City and County of San Francisco

**Mayor’s Office of Housing and Community Development (MOHCD)**

**Marketing Plan and Tenant Selection for Waitlist Rental Units**

This marketing and tenant selection plan is subject to City review. **Please set all advertising dates in this plan so that no date commences sooner than 45 calendar days from the date of your plan submission.**

**Please complete and return this form as a “Word” document so that our office may track changes directly onto the document**. The approval process typically involves a back-and-forth process between MOHCD and the property’s representative. Please do not submit incomplete plans. This marketing and tenant selection plan may be updated from time to time at the discretion of MOHCD.

**I. General Information**

Our goal is to ensure that all applicants are screened using consistently applied, fair criteria, to provide a desirable, well-maintained and affordable place to live for an economically, racially, and ethnically integrated resident population, while complying with the provisions of any federal, state, or local law prohibiting discrimination in housing on the basis of race, religion, sex, color, family status, disability status, national origin, marital status, ancestry, gender identity or sexual orientation, source of income, or HIV/AIDS status.

In order to inform the public, owners, and prospective tenants about federal fair housing laws and affirmative fair marketing procedures per the MOHCD Loan Agreement, we will include the Equal Housing Opportunity logotype and/or slogan, and a logotype indicating accessibility to the disabled, in all press releases, solicitations, and program information materials.

|  |  |
| --- | --- |
| **Today’s Date** |  |
| **Posting Date** | Must be at least 45 days from the date of the submission of this marketing plan to MOHCD. |
| **Type of Unit(s)** |  |
| **Development Name** |  |
| **Address** |  |
| **Developer** |  |
| **Developer Contact** |  |
| **Building Name** | *If different than development name* |
| **Photo URL** | *URL of a high-resolution photo of the outside of your building* |
| **Year Built** |  |
| **Website** |  |
| **Neighborhood** |  |
| **Application Contact Person and Address** |  |
| **Phone** |  |
| **Email** |  |
| **Application deadline** | Set the application deadline no sooner than 14 calendar days from the posting date.  \_\_\_\_\_, 5pm  Applications must be received in paper form (no faxes or emails) by 5pm on the date of the deadline. **Postmarks will not be accepted. Applications received after the deadline will not be accepted.** |
| **Building Accessibility** | *Accessibility features in common areas like lobby – wheelchair ramps, wheelchair accessible bathrooms and elevators. Please indicate what specific ADA accessible features the units have or can be modified to have.* |
| **Building Amenities** | *Example: Laundry room, parking, gym, etc.* |
| **Parking** | *How many spaces available for renters. Limit one parking space per household. Parking is offered to households in lottery rank order. Parking may be no more than $100 per month.* |
| **Application Fee** | *Application fees are only to be collected post-lottery once a household is contacted by your building.* |
| **Rent Amount** |  |
| **Deposit Minimum** |  |
| **Deposit Maximum** |  |
| **Other fees & utilities paid by the renter (Costs Not Included)** | *Please list any fees for renter’s insurance, utilities paid by the renter etc. here.* |
| **Lottery** | Lottery can be held no sooner than 21 calendar days after application deadline.  *Enter date, time and location.* |
| **Date Lottery Results will be posted** | *Lottery results will be posted on the http://housing.sfgov.org website within 1 week of the lottery.* |
| **AMI level to determine Maximum Income and Rent** |  |
| **AMI Chart** | *Example: Unadjusted Area Median Income (AMI) for HUD Metro Fair Market Rent Area (HMFA) that contains San Francisco 2019* |
| **How to submit an application** | Applications must be submitted either of the following ways:   1. Download applications through the SF Housing Portal at:   <https://housing.sfgov.org>   1. Submit applications in person or by mail to the following address:   *Add Address (needs to be same as above address)*  If you need application assistance or information about available housing resources, please refer to the organizations listed in the SF Housing Resource Guide by clicking here: <http://sfmohcd.org/san-francisco-housing-resource-guide> |
| **Credit History Standards** |  |
| **Rental History Standards** |  |
| **Criminal Background** | *Please note our listing will by default notify all applicants that “Qualified applicants with criminal history will be considered for housing per Article 49 of the San Francisco Police code* [*Fair Chance Ordinance*](http://sfgsa.org/index.aspx?page=6599)*.”* |
| **Required Documents** |  |
| **Important**  **Program Rules** | *Link to Building Selection Criteria* |
| **Smoking Policy** |  |
| **Pet Policy** | *Please include any fees for pet rent, pet deposit, etc. Please specify that service and companion animals are welcome and pet fees do not apply.* |
| **Minimum Allowable Income Level of Households** | (Agents must require no more than 2x rent to income.)  Studio unit(s) – Household income must equal at least $\_\_ a month.  One-bedroom unit(s) – Household income must equal at least $\_\_ a month.  Two-bedroom unit(s) – Household income must equal at least $\_\_ a month.  Three-bedroom unit(s) – Household income must equal at least $\_\_ a month. |
| **Lottery Preferences** | All individuals and households may enter the lottery for a unit.  However, those households in which one member holds a Certificate of Preference (COP) from the former San Francisco Redevelopment Agency will be given highest preference in the lottery ranking process. More information about the COP Program can be found here: <http://sfmohcd.org/certificate-preference>  Households in which one member holds a Displaced Tenant Housing Preference (DTHP) Certificate from the Mayor’s Office of Housing and Community Development will be given second highest preference in the lottery ranking process, for up to 20% of the units in this project (*insert number of units here*).  DTHP certificate holders will also be included in the Live/Work preference regardless of their current live/work location.  *Note: The DTHP only apply to projects with 5 or more units. Please delete the DTHP information listed above if your project has less than 5 units.*  Households that submit acceptable documentation that at least one member lives or works in San Francisco will be given the third highest preference in the lottery ranking process.  If the number of units available exceeds the number of qualified applicants in the above listed preference, the units will become available to other qualified applicants outside of San Francisco. Applicants in each preference category must meet program requirements in order to complete the rental.  For more information about the lottery process and housing preferences, please refer to the MOHCD Housing Preferences and Lottery Procedures Manual here: <http://sfmohcd.org/sites/default/files/Documents/MOH/Preferences%20Manual%20-%20%2011.2.2016.pdf> |

**II. Overall Building Composition**

|  |  |
| --- | --- |
| Loan Agreement Name & Date | *If multiple MOHCD/OCII loan agreements, list all agreement names and dates.* |
| Name of City and Co. of SF Planner |  |
| MOHCD Project ID Number | *Leave blank – MOHCD will insert project ID* |
| List all Sources of Government Financing for the Project (e.g. CDLAC, TCAC, HUD Loan, Infill Grant, etc.) |  |
| If there is a source of government financing, how long and at what % Area Median Income must your units be restricted **as rental units** under this financing? | *Please include:*  *Funder name,*  *% AMI restriction(s),*  *Number of units at each income level, and*  *Date when restrictions end* |

|  |  |
| --- | --- |
| Total # Units in Building (including affordable) |  |
| Number of Residential Floors in the Building |  |
| Number of Commercial Floors in the Building |  |

#### III. Affordable Units

|  |  |
| --- | --- |
| Total # of affordable units in building |  |
| Total # of manager/staff units *(if applicable)* |  |
| Total # of vacant units |  |
| Total # of units in the lottery *(broken down by unit type)* |  |
| Total # of applicants on the Current Waitlist |  |
| Total # of applicants on the Final Waitlist |  |

# DETAILED DESCRIPTION OF AFFORDABLE Units by UNIT NUMBER

*Attach an Excel document with the following information that will be uploaded into DAHLIA. Refer to Rent Levels Set by MOHCD for Table Below. Only include units that apply to the waitlist and not referral units (such as HOPWA, Section 8 or TAY units)*

|  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Unit Number | Unit Type  (i.e. SRO, Studio, 1BR) | Unit Floor | Unit Square Footage | Min  Occu-  pancy | Max Occu-  pancy | Number  of  Bath-rooms | Rent Monthly  (do not include $ sign) | Rent % of income (only applic-able when rent is deter-mined as a % of house-  hold’s income) | Rent Multiple (i.e. if minimum monthly income is 2 times the rent, the rent multiple is 2) | % AMI  for Pricing  Unit | Priority Type  (Hearing/vision impaired, Mobility impaired, Developmental Disability, Senior, Veteran) |

**IV. Renter Qualifications**

We understand that it is our responsibility to read and understand the rules of the Regulatory Agreement(s) for this development as well as the marketing and outreach policies set forth by the City and County of San Francisco Mayor’s Office of Housing and Community Development.

1. Applicant Eligibility Criteria

All applicants must qualify based upon:

* Commitment to use the unit as the principal residence.
* Commitment to participate in rental restrictions and compliance recertification.
* Insert project specific eligibility information (household size, income, age, etc.)

1. Resident Selection Criteria Document

You must attach a Resident Selection Criteria document for our review. The Resident Selection Criteria must also specify any preferences or program-specific resident selection criteria applicable to the project, such as lottery preferences, and/or Access Point referrals from the Human Services Agency or Department of Public Health for Local Operating Subsidy Program units, etc.

The Resident Selection Criteria should also include the following information:

* Ability to pay rent standard
* Credit Standard
* Rental History Standard
* Criminal History Standard
* Mitigating Circumstances
* Guidelines Request for Reasonable Accommodation
* Grievance Policy
* Appeal Process

1. Local Operating Subsidy Program

If your project is receiving Local Operating Subsidy Program (“LOSP”) funds from either the Department of Public Health or Human Services Agency for designated LOSP units, then describe the total number of units and number of units receiving the LOSP subsidy along with the referral process for those units. Please insert the following language:

“Certificate of Preference Holders who meet eligibility for (Insert City department providing LOSP funds)’s LOSP units will have priority status over other LOSP applicants. Certificate of Preference holders will be required to apply for the LOSP units by going through the (Insert DPH or HSA) designated Access Sites/Points for LOSP eligibility screening.”

#### V. Marketing Strategy

1. Flyer and Strategy for Marketing to Residents of the Immediate Neighborhood
2. Please attach a copy of the flyer. Example provided at the end of this document.
3. Please attach a list of community organizations.

We understand we must present a strategy for reaching out to the local community surrounding the building. Suggestions include posting flyers in local community meeting places and reaching out to local community groups. At a minimum, list 10 local venues in which you will post your flyer or otherwise distribute your flyer.

##### *Your Strategy for Marketing to Residents of the Immediate Neighborhood Here:*

|  |
| --- |
|  |

1. Website

We will create a website for the affordable units or create a link for the units on our existing website at \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_. We will link our website to DAHLIA – San Francisco Housing Portal (<https://housing.sfgov.org/>).

1. Announcement to Board of Supervisor’s

We will announce the affordable housing opportunity at least twice to the Board of Supervisors District Office where the project is located by providing a copy of the flyer.

|  |  |
| --- | --- |
| **Board of Supervisor’s Name** | **Notification Dates** |
|  |  |
|  |  |

##### Strategy for Language Access

We understand we must be able to provide assistance to applicants who may not speak English. More information about the Language Access Ordinance can be found here: <http://sfgov.org/oceia/language-access-services>. Please list the languages spoken by your staff. Describe how language assistance in Cantonese, Tagalog and Spanish will be provided and include your strategy for reviewing applications submitted in these languages (i.e., translation service used, in house assistance available, etc.).

Throughout the marketing period, you must have copies of the SF Housing Resource Guide available in all four languages for applicants who require additional assistance or referrals to housing counseling. The SF Housing Resource Guide is available on our website here: <http://sfmohcd.org/san-francisco-housing-resource-guide>

Furthermore, assistance in these languages must be provided at the lottery. Please indicate whether you have the capacity to provide this service.

##### *Your Strategy for Providing Language Access:*

|  |
| --- |
|  |

**VI. Application/Selection Process and Timeline**

Please complete the following timeline as part of your Marketing Plan. Add info as needed.

Timeline of Entire Process

|  |  |
| --- | --- |
| **Task Name** | **Date** |
| Submittal of Marketing Plan to MOHCD |  |
| Marketing period (14 days) |  |
| Application Deadline |  |
| Enter Paper Applications and Review Flags Deadline | *1 week after application deadline* |
| Email Applicants if Removed from Lottery | *2 weeks after application deadline* |
| Lottery | *3 weeks after application deadline* |
| Lottery Results Posted | *1 week after lottery* |
| Application Review / Approval Process - start date |  |

**VII. Review of Program Documents**

We certify that we and all agents involved in the process of renting affordable units have read and reviewed the following documents:

* MOHCD Housing Preferences and Lottery Procedures Manual: <http://sfmohcd.org/sites/default/files/Preferences%20Manual%20-%20%203.31.2017.pdf>
* City and County of San Francisco Fair Chance Ordinance (FCO): <http://sfgsa.org/index.aspx?page=6599>

I have included the following documents with my request: (Please check)

 Marketing Flyer

 Marketing Outreach list

 A copy of Building’s Lease Agreement, including any and all addendums

 A copy of Building’s Acceptance Letter

 A copy of Building’s Denial Letter

 A copy of Building’s Landlord Verification

 A copy of Resident Selection Criteria

 A copy of Building’s Post-Lottery Rental Application

 A copy of Building’s Waitlist, with last contact dates for each applicant

Representative (sign) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Representative (print) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Title (print) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Company (print) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date (print) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Flyer Template**

Name of Property

**Affordable Homes for Rent in San Francisco**

|  |  |
| --- | --- |
| Exterior Photo | Interior Photo |

**Applications and more information available on**

**DAHLIA San Francisco Housing Portal http://housing.sfgov.org**

**Applications deadline**

**April 10, 2017**

**FEATURES AND AMENITIES**

* New Units with Modern Design
* Dishwasher
* Laundry facility
* Fitness Center
* Outdoor courtyard
* Close proximity to shopping

Reasonable accommodations will be made available for persons who make a request.

INCOME QUALIFICATIONS & RENTS

(**3) Two-bedroom units for $\_\_\_\_ /month**

Households must earn no more than the income levels listed below:

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Household Size | One Person | Two Person | Three Person | Four Person | Five Person |
| 55% of Median Income | $ | $ | $ | $ | $ |

Monthly Income must be at least two times the monthly rent

Preferences will be given in the following order:

(1) Households in which one member holds a Certificate of Preference (COP) from the former San Francisco Redevelopment Agency will be given highest preference in the lottery ranking process.

(2) Households in which one member holds a Displaced Tenant Housing Preference (DTHP) Certificate will be given the second highest preference in the lottery ranking process.

(3) Households that submit acceptable documentation that at least one member lives or works in San Francisco will be given the third highest preference in the lottery ranking process.

For further information or confirmation of preference, please call Mayor’s Office of Housing and Community Development Certificate Hotline: 415-701-5613.

Applicants in each preference category must meet program requirements in order to enter into a lease agreement.