AFHMP Form Regulations

• 24 CFR §200.600-200.640
• Covers all FHA subsidized and unsubsidized projects
• Exemptions-Not require for subsidized multifamily projects built PRIOR to February 1972 or projects with less than 5 units UNLESS property is substantially rehabilitated
• Note: We also exempt sites using statewide Developmental Disabilities waiting list with less than 10-12 units at scattered sites.
• Display FH Poster or LOGO including on project sign
• Use Form HUD-935.2A and update every time major change in how you will market or new company
• Have AFHHMP (plan) available onsite
AFHMP Form Contents

• Use current form it expires-(1/31/2021) –see top right corner 1st page of AFHMP-Go to HUD website to Forms to get correct version
• Old AFHMP form-obsolete as of Dec 2016
• First 4 pages of AFHMP constitute the actual AFHMP
• Pages 6-8—Read first-Instructions to complete the form
• The last four pages are Worksheets #1-#4
• Worksheets 1-3 and 4 are required for all submissions
• Worksheet #2-Required only if requesting Residency Preference
AFHMP Review Process

AFHMP form is available at:


Multifamily Review Process

Submit AFHMPs to: ny.incoming@hud.gov
AFHMP Review Process

• Multifamily logs plans in & assigns to Account Executives in NY and NJ-Do completeness review using internal MFH checklist “Review of AFHMP (For Multifamily Housing Staff Only)”

• Dean Santa, Director signs all AFHMPs and the cover memo MFH sends 3 documents: cover memo, MFH checklist and signed AFHMP
FHEO Review Process

FHEO reviews
Provides TA and recommends revisions to comply
FHEO will request:

- Reasonable Accommodation Policy and Forms
- LEP/LAP if Worksheet #1 census data indicates LEP population

Checking for Copies of Advertising:
- Department-approved Equal Housing Opportunity logo or slogan or statement
- Does it depict persons from majority and minority groups
AFHMP Form (935.2A) – Blocks 1a.- 1e

- 1a.-Project Name & Address
- 1b.-Project Number
- 1c.-# of Units (Add 1 for Superintendent)
- 1d.-Census Tract-See American Fact Finder-Use Current Data
- 1e.-Housing Market Area/Expanded Housing Market Area
AFHMP Form (935.2A) - Block 1d.

- Census Tract
  - Census Tract must be verified via:
    - American Fact Finder: [http://factfinder2.census.gov](http://factfinder2.census.gov)
    - FFIEC’s Geocoding System: [www.ffiec.gov](http://www.ffiec.gov)

- Scattered Sites
  - Determine Census Tract for each location
  - Group together and market based on the demographic composition of the Census Tract in which each project is located
AFHMP Form (935.2A) - Block 1e.

- Identify the Applicable Housing Market Area (HMA)
  - An HMA is a geographical area from which a multifamily housing project owner/agent may reasonably expect to draw a substantial number of residents.
  - Usually City or County

- Identify the Applicable Expanded HMA (EHMA)
  - An EHMA is a geographic area which provides more diversity in terms of race, color, national origin, religion, sex, familial status, or disability than the HMA.
    - In NJ, a contiguous County or a specified geographic radius surrounding the project may be considered an EMHA.
    - The project owner/agent provides justification to use an EMHA.

**NOTE**: EHMs are subject to FHEO’s approval.
AFHMP Form (935.2A) – Blocks 1f.- 1i.

<table>
<thead>
<tr>
<th>Block</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>1f.</td>
<td>Managing Agent Name, Address (including City, County, State &amp; Zip Code), Telephone Number &amp; Email Address</td>
</tr>
<tr>
<td>1g.</td>
<td>Application/Owner/Developer Name, Address (including City, County, State &amp; Zip Code), Telephone Number &amp; Email Address</td>
</tr>
<tr>
<td>1h.</td>
<td>Entity Responsible for Marketing (check all that apply)</td>
</tr>
<tr>
<td></td>
<td>Owner</td>
</tr>
<tr>
<td></td>
<td>Position, Name (if known), Address (including City, County, State &amp; Zip Code), Telephone Number &amp; Email Address</td>
</tr>
<tr>
<td>1i.</td>
<td>To whom should approval and other correspondence concerning this AFHMP be sent? Indicate Name, Address (including City, State &amp; Zip Code), Telephone Number &amp; E-Mail Address.</td>
</tr>
</tbody>
</table>
AFHMP Form (935.2A) – Blocks 2a.- 2d.

<table>
<thead>
<tr>
<th>2a. Affirmative Fair Housing Marketing Plan</th>
</tr>
</thead>
<tbody>
<tr>
<td>Plan Type: Please Select Plan Type</td>
</tr>
<tr>
<td>Reason(s) for current update:</td>
</tr>
<tr>
<td>Date of the First Approved AFHMP:</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>2b. HUD-Approved Occupancy of the Project</th>
</tr>
</thead>
<tbody>
<tr>
<td>Elderly</td>
</tr>
<tr>
<td>Family</td>
</tr>
<tr>
<td>Mixed (Elderly/Disabled)</td>
</tr>
<tr>
<td>Disabled</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>2c. Date of Initial Occupancy</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>2d. Advertising Start Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Advertising must begin at least 90 days prior to initial or renewed occupancy for new construction and substantial rehabilitation projects.</td>
</tr>
<tr>
<td>Date advertising began or will begin:</td>
</tr>
<tr>
<td>For existing projects, select below the reason advertising will be used:</td>
</tr>
<tr>
<td>To fill existing unit vacancies</td>
</tr>
<tr>
<td>To place applicants on a waiting list:</td>
</tr>
<tr>
<td>(which currently has individuals)</td>
</tr>
<tr>
<td>To reopen a closed waiting list:</td>
</tr>
<tr>
<td>(which currently has individuals)</td>
</tr>
</tbody>
</table>
AFHMP Form (935.2A) – Blocks 3a.- 3b.

### 3a. Demographics of Project and Housing Market Area
Complete and submit Worksheet 1.

### 3b. Targeted Marketing Activity
Based on your completed Worksheet 1, indicate which demographic group(s) in the housing market area is/are least likely to apply for the housing without special outreach efforts. (check all that apply)

- [ ] White
- [ ] American Indian or Alaska Native
- [ ] Asian
- [ ] Black or African American
- [ ] Native Hawaiian or Other Pacific Islander
- [ ] Hispanic or Latino
- [ ] Persons with Disabilities
- [ ] Families with Children
- [ ] Other ethnic group, religion, etc. (specify)
## AFHMP Form (935.2A)-Signature Page

<table>
<thead>
<tr>
<th>For HUD-Office of Housing Use Only</th>
<th>For HUD-Office of Fair Housing and Equal Opportunity Use Only</th>
</tr>
</thead>
<tbody>
<tr>
<td>Reviewing Official:</td>
<td>Approval  Disapproval</td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td>Signature &amp; Date (mm/dd/yyyy)</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Name</strong> (type or print)</td>
<td><strong>Name</strong> (type or print)</td>
</tr>
<tr>
<td><strong>Title</strong></td>
<td><strong>Title</strong></td>
</tr>
</tbody>
</table>

- **Signature & Date (mm/dd/yyyy)**
- **Name (type or print)**
- **Title**
Worksheet 1

• **Input Census Data into Worksheet 1**

• **If Worksheet #1 is blank-WHY???

  • FHEO will ask if previous owners left bound book, old applications, and current application in use (to see if it meets CR requirements).

  • FHEO may request copy of blank pre-application and/or application
Worksheet 1 – Input Census Data

<table>
<thead>
<tr>
<th>Demographic Characteristics</th>
<th>Project’s Residents</th>
<th>Project’s Applicant Data</th>
<th>Census Tract</th>
<th>Housing Market Area</th>
<th>Expanded Housing Market Area</th>
</tr>
</thead>
<tbody>
<tr>
<td>% White</td>
<td>58.7</td>
<td></td>
<td>33.3</td>
<td></td>
<td></td>
</tr>
<tr>
<td>% Black or African American</td>
<td>4.4</td>
<td></td>
<td>22.6</td>
<td></td>
<td></td>
</tr>
<tr>
<td>% Hispanic or Latino</td>
<td>8.4</td>
<td></td>
<td>28.6</td>
<td></td>
<td></td>
</tr>
<tr>
<td>% Asian</td>
<td>27.8</td>
<td></td>
<td>12.6</td>
<td></td>
<td></td>
</tr>
<tr>
<td>% American Indian or Alaska Native</td>
<td>0.1</td>
<td></td>
<td>0.2</td>
<td></td>
<td></td>
</tr>
<tr>
<td>% Native Hawaiian or Pacific Islander</td>
<td>0.0</td>
<td></td>
<td>0.0</td>
<td></td>
<td></td>
</tr>
<tr>
<td>% Persons with Disabilities</td>
<td>7.3</td>
<td></td>
<td>24.5</td>
<td></td>
<td></td>
</tr>
<tr>
<td>% Families with Children under the age of 18</td>
<td>12.6</td>
<td></td>
<td>30.6</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Other (specify)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Note About Residency Preferences

Worksheet #2

• Residency Preferences are reviewed separately with concurrence by FHEO HQ
• Approval of AFHMP does not constitute approval of residency preference
• FHEO may ask for copy of PILOT
• Signed by Region II FHEO Director
AFHMP Form (935.2A) – Worksheet #3

• **Worksheet #3**, you **MUST** provide the following for each community contact:
  - Name of organization/individual
  - Address, telephone number, & title contact person
  - Protected class the organization reaches out to
  - Previous experience working with the target population
  - Approximate date the group/individual will be contacted
  - Specific role the contact will play in assisting with AFHM & outreach
  - Method of contact (letter, in-person, other)
AFHMP Form (935.2A) – Worksheet #4

- **Worksheet #4**, you **MUST** identify the following for each marketing method:
  - The media option
  - The language of the advertisement. If groups you’re targeting Limited English Proficient, (LEP) use multi-lingual materials/ads.
  - Any alternative format(s) that will be used to reach persons with disabilities.
  - Logo(s) that will appear on various materials, as well as their size.

**NOTE:** Definition for “Elderly Persons” should be consistent with the Multifamily Occupancy Handbook, Chapter 3
Typical Problem Areas

Identify the Applicable Housing Market Area (HMA)
An HMA is a geographical area from which a multifamily housing project owner/agent may reasonably expect to draw a substantial number of tenants.

Identify the Applicable Expanded HMA (EHMA)
An EHMA is a geographic area which provides more diversity in terms of race, color, national origin, religion, sex, familial status, or disability than the HMA.

Put the census tract in block 1i.
Can find this on FFIEC website under “Geocoding-mapping system http://www.ffiec.gov/

Block 3: groups least likely to apply-Check demographics!!
Typical Problem Areas (cont’d)

• Block 4b: Brochures/letters/handouts and signs
  • If using brochures/letters/handouts, must include a copy
  • Must include a picture of site sign with FH Logo

• Block 4c: Community contacts
  • Consistent with groups checked in Block 3
  • Must include copies of letters to agencies to be contacted

• Block 6b: Experience and staff instructions
  • Attach a document stating the training to be provided to staff on fair housing issues
  • Training provided to all staff, including maintenance
  • Attach staff instructions: example-Memo to staff on fair housing obligations
Questions? For more information contact:

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