion of the PHA. HUD regulations¹⁷ authorize PHAs to establish certain local preferences in PHA policies. The PHA has the discretion to establish other preferences not addressed in program regulations provided they are based on local housing needs and priorities, including preferences for families who are homeless or living in substandard housing. If adopting the preference constitutes a significant amendment to the PHA Plan as defined by the PHA, the PHA must comply with the amendment provisions of 24 CFR 903.21, including soliciting public comment and consulting with the resident advisory board.

This Section describes the criteria that may be considered when establishing preferences for homeless individuals or families. For a detailed discussion of best practices for operating waiting lists and establishing preferences for people experiencing homelessness, please also see the following resource developed by a HUD funded TA Provider: [PHA Strategies to Assist People Experiencing Homelessness Guidebook](#).

a) Assessing local housing needs. PHAs should understand the unique circumstances impacting people experiencing homelessness in their communities. A PHA's system of local preferences must be based on local housing needs and priorities by using generally accepted data sources and information obtained through the PHA Plan public comment process.¹⁸ HUD encourages PHAs to work collaboratively with CoCs, health care providers, social service providers, homeless services providers, disability organizations, organizations serving victims of domestic violence, dating violence, stalking, sexual assault, or human trafficking, and local offices of government and community organizations to establish a system of preferences based on local housing

¹⁷ 24 CFR § 960.206 for Public Housing, 24 CFR § 982.207 for HCV, and 24 CFR § 983.251(c)(3) for PBV.

¹⁸ 24 CFR § 960.206(a)(1) for Public Housing and 24 CFR §982.207(a)(2) for HCV

needs collectively identified by the community. For example, PHAs may look to their Community Plan to End Homelessness, Consolidated Plans, HIV/AIDS Housing Plan and/or data from their jurisdiction's CoC HMIS to identify whether and to what extent there is need for a homeless preference. For more information on these products, visit the following resources developed by HUD funded TA Providers: [Coordinated Community Plan](#), [Consolidated Plans](#), Housing Opportunities for Persons with [AIDS \(HOPWA\) Housing Plan](#), and [HMIS Community Examples](#).

b) Identifying and addressing racial equity in the PHA's preference system. It is important that PHAs use the resources highlighted in sub-section a) above to identify, understand, and take the necessary action to address racial disparities in their communities, particularly when establishing and applying homeless admissions preferences. Black, Hispanic, and American Indian and Alaskan Natives represent 29% of the total U.S. population but accounted for over 60% of the homeless population in 2020.¹⁹ These trends highlight the disproportionate impact on Black, Latino, and Indigenous and Native American persons, Asian Americans and Pacific Islanders and other persons of color and the need for PHAs to understand the demographics and particular circumstances faced by the people they serve in their communities. PHAs may utilize the following (developed by a HUD funded TA provider) [CoC Analysis Tool](#) to examine racial disparities in the numbers of individuals or families experiencing homelessness in the local community or those who obtain and maintain permanent housing. Using this information, PHAs may want to consult with their CoC and other community partners to determine changes to current preference policies that target needs, vulnerabilities, and barriers disproportionately faced by Black, Latino, and Indigenous and Native American persons, Asian Americans and Pacific Islanders and other persons of color, which may help address racial equity concerns. Notably, any such policy changes must not target race, national origin, or any other characteristic protected under fair housing and civil rights laws.

c) Applying and Limiting Preferences. HCV, PBV, and Public Housing regulations allow PHAs to establish waiting list preferences.²⁰ The PHA may establish a general preference for people experiencing homelessness or may create a more narrowly defined or limited preference. PHAs may also limit the number of applicants that may qualify for a particular preference.²¹

PHAs may create a preference or limited preference specifically for people who are referred by a partnering homeless service organization or consortium of organizations such as the CE System established by the CoC. Establishing a preference for clients referred by the CE system helps ensure that the housing options for families experiencing homelessness are prioritized for those who most need long-term housing support. When a PHA establishes a preference for clients referred from a CE system, the PHA should work closely with the organization in charge of the CE system to ensure that any referral agencies understand the criteria for admissions set by the PHA

¹⁹ [2020 Annual Homeless Assessment Report \(AHAR\) to Congress](#)

²⁰ 24 CFR § 982.206 for Public Housing, 24 CFR § 982.207 for HCV, and 24 CFR § 983.251 for PBV

²¹ 24 CFR § 982.206(a)(2) for Public Housing and 24 CFR § 982.207(a)(3) for HCV

during the initiation of the partnership. This will minimize the number of ineligible families that are referred, leading to time and resource savings, as well as reducing potential delays faced by eligible families awaiting referral.

PHAs may also choose to create a general or limited preference for families experiencing homelessness, including preferences limited to families with children, veterans, or other particular subgroups of families experiencing homelessness, provided that the preference reflects local housing needs and is compliant with Fair Housing rules. A PHA may also create a preference for individuals and families participating in a Moving On strategy, discussed in Section 13 of this Notice. These individuals and families are people that were previously homeless prior to entry into the PSH program but who no longer need that level of supportive services and are now transitioning from PSH units. While these persons would not be considered homeless for reporting purposes on the Form HUD-50058, creating such as a “Moving On” preference can contribute significantly to the community’s overall efforts to end homelessness by freeing up units for currently homeless families and individuals with disabilities who need housing combined with services.

d) Opening waiting lists and public notice. If a PHA does not have enough applicants on its waiting list who qualify for a specific preference, the PHA may open its waiting list strictly to people to whom the preference applies. The notification process, as well as the preferences themselves, must comply with HUD fair housing and civil rights requirements, such as adopting suitable means to assure that the notice reaches eligible individuals with disabilities and those with limited English proficiency (LEP). HCV program regulations require the public notice to appear in a local newspaper of general circulation, minority media, and other suitable means.²² These public notice practices are strongly encouraged in the Public Housing Program.

Once an adequate number of persons experiencing homelessness meeting the preference have been placed on the waiting list, the PHA may choose to keep the waiting list open only for the population qualified for the preference (i.e., continue to accept applications only from applicants that qualify for the preference), while keeping it closed for all other applicants. This can be particularly helpful if the PHA preference is for referrals from partner agencies since it will allow the agencies to continue sending referrals when more resources are available through the PHA. HUD encourages PHAs to keep their websites up to date regarding whether the waiting list is open or closed, who may currently apply for assistance, and specific information regarding the application process. PHAs may also want to share waiting list news with CoC and other community partners.

e) Verifying preference eligibility. As described in Section 6 above, while HUD does not require PHAs to collect documentation or third-party verification to verify an applicant’s homelessness status for the purpose of reporting on line 4c, PHAs must follow the verification requirements established in their written policies to verify homelessness status for a preference. If a PHA adopts a preference or limited

²² 24 CFR § 982.206

preference for people experiencing homelessness, or for a particular subset of this population, the PHA may require the individual or family to provide documentation indicating that they qualify for the preference. Alternatively, when a PHA establishes a partnership for referrals from a homeless service organization, they may allow the partnering organization to verify the individual's or family's preference qualification by providing supporting documentation before the individual or family is referred to the PHA.

f) Public Housing property designations pertaining to preference. For Public Housing developments with an active designation by HUD for a specific population, this designation remains in effect despite the adoption of the new preference. For example, if the property is a designated elderly property, then the homeless preference would not supersede this designation. Any qualified applicant benefiting from the homeless preference would need to meet both criteria, i.e., experiencing homelessness and be part of a HUD-defined elderly family by 24 CFR 5.403. PHAs are reminded that PBV projects are not designated for specific populations, and therefore this paragraph is inapplicable to PBV.

g) Ensuring Fair Housing compliance. PHAs must ensure that any waiting list preference would not have the purpose or effect of excluding other eligible families from the program because of any characteristic protected by federal fair housing and civil rights laws, including, for example, the Fair Housing Act (42 U.S.C. 3601 *et seq.*). Protected characteristics under the Fair Housing Act include: race, color, national origin, religion, sex (including sexual orientation and gender identity), disability, or familial status (children under age 18, including pregnancy or seeking legal custody). The PHA must also ensure that the preference would not have the purpose or effect of creating, increasing, or perpetuating segregation. PHAs must ensure that the adoption of a homeless preference and the opening of the waiting list, including site-based waiting lists open only to homeless families and individuals that qualify for the preference, is done in a manner that is consistent with all fair housing and civil rights laws and affirmatively furthers fair housing.

h) Residency preference. PHAs that have a residency preference as allowed under the regulations²³ are encouraged to include in their definition of the term "residence" shelters, other dwelling places, and unsheltered locations where homeless people may be living or sleeping. PHAs may also consider the circumstances leading to a family's current dwelling place when defining residency for homeless applicants. For example, in some communities, there may be a lack of suitable shelters in the community covered by the PHA's residency preference forcing the family or individual to seek shelter in another community. If an applicant family or individual resides in a shelter located outside of the area covered by the PHA's residency preference, the PHA may establish policies considering the applicant's previous residency and circumstances. PHAs with a residency preference may need to change their definition of residency in their policies for the purpose of allowing such flexibility. The preference cannot have an unjustified discriminatory effect on a group of persons with certain characteristics

²³ 24 CFR § 960.206(b) and 24 CFR § 982.207(b)(1)

protected under fair housing and civil rights laws, including race, color, national origin, sex (including sexual orientation and gender identity), religion, disability, or familial status (children under age 18, including pregnancy or seeking legal custody). See (g) above.

12. Admission and Termination of Assistance Policies Regarding Criminal Activity, and

Substance Use: Incarceration and homelessness are highly interrelated, as the difficulties of reintegrating into the community increase the risk of homelessness for returning citizens, and homelessness in turn increases the risk for subsequent re-incarceration. On June 23, 2021, [HUD issued a letter](#) to PHAs, CoCs, Multifamily Owners, and HUD Grantees, outlining steps HUD has taken to meet the housing needs of returning citizens and to reduce barriers to housing among people with criminal records, and noting that addressing reentry housing needs also further advances equity and reverses systemic racism, given the racial disparities evident in the criminal justice system. This letter strongly encouraged PHAs to work with their Continuum of Care (CoC) partners to ensure that the housing needs of individuals who are at-risk of homelessness after leaving prisons or jails were met. On April 12, 2022, [HUD issued a directive to its principal staff](#), directing all relevant HUD program offices to identify all existing HUD regulations, guidance documents, and other policies and sub-regulatory documents (including model leases and other agreements) that may pose barriers to housing for persons with criminal histories or their families and propose updates and amendments to make HUD's programs as inclusive as possible. PHAs wishing to serve more people experiencing homelessness may consider amending their discretionary admissions policies where possible. However, PHAs must adhere to policies mandating prohibition of admission and termination of assistance regarding certain criminal activities and illegal drug use, described further in this section. PHAs are also reminded that the Violence Against Women Act (VAWA, 34 U.S.C. § 12471 *et seq.*) and HUD's VAWA rule establish specific protections in regard to criminal activity related to domestic violence, dating violence, sexual assault, or stalking. For example, an applicant for assistance or tenant assisted under a covered housing program may not be denied admission to, denied assistance under, terminated from participation in, or evicted from the housing on the basis or as a direct result of the fact that the applicant or tenant is or has been a survivor of domestic violence, dating violence, sexual assault, or stalking, if the applicant or tenant otherwise qualifies for admission, assistance, participation, or occupancy.²⁴

In June 2015, HUD published PIH Notice 2015-19 to inform PHAs and owners of federally assisted housing that arrest records may not be the sole basis for denying admission, terminating assistance, or evicting tenants, to remind PHAs and owners that HUD does not require the adoption of "one-strike" policies, and to remind them of their obligation to safeguard the due process rights of applicants and tenants. In April 2016,

²⁴ See PIH Notice 2017-08 - Section 7, which provides guidance on HUD's 2016 VAWA rule implementing VAWA's housing protections. In 2022, VAWA was further amended to provide additional housing protections, including a new prohibition against penalizing homeowners, housing applicants, or housing landlords, tenants, residents, occupants, or guests based on their requests for assistance or based on criminal activity of which they are a victim or otherwise not at fault.

HUD's Office of General Counsel (OGC) published [Office of General Counsel Guidance on Application of Fair Housing Act Standards to the Use of Criminal Records by Providers of Housing and Real Estate-Related Transactions \(2016 Guidance\)](#) to remind housing providers that while having a criminal record is not a protected characteristic under the Fair Housing Act, criminal history-based restrictions on housing opportunities violate the Act if the housing provider intentionally discriminates in using criminal history information, or, without justification, their burden falls more often on renters or other housing market participants of one race or national origin over another (i.e., discriminatory effects liability). As described above, since 2021, HUD has issued further guidance and an internal directive to address how HUD and its program participants can meet the housing needs of returning citizens and reduce barriers to housing among people with criminal records. In June 2022, HUD supplemented the 2016 Guidance with a memorandum to its Office of Fair Housing and Equal Opportunity (FHEO) and its grantees ([2022 Criminal Records Memo](#)). In the 2022 Criminal Records Memo, HUD reviewed the principles outlined in the 2016 Guidance and provided tips and best practices related to the use of criminal background screening for fair housing investigators and housing providers.

a) Admissions Policies: Under federal law and HUD regulations for both the HCV and Public Housing programs, PHAs are required to adopt screening policies that absolutely prohibit admission for certain types of conduct. For other types of conduct, PHAs have discretion to allow admission (or prohibit admission) and may consider all relevant circumstances. This discretion is limited by, and must be exercised consistent with, fair housing and nondiscrimination requirements.

- **Mandatory Prohibition of Admission:** If an applicant household includes a member subject to the following two absolute prohibitions,²⁵ that household must be prohibited from admission:
 - Applicants with a household member that has ever been convicted for manufacture or production of methamphetamine on the premises of federally assisted housing
 - Applicants with a household member that is subject to a lifetime registration requirement under a State sex offender registration program
- **Potentially Mandatory Prohibition of Admission:** Under certain circumstances, it may be mandatory to prohibit admissions to certain applicant households.²⁶ For example, a PHA must prohibit admission to an applicant for three years from the date of eviction if a household member has been evicted from federally assisted housing for drug-related criminal activity *unless* the PHA determines that the evicted household member who engaged in such activity has successfully completed a supervised drug rehabilitation program approved by the PHA or the

²⁵ 24 CFR § 982.553(a)(2)(i) and 24 CFR § 982.553(a)(1)(ii)(C) for HCV, and 24 CFR § 960.204(a)(4) and 24 CFR § 960.204(a)(3) for Public Housing

²⁶ 24 CFR § 982.553(a)(1)(i), 24 CFR § 982.553(a)(1)(ii)(A), 24 CFR § 982.553(a)(1)(ii)(B), and 24 CFR § 982.553(a)(3) for HCV, and 24 CFR § 960.204(a)(1), 24 CFR § 960.204(a)(2)(i), 24 CFR § 960.204(a)(2)(ii), and 24 CFR § 960.204(b) for Public Housing

circumstances leading to the eviction no longer exist (e.g., the household member that engaged in drug-related criminal activity is no longer part of the household).²⁷

Additionally, PHAs are required to establish standards that prohibit admission for any household with a member who is currently engaged in the illegal use of a controlled substance or where the PHA determines it has reasonable cause to believe that the household member's pattern of illegal use of a controlled substance or pattern of abuse of alcohol may interfere with the health, safety, or right to peaceful enjoyment of the premises by other residents.²⁸

- **Discretion to Prohibit Admission:** Where the HCV or Public Housing applicants' conduct or activities falls outside the scope of the statutorily mandated prohibitions, PHAs may have discretion whether to admit or deny admissions to these individuals. PHAs must balance the safety of the families they serve with potential barriers to vulnerable populations. PHAs also must ensure that they use their discretion in a manner that is consistent with regulations for the specific program, as well as fair housing and civil rights laws. For example, in a manner consistent with the PHA's policies, procedures and practices under the regulations for the public housing program at 24 CFR 960.203(d), consideration shall be given to the time, nature, and extent of the applicant's conduct (including the seriousness of the offense), and consideration may also be given to other factors which might indicate a reasonable probability of favorable future conduct.

It is important for PHAs to understand the damage that denial of admission can have on a family and that discretionary admissions policies can be a barrier for vulnerable populations, including people experiencing homelessness, and can result in discrimination against protected classes. PHAs wishing to serve more people experiencing homelessness may consider reviewing their discretionary policies to determine what changes can be made to remove barriers. For example, to increase access for vulnerable populations and to avoid potential fair housing liability, PHAs should, in a manner consistent with the PHA's policies, procedures and practices under 24 CFR 960.203(b):

- Conduct an individualized assessment of each applicant's case that considers relevant mitigating information instead of automatically denying them based on conviction history
- Eliminate policies that deny assistance to all individuals with past evictions for any type of criminal activity
- Eliminate policies that deny assistance to all individuals on probation or parole
- For drug-related criminal activity, consider whether the household member is participating in or has successfully completed a drug rehabilitation program, or has otherwise been rehabilitated successfully

²⁷ 24 CFR § 982.553(a)(1)(i), 24 CFR § 982.553(a)(1)(ii)(A), 24 CFR § 982.553(a)(1)(ii)(B), and 24 CFR § 982.553(a)(3) for HCV, and 24 CFR § 960.204(a)(1), 24 CFR § 960.204(a)(2)(i), 24 CFR § 960.204(a)(2)(ii), and 24 CFR § 960.204(b) for Public Housing

²⁸ 42 USC 13661(b), 24 CFR § 960.204(a)(2) (public housing), and 24 CFR § 982.553(a)(1)(ii) (HCV).

- Ensure applicants are notified that in accordance with Section 504 of the Rehabilitation Act (24 CFR Part 8), the Fair Housing Act (24 CFR Part 100) and the Americans with Disabilities Act (28 CFR Part 35), people with disabilities may be eligible for reasonable accommodations.

The following best practices are also recommended to PHAs that seek to avoid fair housing liability when screening applicants or tenants:

- Reduce the look-back period for criminal convictions considered during the screening process based on when the conduct occurred and/or the type of conduct
- Screen only for the mandatory requirements (described above)
- Eliminate “one-strike” policies for individuals with a criminal record
- Limit denials related to current illegal drug use by redefining “current use” to mean no more than the previous three months prior to the application date.
- Have a written criminal background screening policy that is compliant with federal, state, and local nondiscrimination laws and made available to all applicants
- Avoid the use of third-party screening companies that utilize algorithms that may contain racial or other prohibited bias in their design, have not been shown to reliably predict risk, may produce inaccurate information about the applicant, or make the decision for the housing provider (rather than providing information to the housing provider to make its own determination).
- Before making an adverse decision related to an applicant’s or tenant’s criminal involvement, provide the applicant or tenant with the criminal record, indicate which specific part of the record may form the basis of an adverse decision, and give the applicant or tenant the opportunity to dispute the information, correct inaccurate information, the relevancy of the record, and/ or explain extenuating circumstances related to that record.²⁹

b) Program Termination and Eviction Policies: A PHA’s discretionary termination policies play an important role in ensuring that once homeless families are housed, they remain housed and can help break the cycle of homelessness that many families experience. Careful consideration is required while developing and enforcing termination policies, as termination of assistance and eviction may imminently or immediately lead to future episodes of homelessness and should be avoided if possible. PHAs may also want to look to their CoC partners and other partnering organizations to determine what role other service providers can play in eviction prevention, particularly in providing supportive services that may help prevent or address specific issues that may put a family at risk of termination.

²⁹ PHAs are required to undertake these actions when proposing denial or termination per 24 CFR § 982.553(d) and 24 CFR § 960.204(c).

A key consideration for PHAs when establishing and revising termination policies is to understand that federal law and HUD regulations provide specific instances where a PHA must terminate assistance or evict a family and provide the PHA with broad discretion to consider individual family circumstances. The termination standards for both the Public Housing and HCV Programs are different from the prescribed admissions standards in that they allow, but do not require termination for certain activities.³⁰ In certain instances, PHAs have discretion when determining whether or not to terminate program assistance and are allowed to consider relevant circumstances surrounding the activities.³¹ Further, HUD does not require PHAs to adopt rules that require automatic termination any time a household member engages in criminal activity, and having such rules may violate laws such as the Fair Housing Act, Title VI of the Civil Rights Act of 1964, and VAWA.³²

All discretionary admission and program termination policies must be applied to all applicants and participants broadly. In other words, a PHA may not have a certain set of admission/termination policies that apply specifically to a certain population, such as the homeless population, which are different than the admission/termination policies for all other applicants and participants, unless there is express legal authority to do so (e.g., HUD-VASH program).

PHAs must also comply with the protections for victims/ survivors of domestic violence, dating violence, sexual assault, or stalking under VAWA and HUD's VAWA rule. For example, 24 CFR 5.2005(c) states that an incident of actual or threatened domestic violence, dating violence, sexual assault, or stalking will not be construed as a serious or repeated violation of the lease by the victim/survivor or threatened victim of the domestic violence, dating violence, sexual assault, or stalking, or as good cause to terminate the assistance, tenancy or occupancy rights of the victim or threatened victim. Additionally, 24 CFR 5.2005(b) prohibits a tenant from being denied admission, evicted, or have their assistance terminated solely because of criminal activity relating to domestic violence, dating violence, sexual assault, or stalking, if they are the victim and a household member or guest engaged in the criminal activity.

c) Consideration of Circumstances Regarding Admissions and

Terminations/Evictions: PHAs should carefully consider the circumstances in which any conduct has occurred. For instance, defining criminal activity to focus on activities that pose threats to the safety and security of other residents can help ensure compliance with fair housing and civil rights requirements. The Public Housing regulations at 24 CFR 960.203(a) and 24 CFR 966.4(l)(5)(vii)(B) and the HCV program regulation at 24 CFR 982.552(c)(2) indicate that individual consideration of factors may be a basis for a PHA's decision to admit or refrain from terminating assistance. For example, a PHA

³⁰ Sept. 24, 1999, Memorandum from Gail W. Laster, General Counsel, to William C. Apgar, Assistant Secretary of Housing/Federal Housing Commissioner, and Harold Lucas, Assistant Secretary for Public and Indian Housing, on "Medical use of marijuana in public housing" [Laster Memorandum]

³¹ HUD regulations outline the limited instances where denial of admission or termination of assistance is required in the public housing, Housing Choice Voucher programs. See 24 CFR Part 5, subpart I; Part 960, subpart B; Part 966, subpart A; Part 982, subpart L.

³² 24 CFR § 966.4(l) for Public Housing and 24 CFR § 982.55 for HCV.

may establish a policy for the HCV program to consider all relevant circumstances such as the seriousness of the case, the extent of participation or culpability of individual family members, mitigating circumstances related to the disability of a family member, and the effects of denial or termination of assistance on other family members who were not involved in the action before denying admission or terminating assistance to a family.³³

In public housing, in the event of receipt of unfavorable information about an applicant, consideration must be given to the time, nature, and extent of the applicant's conduct (including the seriousness of the offense).³⁴ Consideration should be given to factors which might indicate a reasonable probability of favorable future conduct, including evidence of rehabilitation, and the applicant's willingness to participate in social services.³⁵

The PHA may impose, as a condition of admittance or continued assistance for other family members, a requirement that family members who participated in or were culpable for the action will not reside in the unit. The PHA may permit the other members of a participant family to receive or continue receiving assistance, once the conditions have been met.³⁶ PHAs are prohibited from denying admission or terminating assistance based on the fact that a family has experienced homelessness in the past or at the time of admission.

In both the HCV and Public Housing Programs, in determining whether to deny admission or terminate assistance for illegal use of drugs or alcohol abuse by a household member who is no longer engaged in such behavior, the PHA should consider whether such household member is participating in or has successfully completed a supervised drug or alcohol rehabilitation program or has otherwise been rehabilitated successfully.³⁷

Further, for both the HCV and Public Housing Programs, PIH Notice 2015-19 states that PHAs may consider all circumstances relevant to the admission or eviction decision, including but not limited to:

- The seriousness of the offending action
- The effect that eviction of the entire household would have on family members not involved in the criminal activity
- The extent to which the leaseholder has taken all steps to prevent or mitigate the criminal activity.

Before a PHA denies admission to an applicant or terminates the assistance of a participant based on the criminal conviction of a household member or guest, consistent with their policies, PHAs should conduct an individualized assessment to determine whether denial of admission or termination is mandatory under the circumstances, or in

³³ 24 CFR § 982.552(c)(2)(i) for HCV

³⁴ 24 CFR § 960.203(d)

³⁵ 24 CFR § 960.203(d)

³⁶ 24 CFR § 982.552(c)(2)(ii) for HCV and § 960.203(c)(3)(i) for Public Housing

³⁷ 24 CFR § 960.203(d)

cases where it is permissive, whether the criminal activity will threaten others' health, safety, or right to peaceful enjoyment of the premises. A record of an arrest alone may not be the basis for a denial of admission or termination of assistance, though PHAs may make an adverse decision based on the conduct underlying the arrest if the conduct indicates that the individual is not suitable for tenancy and the PHA has sufficient evidence other than the arrest itself that the individual engaged in the conduct. Although conviction records are more reliable evidence that an individual engaged in certain criminal conduct, PHAs must still make a determination that a specific individual's criminal conviction record will threaten the health, safety, or right to peaceful enjoyment of the premises using the criteria above. Additionally, a PHA may not deny admission or terminate assistance for this criminal activity if it directly relates to VAWA violence/ abuse and the tenant or certain affiliated individuals of the tenant is the victim/ survivor or threatened victim.³⁸ Except in cases in which an informal hearing is not required³⁹, PHAs must give applicants or participants a hearing or review of the circumstances prior to any determination being made.⁴⁰

For both the HCV and Public Housing Programs, the PHA decision regarding denial of admission or termination of assistance is subject to reasonable accommodation requirements in accordance with Section 504 of the Rehabilitation Act of 1973, the Fair Housing Act, Title II of the Americans with Disabilities Act, and their implementing regulations at 24 CFR Part 8, 24 CFR Part 100, and 28 CFR Part 35, respectively. Because the PHA may not necessarily be aware of a person's disability, all denial of admission and termination correspondence should include information about the right to request a reasonable accommodation and how to request a reasonable accommodation. The PHA must also provide a Notice of Occupancy Rights Under the Violence Against Women Act with each denial and termination.⁴¹

HUD encourages PHAs to review their termination and eviction policies considering their discretionary authority. PHAs should review these policies in light of the guidance provided in [PIH Notice 2015-19](#) on the use of arrest records and protections for the due process rights of applicants and participants as well as [HUD OGC's 2016 guidance](#). HUD recommends that PHAs work with homeless service providers to establish discretionary termination and eviction policies best suited to the community and to develop partnerships that can implement effective eviction prevention strategies. HUD encourages PHAs to review the [2022 Criminal Records Memo](#) for tips and best practices for establishing policies that comply with fair housing and civil rights laws.

13. **Moving On Strategies:** Moving On (sometimes called Moving Up, Move Up, Move On, or FLOW) enables individuals and families who are able and want to move on from PSH. PSH generally targets the most vulnerable individuals and families and combines affordable housing with intensive supportive services. PSH is not time-limited, but over time, some program participants reach a point where they no longer need or want

³⁸ 24 CFR § 5.2005(b)(2)

³⁹ 24 CFR § 982.555(b)

⁴⁰ 24 CFR § 982.555(a)

⁴¹ 24 CFR § 5.2005(a)(2)

intensive services. However, in most cases the need for financial housing assistance remains a prohibitive barrier to leaving PSH. Moving On helps tenants overcome these barriers by providing an affordable housing option and short-term services and resources that support program participants during and shortly after their move to a greater level of independence.

PHAs play a fundamental role in Moving On, providing access to affordable housing through PHA programs that enable program participants to move on as tenants, which allows more individuals and families to access the housing options best suited for their situations. Moving On efforts include a broad range of options based on local context, needs, and resources. This frees up units and intensive services that can then be offered to the most vulnerable people experiencing homelessness. Moving On provides optimal outcomes for current PSH program participants, as well as the entire homeless system, as it supports growth, independence, and choice for current program participants. For more information, see the following resource, developed by a HUD funded TA Provider: [PHA Moving On How-To Guide](#).

- 14. Service Providers as a Resource in Continued Occupancy:** Social service providers, homeless service providers, and other community programs are important resources in ensuring housing stability, including compliance with program and family obligations and other program requirements, for homeless individuals and families newly admitted to the program.

Many PHAs develop either formal or informal relationships with local community organizations, including public and nonprofit homeless service providers as well as city or county departments of health and human services and mental health, to help provide services to people experiencing homelessness. These agencies can help families to retain their assistance by offering supportive services (see Section 15 of this Notice for a discussion of PBV and supportive services), food assistance, basic education, employment and vocational training, transportation assistance, financial planning, life skills classes, substance abuse services, mental and physical health care, and parenting and childcare services. PHAs may establish working relationships or consider entering into service agreements with the service providers to provide greater access to services for tenants. The PHA may consider making available an empty office space or community space for the service provider to offer voluntary services to the residents.

- 15. Project-Based Vouchers:** The PBV program offers a flexible tool PHAs can use to meet the affordable housing needs of their local community, including providing the opportunity to partner with homeless service providers and other program partners to offer permanent affordable housing and access to supportive services to individuals and families who are experiencing homelessness. In particular, PHAs may use PBVs in units specifically made available to house individuals and families experiencing homelessness, pair PBV units with voluntary supportive services and establish waiting list preferences in the PHA Administrative Plan to ensure families experiencing homelessness are assisted as quickly as possible in PBV units. A PHA's use of PBVs is subject to the PBV

program rules,⁴² which include certain flexibilities that may facilitate PBV use for individuals and families experiencing homelessness.

•**Program Cap:** PBV program requirements generally limit the number of units that PHAs may project-base to up to 20 percent of their Consolidated Annual Contributions Contract (ACC) authorized units. However, PHAs may project-base an additional 10 percent of their ACC authorized units above this program limit, provided these units fall into one of the eligible exception categories outlined in [PIH Notice 2017-21](#), Attachment D.

- a) **Units Made Available to House Individuals and Families Experiencing Homelessness:** An exception is made for units specifically made available to house individuals and families who meet the definition of homeless under Section 103 of the McKinney-Vento Homeless Assistance Act (42 U.S.C. 11302) and contained in the Continuum of Care Interim Rule at 24 CFR 578.3. While all PBVs may house homeless individuals and families, units contracted pursuant to this program cap exception category are specifically for homeless individuals and families.
- b) **Units Made Available to House Veterans:** An exception is made for units specifically made available to house veterans, which could include veterans experiencing homelessness.
- c) **Units Providing Supportive Services:** An exception is made for units specifically made available to persons with disabilities or elderly, which could include persons with disabilities or elderly that were experiencing homelessness.
- d) **Units Located in a Census Tract with a Poverty Rate of 20 percent or less:** An exception is made for unit located in a census tract with a poverty rate of 20 percent or less. In addition to increasing the number of units a PHA may project-base, this exception may use to increase family choice for individuals and families experiencing homelessness.
- e) **Units Made Available to Foster Youth Utilizing FUP FYI Awards:** An exception is made for units specifically made available to foster youth eligible for a FUP or FYI voucher award, which could include foster youth experiencing homelessness.

• **Project Cap:** The project cap for the PBV program generally provides that PHAs may not provide project-based assistance to more than the greater of 25 units or 25 percent of the of units in a project as outlined in [PIH Notice 2017-21](#), Attachment E. However, certain units are excepted or not subject to the cap as explained in Notice PIH 2017-21 Attachment E and F. These exceptions may increase access to PBVs for individuals and families experiencing homelessness:

⁴² 24 CFR Part 983 and provisions implemented at 82 FR 5458 (Jan. 18, 2017), 82 FR 32461 (Jul. 14, 2017)

- a) **Units exclusively serving elderly families:** A PHA is not limited with respect to the number of units in a project it can make available to elderly families. While it is not necessary that an entire project or building within the project be made available for the exclusive use of elderly families, a PHA may project-base 100 percent of the units in such project. This may increase opportunities for elderly families experiencing homelessness.
- b) **Units housing households eligible for supportive services:** Dwelling units that are exclusively made available to “households eligible for supportive services” that are made available to the assisted residents of the project are excepted from the project cap.

To implement the exception, the PHA must include in its Administrative Plan the type of services offered to families and the extent to which such services will be provided. For the exception to apply to a unit, the project must make supportive services available to all assisted families in the project, and the family must be eligible for one or more of the services. A PHA may not require supportive services as a condition of living in an excepted unit.⁴³ While the supportive services do not need to be provided by the owner or onsite, services must be reasonably available to the families receiving PBV assistance in the project and designed to help the families in the project achieve self-sufficiency or live in the community as independently as possible.

PBV projects that offer supportive services, including supportive services offered as part of a project cap exception, are an important form of PSH that combines affordable housing assistance with voluntary supportive services. PHAs and owners are encouraged to offer supportive services in connection with all PBV units, even where no project cap exception is used. The PHA or owner may enter into an MOU or other such agreement with a homeless services provider or other program partner to provide these supportive services, which may be designed to assist individuals and families with building independent living and tenancy skills, connect to community-based and culturally specific health care, treatment, or job service, and address chronic health problems, mental illness, or trauma.

HUD encourages PHAs to consider how the structure of their supportive services package may best support individuals and families that experienced homelessness maintain their PBV tenancy. In the case of a family that chooses to participate in the supportive services, as described by the PHA in the Administrative Plan, and successfully completes the supportive services objective, as defined by the PHA in its Administrative Plan, the unit will continue to be an excepted unit under this category for as long as the family resides in the unit.

⁴³ There are two exceptions to this. First, certain projects with HAP contract effective dates prior to April 18, 2017, are subject to rules on PBVs housing families participating in supportive services. See Notice PIH 2017-21 Att. E § 6 for information. Second, PBV units using HUD-VASH vouchers are subject to requirements on participation in case management. See 86 FR 53207 (Sept. 27, 2021) for information.

- c) **Units in a census tract with a poverty rate of 20 percent or less:** Another strategy for increasing the number of units available to individuals and families experiencing homelessness is to locate units in a project within a census tract with a poverty rate of 20 percent. Such units are subject to a higher (40%) cap. This strategy also increases family choice.

16. PBV Waiting List Administration and Preferences: The PHA may use a separate waiting list for admission to PBV units in individual projects or buildings (or for sets of such units), use a single waiting list for the PHA's entire PBV program, merge the PBV waiting list with a waiting list for another tenant-based or project-based housing program, or may use the same waiting list for both tenant-based and PBV assistance.⁴⁴ If the PHA chooses to use a separate waiting list for admission to PBV units, the PHA must offer to place applicants who are listed on the waiting list for tenant-based assistance on the waiting list for PBV in accordance with 24 CFR 983.251(c)(2). The PHA must select families from the waiting list in accordance with the PHA's Administrative Plan.

The PHA may also adopt a different set of admissions preferences for each separate waiting list and may do so in consultation with the CoC and other community partners. The preferences offered by a PHA depend on local housing needs and may include a preference for housing that is intended for a particular population or for families who qualify for voluntary services, including disability-specific services, offered in conjunction with the housing. In the case of PBV units under a project cap exception, PHAs must give preference to families qualifying for the units. Assisted families who receive housing because of a preference for families who qualify for services can receive voluntary services from a service provider of their choosing or choose not to participate in services at all.⁴⁵

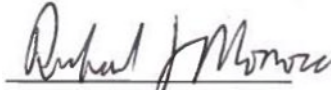
A PHA that wishes to partner with a homeless service provider to project-base vouchers may consider creating a separate waiting list for the project and may offer a preference for individuals or families who are homeless, individuals or families who qualify for voluntary services, including disability-related services, offered in conjunction with assisted units at the project, or individuals or families referred through the local CE System. Any such preference must be consistent with the PHA plan and all applicable Federal nondiscrimination and civil rights statutes and requirements.

17. Paperwork Reduction Act: The information collection requirements contained in this document have been submitted to the Office of Management and Budget (OMB) under the Paperwork Reduction Act of 1995 (44 U.S.C. 3501-3520) and assigned OMB control number 2577-0083. In accordance with the Paperwork Reduction Act, HUD may not conduct or sponsor, and a person is not required to respond to, a collection of information unless the collection displays a currently valid OMB control number.

⁴⁴ 24 CFR § 983.251(c)(2)-(4)

⁴⁵ See 82 FR 5458, 5469-5471 (Jan. 18, 2017) for information on preferences for families who qualify for voluntary services and PIH Notice 2017-21 Appx. II for information on PBV preferences generally.

18. **Information Contact:** Inquiries about this Notice should be directed to publichousingpolicyquestions@hud.gov for Public Housing, vouchernotice@hud.gov for Housing Choice Vouchers, and SNAPSinfo@hud.gov for CPD.



Richard J. Monocchio
Principal Deputy Assistant Secretary
For Public and Indian Housing



Claudette Fernandez
General Deputy Assistant Secretary
For Community Planning and
Development