LAKE METROPOLITAN HOUSING AUTHORITY

Dear Housing Choice Voucher Program Landlord,

Effective July 1, 2023, and until funds have been exhausted, Lake MHA will be implementing a Damage Mitigation Reimbursement Incentive.

Landlords who have an HCV participant vacate a unit on or after July 1, 2023, are eligible to apply for damage mitigation reimbursement funds if certain conditions apply. The landlord will be eligible to receive up to $1,500.00 per unit in reimbursement of costs when HCV participant's tenancy ends and there is tenant-caused damage (above and beyond normal wear and tear) to the unit in excess of the security deposit collected by the landlord. The reimbursement is intended to assist the landlord with recovery of cost for damages that exceed the security deposit.

To justify the reimbursement, Lake MHA will require:

- Landlord must have conducted a separate non-HQS inspection of the unit within the past 12 months. Certification of this inspection date is required.
- Landlord letter to HCV participant regarding the status of the security deposit balance with an itemized list of damages and out-of-pocket/repair estimate documentation. The letter to the participant must be dated within thirty (30) days of the participant vacating the unit.
- Pictures of the damages.

The Landlord must apply for the damage mitigation reimbursement within sixty (60) days of the end of the HCV participant's tenancy and all required information must be submitted. The attached form is required to process for eligibility for disbursement.

Sincerely,
Lake Metropolitan Housing Authority

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Landlord Name: _____ Phone Number: _____

Check Mailing Address with zip code: _____

SSN Number or TIN Number associated with property: _____

Tenant Name: _____

Unit address: _____

Tenant Move In Date: _____ Unit Vacate Date: _____

Excess amount requested: _____

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Landlord inspection date (this inspection date should not be the same as Lake MHA's HQS inspection dates. Landlords are expected to conduct inspections independent of Lake MHA's required annual HQS requirement. _____

Landlord/housing provider letter to participant/tenant regarding the status of security deposit balance with the itemized list of damages and out of pocket documentation to support reimbursement. Letter to participant/tenant must be dated within 30 days of vacating the unit.
Documentation attached: ____Yes ____No

_____ _____
Landlord Signature Date

I/We certify that the above inspection certification and documents given to Lake MHA are complete and accurate to the best of my/our knowledge and belief. I/We also understand that giving false statements or information can be grounds for program termination and is punishable under Federal or State criminal Law. Disclaimer: I/We also acknowledge and agree that payment from these funds is full and complete satisfaction of the obligation covered by the mitigation fund.

*****DISCLAIMER FOR TENANT PROTECTION/COLLECTION*****
The amount requested may not be the amount approved for payment. Amounts will only cover damages in excess of the participant/tenant's security deposit.

For Lake Metropolitan Housing Authority Use Only

Approved _____ Denied _____

_____ _____
HCVP Manager Signature Date