SELF-CERTIFICATION OF ADOPTION AND COMPLIANCE WITH REVISED CITY OF LOS ANGELES FAIR HOUSING POLICIES RELATED TO DISABILITY: GUIDANCE AND REQUIREMENTS FOR OWNERS AND PROPERTY MANAGEMENT AGENTS

Name of Development:

Property Address:

Property Owner:
Property Owner's Phone:
Property Owner's Email:

Property Management Agent:
Property Management Agent's Phone:
Property Management Agent's Email:

I, the undersigned, being the Owner/Management Agent of the above Project, hereby certify under penalty of perjury that the following is true and correct:

(Please check boxes indicating compliance)

- ❏ I have provide(d) each household in the above-named development, and will provide to applicants on the waitlist upon request, a copy of the Rental Occupancy Policies: Tenant Handbook and Appendices 1-10, and submitted a copy of the Tenant Receipt of Acknowledgment of Rental Occupancy Policies: Tenant Handbook and Appendices 1-10 to AcHP.
- ❏ I hereby acknowledge adoption and implementation of the City's Fair Housing Policies Related to Disability: Guidance and Requirements for Owners and Property Management Agents, including the Tenant Handbook: Rental Occupancy Policies Related to Disability, and all attachments (collectively "Policies") for the above-named Development.
- ❏ I understand that failure to cooperate or comply will result in enforcement actions by the City and ultimate referral to the U.S. Department of Housing and Urban Development (HUD) per ¶55 of the Voluntary Compliance Agreement (VCA).

PRINT/TYPE NAME:_____   Date: _____

_____   ☐ Owner   ☐ Management Agent
Signature   (Check One)