

# Texas State Affordable Housing Corporation Compliance Review Observation Report

<b>Spring Terrace</b>			
<b>2600 S Spring St Amarillo, TX 79109</b>			
<b>Owner:</b> RHAC-Spring, LLC		<b>Date Built:</b> 1983	
<b>Management Company:</b> Capstone Real Estate Services		<b>Property Manager:</b> Lisa Phillips	
<b>Inspection Date &amp; Time:</b> October 29, 2014 at 11:00 A.M. <b>Inspector's Name:</b> James Matias & Celina Mizcles			

<b>Number of Units:</b>	50	<b>Number of required LI units:</b>	50	<b>Number of required VLI units:</b>	NA
COMPLIANCE AUDIT			YES	NO	N/A
1)	Are procedures that ensure compliance with the set aside requirements and rent requirements effective?		X		
2)	Is the property accepting Section 8 households?		X		
3)	Is the income to rent ratio for Section 8 households less than 2.5?		X		
4)	Are the rent increases smaller than 5%?		X		
5)	Is there any discriminatory language on the Application for Tenancy or Occupancy Qualifications?			X	
6)	Does the lease or rental agreement inform the resident of Very Low Income/Low Income and Recertification requirements?		X		
7)	Is additional monitoring by TSAHC recommended?			X	
<b>COMMENTS:</b>					

SET-ASIDES			YES	NO	N/A
1)	Do the files reviewed establish that the property is meeting the Low Income residency requirement whereby 75 percent of the units are rented to tenants whose adjusted income is 80 percent or less of the median gross income for the Metropolitan Statistical Area where the property is located?				X
2)	Do the files reviewed establish that the property is meeting the Very Low Income residency requirement?				X
3)	Are the set-aside units evenly distributed?				
	a) No more than 60% of the set-aside requirements consist of one unit type?				X
	b) No less than 20% of the set aside requirements consist of any particular unit type?				X
4)	If either of the set asides have not been met, are any units :				
	a) Rented for less than 30 days, not including month-to-month?			X	
	b) Utilized as a hotel, motel, dormitory, fraternity house, sorority house, rooming house, nursing home, hospital, sanitarium, rest home, or trailer court or park?			X	
	c) Leased to a corporation, business or university?			X	
	d) Owned by a cooperative housing corporation?			X	
	e) Not available for rental on a continuous basis to members of the general public?			X	
<b>COMMENTS:</b>					

UNITS WALKED			
(units vacant and unready for extended period of time and all down units)			
Unit #	USR Designation	New Designation	Comments
NA			
<b>COMMENTS:</b>			

RESIDENT SERVICES			YES	NO	N/A
1)	Does the programming appear to cater to the resident profile of the property?		X		
2)	Does the programming appear to be effective?		X		
3)	Is there a resident services notebook available to review?		X		

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4) TSAHC provided Technical assistance regarding:			
a) Resident attendance	X		
b) Frequency of service provided	X		
c) Transportation provided for off site services	X		
d) Notification to residents of services	X		
e) Number or type of services	X		
f) Survey of residents	X		
g) On-line reporting	X		
5) Does the property comply with the resident services requirement?	X		
<b>COMMENTS:</b>			

OFFICE	YES	NO	N/A
1) Is the office neat, the desk uncluttered?	X		
2) Are accurate office hours posted?	X		
3) Are the following displayed in full view:			
a) Occupancy Qualifications?	X		
b) Fair Housing Poster?	X		
<b>COMMENTS:</b>			

RESIDENT FILE REVIEW	YES	NO	N/A
1) Are there any Next Available Unit Rule Violations?			X
2) Does the file audit establish that residents are being recertified on an annual basis?	X		
3) Does the owner maintain all records relating to resident income certifications, together with supporting documentation?	X		
4) Does the Owner/Agent make an effort to determine that the income certification provided by the resident is accurate?	X		
5) Does the file audit indicate that staff needs additional training?		X	

**COMMENTS:**  
The following issues were noted during the onsite resident file review:

- The Health and Safety form was missing in files 33, 36, 44, and 48.
- Unit 33: The file contained a monetary contribution form yet the income was not listed on the initial Income Certification form.

All of the items noted above were corrected and submitted to TSAHC prior to the issuance of this report. Therefore, no findings were issued.

Unit	Finding	Corrective Action Requirement
NA		
<b>COMMENTS:</b>		

SUMMARY OF FINDINGS AND OBSERVATIONS