VAWA EMERGENCY TRANSFER REQUEST FOR HOME TENANT

(Request for MSHDA Approval of Transfer)

This form is to be used by an Owner or its authorized agent to request approval by the Michigan State Housing Development Authority (MSHDA) for an Emergency Transfer of the tenant referenced below. This form must be completed for all Violence Against Women Act (VAWA) Emergency Transfer Requests for tenants residing in a unit assisted by the MSHDA Home Investments Partnership Program (HOME).

PROJECT NAME	CITY, COUNTY	MSHDA Project #

Instructions

The Owner and/or Management Agent at the HOME property must make a preliminary determination regarding whether a tenant qualified for an emergency transfer and then must send this Approval Form to the e-mail address listed below within 24 hours of the request. Indicate "VAWA Emergency Transfer Request for HOME-assisted Tenant" in the subject line.

MSHDAcompli@michigan.gov.

MSHDA's role is limited to reviewing the property manager's determination of whether a tenant qualified under the Emergency Transfer Plan. MSHDA does not process or handle transfers or transfer requests beyond that review. **Only this Approval Request form needs to be sent to MSHDA**. After MSHDA's review of this Approval Form and if deemed necessary, MSHDA may request that the Agent send the emergency transfer request forms (HUD 5382 and HUD-5383) and/or documentation. MSHDA staff will respond to the owner/agent's request within two (2) business days. If MSHDA has not responded within two business days, the owner/management agent shall treat the tenant's request as approved. MSHDA HOME projects that have other government funding, such as Rural Development, should also consult the administrators of those programs about VAWA applicability and the tenant's eligibility to transfer.

In situations in which MSHDA policy is unwritten or conflicting, the rules outlined in VAWA regulations, HUD VAWA regulations, and/or HOME Program rules shall prevail. Definitions and pertinent regulations are listed at the bottom of this form.

CURRENT UNIT ("Transfer from")		
Household Name*	**Head of Household***	**# of Occupants**
Unit Number	**Building Address**	**Move-in Date**

NEW UNIT ("Transfer to")		
Property Name	**City/County**	**MSHDA Project #**
Household Name*	**Head of Household at Transfer***	**# of Occupants**
Unit Number	**Building Address**	**Government Funding, if any**

**If tenant confidentiality is essential for this household, the first and last initial of the head of household will be sufficient for purposes of completing this form.*

	MUST BE COMPLETED BY THE OWNER/AGENT	Yes	No
1	The tenant has expressly requested an Emergency Transfer.		
2	The tenant (or person acting on behalf of the tenant) has completed, signed, and dated a **HUD-5382** (or has provided other acceptable third-party documentation as outlined on the HUD-5382).		
3	The tenant (or person acting on behalf of the tenant) has completed, signed, and dated a **HUD-5383** (or has completed another acceptable method of requesting an emergency transfer as discussed on the HUD-5383).		
4	If such was requested by the Agent, the tenant has provided documentation of its need and eligibility for an Emergency Transfer. (24 CFR 5.2007)		
5	The tenant is transferring out of a **HOME-assisted unit**.		
6	The tenant has indicated that he/she believes that the "Transfer To" unit is a safe unit for the household.		
INTERNAL TRANSFER (within the same property)			
7	The tenant is transferring to a residential unit at the same development.		
8	The unit the tenant is transferring to is (or will be upon the tenant's move-in) a **HOME-assisted** unit at the same development.		
9	If yes to #8 above, the Agent has determined that the tenant is/will be eligible to occupy the **HOME-assisted unit** (i.e. within HOME income guidelines at move-in, rent amount, student status, etc.)		
EXTERNAL TRANSFER (to a different property)			
10	The tenant will be transferring to a unit in an external property.		
11	The external property is affiliated with the owner or management agent of the property the tenant is transferring out of. *(Note: Affiliation is permissible but not mandatory.)* Description of affiliation: _____		
12	The external property has HOME assistance via MSHDA or another HOME participating jurisdiction. *If unknown, indicate "unknown" here: _____.*		
13	The tenant will be **a HOME-assisted** tenant at the external property. *If unknown or N/A, indicate "unknown" or "N/A" here: _____.*		
AGENT'S REVIEW OF EMERGENCY TRANSFER REQUEST			
14	The Agent has reviewed the tenant's **HUD-5382** (or alternate third-party documentation) and **HUD-5383** (or alternate request method) for completeness and adequacy. (24 CFR 5.2007)		
15	The Agent has reviewed the tenant's supporting documentation for completeness and adequacy. (24 CFR 5.2007)		
16	The Agent is properly allowing the tenant to bifurcate the lease, including not charging the tenant a fee that would be impermissible with an Emergency Transfer (such as an application fee, transfer fee, or an early lease termination fee).		
17	The Agent is maintaining all **HOME eligibility documentation** in the tenant's file for review upon request by MSHDA (or its contractual agent).		
18	The Agent is maintaining documentation of the Emergency Transfer request in a confidential manner and in a secure location. (24 CFR 5.2007)		
19	The Agent has determined that this emergency transfer request satisfied the conditions outlined in the property's **Emergency Transfer Plan**.		
20	The Agent has made a preliminary determination that the tenant is eligible for an Emergency Transfer and has satisfied the requirements for such, pursuant to **HUD VAWA Regulations** and MSHDA Policy.		

PROJECT NAME	Household Name	Unit # / Address

Owner Certification

I, as an authorized representative of the ownership entity (_____), which is the owner of the above-referenced HOME-assisted development, hereby request the Michigan State Housing Development Authority (MSHDA) approve the Emergency Transfer Request for a tenant residing in a HOME-assisted unit.

_____ By: _____
Printed Name of Signatory Signature

_____ _____
Title of Signatory Company Name

_____ _____
Contact Address, Phone, E-mail Date

MSHDA Approval:

_____ _____
Compliance Officer / Authorized Representative *Date*

Approval Comments: _____

Definitions and Regulations

- "HUD VAWA Regulations" refers to 24 CFR Part 5, Subpart L, as amended and/or supplemented by additional HUD guidance.
- "HOME VAWA Regulations" are found in at C.F.R. Part 92, as amended and/or supplemented.
- HOME – Properties funded by MSHDA through the Home Investments Partnerships (HOME) program.
- **HUD-5382** refers to form HUD-5382 (Certification of Domestic Violence, Dating Violence, Sexual Assault, or Stalking, and Alternate Documentation)
- **HUD-5383** refers to form HUD-5383 (Emergency Transfer Request for Certain Victims of Domestic Violence, Dating Violence, Sexual Assault, or Stalking).
- "Owner/Agent" refers to the owner of the HOME project and/or the owner's designated management agent or authorized representative.
- Emergency Transfer Plan (ETP) – 24 CFR 5.2005(e), as supplemented by 24 CFR 92.359 (HOME).
- ETP documentation, 24 CFR 5.2007.