King County

Guidelines

FOR THE

Consolidated Homeless Grant

Effective April 22, 2022
6.3.1 Data Quality .................................................................................................................. 29
6.3.2 Consent for Entry of Personally Identifying Information ........................................... 30
6.4 Ensure Habitability ........................................................................................................... 31
6.4.1 Ensure Habitability ....................................................................................................... 31
6.4.2 Allowable Methods for Unit Habitability Determination ............................................. 31
6.4.3 Habitability Complaint Procedure ............................................................................... 31
6.5 Lead Based Paint Assessment .......................................................................................... 31
6.5.1 For Rent Assistance ..................................................................................................... 32
6.5.2 For Facilities ................................................................................................................ 32
6.5.3 Exceptions to the Lead-Based Paint Visual Assessment Requirement ......................... 32
6.6 PSH CHF Referral to Foundational Community Supports (FCS) .................................... 32
6.7 Additional Requirements of all Subgrantees .................................................................. 32
6.7.1 Client File Check List and Required Forms ................................................................. 32
6.7.2 Informed Consent to Review Information in the Benefits Verification System .......... 34
6.7.3 Personal Identifying Information ................................................................................ 34
6.7.4 Required Policies and Procedures ............................................................................... 34
6.7.5 Records Maintenance and Destruction ....................................................................... 35
6.7.6 Prohibitions ............................................................................................................... 35
6.7.7 Nondiscrimination ..................................................................................................... 35
6.7.8 Training ....................................................................................................................... 36
7 Additional Requirements for Rapid Re-Housing and Targeted Prevention Programs ........ 37
7.1 Seattle-King County Rapid Re-Housing Program Model .................................................. 37
7.2 Interested Landlord List ................................................................................................... 37
7.3 Outreach to Landlords .................................................................................................... 37
7.4 Washington Residential Landlord-Tenant Act ............................................................... 37
7.5 Rental Agreements .......................................................................................................... 37
7.5.1 Rental Subsidy Agreement .......................................................................................... 37
7.5.2 Lease .......................................................................................................................... 38
7.5.3 Certification of Payment Obligation ............................................................................. 38
7.6 Targeted Prevention ........................................................................................................ 39
7.7 Rent Limits by Zip Code and Unit Size ........................................................................... 39
7.8 Determining Rent Subsidy Procedure ........................................................................... 39

7.8.1 Rental Assistance Hardship Request ......................................................................... 39

8 Washington State’s Landlord Mitigation Law ................................................................ 41

9 Appendices ...................................................................................................................... 41

9.1 Appendix A: Client File Checklist and Required Documentation ................................. 42

9.2 Appendix B: Housing Status Documentation Requirements ......................................... 45

9.3 Appendix C: Income Eligibility Documentation Requirements ..................................... 47

9.4 Appendix D: Lead Based Paint Visual Assessment Requirements ............................... 50

9.5 Appendix E: Rent Limits by Zip Code and Unit Size ..................................................... 52

9.6 Appendix F: Landlord Documentation Requirements .................................................. 56

9.7 Appendix G: Access to the DSHS Benefits Verification System Data Security Requirements........ 58

9.8 Appendix H: Access to the DSHS HEN Referral List Data Security Requirements .............. 63

9.9 Appendix I. Overview of HEN Eligibility at Enrollment and Recertification ................ 72

9.10 Appendix J: Disability and/or Length of Time Homeless Documentation Requirements .......... 73
1 Grant Basics

1.1 Overview

The Consolidated Homeless Grant (CHG) provides resources to assist people who are experiencing homelessness obtain and maintain housing stability. Consolidated Homeless Grant Funds are awarded to King County by the State of Washington Department of Commerce. King County and the King County Regional Homeless Authority (KCRHA) each have contracts with subgrantee agencies that reference the King County CHG Guidelines. References in these guidelines to “your funder” refers to the funding entity that holds your contract.

1.2 Authorizing Statute

Chapter RCW 43.185c Homeless Housing and Assistance authorizes these funds.

2 Administrative Requirements

2.1 Changes to Guidelines

King County may revise the Guidelines at any time. All subgrantees will be sent notice of changes to the guidelines. Subgrantees are responsible for implementing revisions in a timely manner.

These guidelines and forms referenced herein are posted on the King County website at www.kingcounty.gov/csdcontracts (under the heading “Homeless and Housing Programs”)

2.2 Monitoring

The King County Regional Homelessness Authority (KCHRA) will monitor subgrantees’ CHG grant activities. Subgrantees will be given a minimum of 14 days’ notice unless there are special circumstances that require immediate attention. The notice will specify the monitoring components.

2.3 Budget Revisions

Budget Revision Requests must be submitted in writing and approved by KCRHA.

An amendment is required when revisions (in one or cumulative transfers) reach more than 10 percent of the grant total.
### 2.4 Training

Subgrantee staff that provide direct services and supervise staff who provide direct services and manage homeless grants should receive training and demonstrate competency in, at a minimum:

- ✓ Local coordinated entry policies and procedures
- ✓ Fair Housing
- ✓ Trauma Informed Services
- ✓ Mental Health First Aid
- ✓ Harm Reduction
- ✓ Supporting victims of domestic violence

In addition, subgrantee staff are highly encouraged to attend the annual [Washington Statue Conference on Ending Homelessness](#).

Costs to attend trainings are an eligible program expense (see Section 5.2 Program Costs)

### 2.5 Ineligible Use of Funds

Subgrantees must inform KCRHA if contracted funds are spent on ineligible households or expenses. Reasonable attempts must be made to prevent fraud and ensure allowable use of funds.

### 3 Allowable Interventions

#### 3.1 Temporary Housing Interventions for Homeless Households

Temporary housing interventions are those in which the household must leave the shelter or unit at the end of their program participation. Households are considered homeless while enrolled in temporary housing interventions.

##### 3.1.1 Emergency Shelter

Emergency shelter is defined as temporary shelter from the elements and unsafe streets for homeless households. Shelter programs are either fixed capacity (facility-based) or flexible capacity (for example, hotel/motel vouchers). Emergency shelters typically address the basic health, food, clothing and personal hygiene needs of the households that they serve and provide information and referrals about supportive services and housing. Emergency Shelters are indoors and range from mats on the floor in a common space to beds in individual units. Some shelters are overnight only, while others operate 24/7. Where shelters are 24/7 and have navigation and/or case
management services (often called “enhanced shelter”) services emphasize housing attainment through housing-focused assessment and housing stability planning, which includes working with households to identify and refer to other resources in the community to support on-going household and housing stability.

### 3.1.1.1 Overnight Only Shelter
Overnight Only Shelter is a facility-based, night-by-night living arrangement that allows clients to enter and exit on an irregular or daily basis. This does not include day-only shelters.

### 3.1.1.2 Continuous-stay Shelter
Continuous-stay Shelter includes facility-based housing or hotel/motel vouchers where households have a room or bed assigned to them throughout the duration of their stay. Services emphasize housing attainment through housing-focused assessment and housing stability planning, which includes working with households to identify and refer to other resources in the community to support on-going household and housing stability.

### 3.1.2 Transitional Housing
Transitional Housing is a time-limited intervention intended to provide assistance to households who need more intensive or deeper levels of support services to attain permanent housing. Emphasis is still placed on rapid exit to permanent housing, but lengths of stay are flexible and tailored to the unique needs of each household. Services continue to emphasize housing attainment through a housing-focused assessment and housing stability planning, which includes working with each household to identify and refer households to other resources in the community to support on-going household and housing stability. All services are person-centered and tailored to the individual needs of each household. Transitional housing comes in a variety of facility-types, from congregate-style living to scattered site apartments.

Lease or rental agreements are required between the transitional housing project and the household.

### 3.2 Permanent Housing Interventions for Homeless Households
Permanent housing is housing in which the household may stay as long as they meet the basic obligations of tenancy.
3.2.1 Rapid Re-Housing

Rapid Re-Housing (RRH) is a low-barrier, time-limited intervention connecting households experiencing homelessness to permanent housing through a tailored package of assistance. RRH includes three core components:

- **Housing Identification**: Recruit landlords to provide housing for RRH participants and assist households with securing housing.
- **Financial Assistance**: Provide assistance to cover move-in costs and deposits as well as ongoing rent and/or utility payments; and
- **Housing-Focused Case Management Services and Supports**: Provide services and connections to community resources that help households maintain housing stability.

Housing-focused case management is provided, with an emphasis on immediate efforts to obtain housing, utilizing the minimum assistance needed to resolve each household’s immediate housing crisis.

Once a household moves into permanent housing (tenant holds the lease), rental assistance may be provided, utilizing a progressive engagement approach to provide the appropriate level of assistance, starting with the least amount necessary to stabilize housing.

Frequent re-assessment will be used to establish continued eligibility and amount of continued rental subsidy. The services are time-limited, and the household does not have to leave the housing when services end.

RRH staff work with each household to identify and access supports including family and friend networks and refer households to other resources in the community (mainstream services, benefit services, food assistance programs, childcare resources, etc.) to support on-going household and housing stability.

For further guidance on Rapid Re-Housing in King County, refer to the “Rapid Re-Housing Model for Homeless Families in King County” found at [www.kingcounty.gov/csdcontracts](http://www.kingcounty.gov/csdcontracts).

3.2.2 Permanent Supportive Housing

Permanent Supportive Housing (PSH) is subsidized, non-time limited affordable housing for a household that is homeless on entry, and has a condition or disability, such as mental illness, substance abuse, chronic health issues, or other conditions that create multiple and serious ongoing barriers to housing stability. Permanent Supportive Housing may be facility-based or scattered-site.
• Households need a long-term high level of services in order to meet the obligations of tenancy and maintain their housing.
• Tenant holds a rental agreement or lease and may continue tenancy as long as rent is paid, and the tenant complies with the rental agreement or lease.
• Tenants have access to a flexible array of comprehensive services, mostly on site, such as medical and wellness, mental health, substance abuse, vocational/employment, and life skills.
• Services are available and encouraged but are not to be required as a condition of tenancy.
• There is ongoing communication and coordination between supportive service providers, property owners or managers, and/or housing subsidy programs.

3.2.3 Permanent Supportive Housing for Chronically Homeless

Permanent Supportive Housing for Chronically Homeless is PSH (as defined in paragraph 3.2.2 above) that serves individuals or households with an adult head of household that meet the definition of chronically homeless from 24 CFR 578.3, as follows:

(i) A homeless individual with a disability, who:
(ii) Lives in a place not meant for human habitation, a safe haven, or in an emergency shelter; and
(iii) Has been homeless and living as described in paragraph (ii) of this definition continuously for at least 12 months or on at least 4 separate occasions in the last 3 years, as long as the combined occasions equal at least 12 months and each break in homelessness separating the occasions included at least 7 consecutive nights of not living as described in paragraph (ii). Stays in institutional care facilities for fewer than 90-days will not constitute as a break in homelessness, but rather such stays are included in the 12-month total, as long as the individual was living as described in paragraph (ii) immediately before entering the institutional care facility.

3.3 Permanent Housing Intervention for Households at Imminent Risk of Homelessness

Permanent housing is housing in which the household may stay as long as they meet the basic obligations of tenancy.

3.3.1 Targeted Prevention

Targeted Prevention resolves imminent homelessness with temporary rent subsidies and housing-focused stabilization services. The services are time-limited, not to exceed 90-days for most households, and the household does not have to leave when services end.
3.4 Services Only Interventions

3.4.1 Outreach

Street outreach is a strategy for engaging people experiencing homelessness who are otherwise not accessing community resources for the purpose of connecting them with emergency shelter, housing, or other critical services.

4 Household Eligibility

A household is one or more individuals seeking to obtain or maintain housing together. The entire household is considered for eligibility determination and services. A household does not include friends or family that are providing temporary housing.

Eligible households must meet both housing status and income requirements as detailed in the following sections.

<table>
<thead>
<tr>
<th>Intervention</th>
<th>Time Limit</th>
<th>Housing Status</th>
<th>Income Eligibility at Enrollment</th>
<th>Income Recertification (at 90 days, and every 90 days thereafter)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Flex Funding</td>
<td>No requirement</td>
<td>Homeless, Chronically Homeless, or at Imminent risk of homelessness</td>
<td>None</td>
<td>None</td>
</tr>
<tr>
<td>Overnight Only Shelter</td>
<td>No requirement</td>
<td>None</td>
<td>None</td>
<td>None</td>
</tr>
<tr>
<td>Continuous-stay Shelter</td>
<td>No requirement</td>
<td>None</td>
<td>None</td>
<td>At or below 30% AMI</td>
</tr>
<tr>
<td>Transitional Housing</td>
<td>Up to 24 months</td>
<td>Homeless</td>
<td>None</td>
<td>At or below 30% AMI</td>
</tr>
<tr>
<td>CHG Rapid Re-Housing</td>
<td>Up to 24 months</td>
<td>Homeless</td>
<td>None</td>
<td>At or below 30% AMI</td>
</tr>
</tbody>
</table>
4.1 Housing Status Eligibility

Housing status eligibility is based on where the household stayed on the night before program entry.

4.1.1 Homeless

Households are homeless if they lack a fixed, regular, and adequate nighttime residence, as defined below:

4.1.1.1 Unsheltered Homeless

✓ A household with a primary nighttime residence that is a public or private place not designed for, or ordinarily used as a regular sleeping accommodation for human beings, including a car, park, abandoned building, bus or train station, airport, or campground; or
✓ A household who is fleeing or is attempting to flee domestic violence, dating violence, sexual assault, stalking, human trafficking, or other dangerous or life-threatening conditions that relate to violence against the individual or a family
member, including a child, that has either taken place within the individual’s or family’s primary nighttime residence or has made the individual or family afraid to return to their primary nighttime residence; has no other residence; and lacks the resources or support networks, e.g. family, friends, and other faith-based or other social networks, to obtain other permanent housing; or

4.1.1.2 Sheltered Homeless

✓ A household living in a supervised publicly or privately operated shelter designated to provide temporary living arrangements (including congregate shelters, transitional housing, and hotels and motels paid for by charitable organizations or by federal, state or local government programs for low-income individuals); or
✓ One or more household members are exiting an institution where he or she resided for 90 days or less AND who resided in an emergency shelter or place not meant for human habitation immediately before entering that institution and have no available housing options after exiting that institution.

4.1.2 At Imminent Risk of Homelessness

Households are at imminent risk of homelessness if they will lose their primary nighttime residence within 14 days of the date of application for assistance, AND no subsequent residence has been identified, AND the household lacks the resources or support networks needed to obtain other permanent housing.

Households at imminent risk of homelessness are eligible only for targeted prevention services as described in paragraph 3.3.1 above.

4.2 Documentation of Housing Status

Subgrantees must verify and document eligible housing status prior to program entry.

Overnight only shelters are exempt from housing status documentation requirements.

Housing status documentation must be kept in the client file. Documentation must be dated within 30 days of program enrollment. See Appendix B: Housing Status Documentation Requirements.

4.3 Income Eligibility

The combined household income must not exceed 30 percent of area median income as defined by HUD. Income limits are based on Area Median Income (AMI) which can be located for each county at: www.huduser.gov (Data Sets, Income Limits).

HUD anticipates that the 2023 income limits will be published in April 2023 at
2022 Income Limits for King County

Effective April 18, 2022

<table>
<thead>
<tr>
<th>Household Size</th>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
<th>5</th>
<th>6</th>
<th>7</th>
<th>8</th>
</tr>
</thead>
<tbody>
<tr>
<td>Extremely Low (30%)</td>
<td>27,200</td>
<td>31,050</td>
<td>34,950</td>
<td>38,800</td>
<td>41,950</td>
<td>45,050</td>
<td>48,150</td>
<td>51,250</td>
</tr>
</tbody>
</table>

Income is money that is paid to, or on behalf of, any household member. Income includes the current gross income (annualized) of all adult (18 years and older) household members and unearned income attributable to a minor. Income eligibility determinations are based on the household’s income at the time of program entry. Annual income is the amount anticipated to be received during the 12-month period following the eligibility determination date.


**Gross Income** is the amount of income earned before any deductions (such as taxes and health insurance premiums) are made.

**Current Income** is the income that the household is currently receiving. Income recently terminated should not be included.

### Income Eligibility Exemptions

Income eligibility is never required for Overnight Only Shelter or for households receiving only flex funding including HEN Essential Needs.

The following are exempt from income eligibility requirements for the first 90 days of program participation:

- Households entering Continuous-stay Shelter
- Households entering a Transitional Housing program.
- Households entering a Rapid Re-Housing program.

In a rapid re-housing program, the 90-day period before income eligibility requirements are applied begins at move-in, when the rental subsidy begins.

**Assistance for HEN households:** In place of income verification, a HEN Referral from the Washington State Department of Social and Health Services (DSHS) as documented in the Benefits Verification System (BVS) is required.
### INCOME ELIGIBILITY REQUIREMENTS

<table>
<thead>
<tr>
<th>Temporary Housing Intervention</th>
<th>Enrollment</th>
<th>Recertification</th>
</tr>
</thead>
<tbody>
<tr>
<td>Overnight Only Shelter</td>
<td>None</td>
<td>None</td>
</tr>
<tr>
<td>Continuous-stay Shelter</td>
<td>None</td>
<td>At or below 30% AMI</td>
</tr>
<tr>
<td>Transitional Housing</td>
<td>None</td>
<td>At or below 30% AMI</td>
</tr>
<tr>
<td>Rapid Re-Housing</td>
<td>None</td>
<td>At or below 30% AMI</td>
</tr>
<tr>
<td>Targeted Prevention</td>
<td>At or below 30% AMI</td>
<td>At or below 30% AMI</td>
</tr>
<tr>
<td>HEN</td>
<td>DSHS HEN Referral</td>
<td>DSHS HEN Referral</td>
</tr>
<tr>
<td>Permanent Supportive Housing</td>
<td>At or below 30% AMI and a household member with a permanent disability</td>
<td>None</td>
</tr>
</tbody>
</table>

#### 4.4 Documentation of Income Eligibility

Subgrantees providing Targeted prevention, HEN or Permanent Supportive Housing must verify and document income eligibility prior to program entry. *See Appendix C: Income Eligibility Documentation Requirements.*

All allowable income documentation must be kept in the client file. Documentation dated within 30 days is acceptable.

Households that have no income are required to complete a Self-Declaration Form.

**Assistance for TANF households:** proof of TANF enrollment from DSHS is required and must be kept in the client file.

**Assistance for HEN households:** the HEN Referral or General Assistance enrollment (ABD recipient) from the Washington State Department of Social and Health Services (DSHS) as documented in the Benefits Verification System (BVS) is required and must be kept in the client file.

**Benefit Verification System Requirements**
Commerce maintains a data share agreement with the Department of Social and Health Services (DSHS) so CHG subgrantees can access the Benefits Verification System (BVS) to confirm Housing and Essential Needs program eligibility. BVS can also be used to confirm benefits and financial eligibility for homeless housing programs.

Subgrantees are strongly encouraged to access BVS directly through DSHS when possible. Requests for BVS through DSHS access can be made by contacting the DSHS Data Sharing Coordinator at ESADSA@DSHS.WA.GOV.

Subgrantees who are unable to access BVS directly through DSHS should contact KCRHA. When direct access is not possible KCRHA will manage BVS user access for subgrantees. Each subgrantee receiving BVS access through KCRHA must designate a BVS lead for their organization.

BVS leads are responsible for the following:

✓ Review User requests to confirm requesting agency is a sub grantee and staff have a business need to access BVS.
✓ Confirm that each User request includes a signed DSHS Non-Disclosure form.
✓ Retain all signed DSHS Non-Disclosure forms.
✓ Maintain an Excel spreadsheet identifying current and past BVS Users. Spreadsheet must be in format designated by Commerce.
✓ Report to Commerce within one business day when User no longer requires access to BVS.
✓ Provide access to DSHS Non-Disclosure forms and User spreadsheet for inspection within one business day of request by Commerce or DSHS.

BVS leads are also responsible for the following, annually:

✓ Require users to re-sign DSHS Non-Disclosure form
✓ Review BVS User spreadsheet for accuracy and notify Commerce of any changes

See Appendix G: Access to the DSHS Benefits Verification System Data Security Requirements for additional details.

### 4.4.1 Documentation of HEN Referrals

HEN Referral must be verified and documented prior to program entry.

**Assistance for HEN households:** the HEN Referral or General Assistance enrollment (ABD recipient) from the Washington State Department of Social and Health Services (DSHS) as documented in the Benefits Verification System (BVS) is required and must be kept in the client file.
For Pregnant Women Assistance (PWA) recipients with a HEN Referral, BVS will only display active PWA households. If a household is no longer on the program (e.g., birth of baby), BVS will no longer display an active status. Contact your Commerce CHG grant manager to help determine PWA status. The referral to HEN remains valid for 24 consecutive months.

4.4.2 Annualizing Wages and Periodic Payments

Calculate income based on hourly, weekly, or monthly payment information. Add the gross amount earned in each payment period that is documented and divide by the number of payment periods. This provides an average wage per payment period. Depending on pay periods used by the employer or the schedule of periodic payments, the following calculations convert the average wage into annual income:

- Hourly wage multiplied by hours worked per week multiplied by 52 weeks.
- Weekly wage multiplied by 52 weeks.
- Bi-weekly (every other week) wage multiplied by 26 bi-weekly periods.
- Semi-monthly wage (twice a month) multiplied by 24 semi-monthly periods.
- Monthly wage multiplied by 12 months.

4.5 Income Eligibility Recertification

Subgrantees must verify and document household income eligibility at least every three months from program entry. See: Appendix C: Income Eligibility Documentation Requirements.

Income recertification is not required for Overnight Only Shelters or Permanent Supportive Housing programs.

**Assistance for TANF households:** Recertification of TANF enrollment from DSHS is required at least every three months.

**Assistance for HEN households:** Recertification of the HEN Referral or General Assistance enrollment (ABD recipient) from DSHS as documented in the Benefits Verification System (BVS) is required at least every three months.

**Recertification is not required for HEN households who are a PWA recipient up to 24 months.**

4.5.1 Income Ineligible at Recertification

If households are determined income ineligible, they may remain in the program for an additional three months. Case management may continue for an additional six months after the determination of income ineligibility to support the household transition to self-sufficiency.
If the household is no longer eligible for the HEN program, the three additional months of rent assistance may not be charged to HEN but may be charged to CHG funding. (See Appendix I: Overview of HEN Eligibility at Enrollment and Recertification

Income recertification is not required for Permanent Supportive Housing programs.

4.6 Additional Eligibility Requirements for Permanent Supportive Housing

To be eligible for permanent supportive housing, a household must be homeless AND include at least one adult who has a disability that is expected to be long-continuing or of indefinite duration and substantially impedes the adult’s ability to live independently.

4.6.1 Eligibility for Permanent Supportive Housing for Chronically Homeless Families (PSH CHF)

To be eligible for PSH CHF funding:

✔ The head of household must meet homelessness and disability criteria identified in the definition of chronically homeless section 3.2.3

✔ The Household must meet income status of at or below 50% Area Median Income and have dependents. Dependent is defined as any household member who is not the head, co-head, or spouse, but is: under the age of 18 years; disabled (of any age); or a full-time student (of any age).

Disability includes: a physical, developmental, mental, or emotional impairment, including impairment caused by alcohol or drug abuse, post-traumatic stress disorder, or brain injury. A person will also be considered to have a disability if he or she has Acquired Immune Deficiency Syndrome (AIDS) or any conditions arising from the etiologic agent for 86 Acquired Immune Deficiency Syndrome, including infection with the Human Immunodeficiency Virus (HIV).

4.6.2 Documentation of a Disability

Subgrantees must verify and document the disability prior to program entry. Backup documentation must be kept in the client file. See Appendix J: Disability and/or Length of Time Homeless Documentation Requirements.

Acceptable documentation of the disability must include one the following:

✔ Written verification of the disability from a professional licensed by the state to diagnose and treat the disability and his or her certification that the disability is expected to be long continuing or of indefinite duration and substantially impedes the individual’s ability to live independently.

✔ Written verification from the Social Security Administration.

✔ Disability check receipt (Social Security Disability Insurance check or Veteran
If unable to document disability at program entry with the above methods, program staff must record observation of disability. Required documentation (above) must be obtained within 45 days of program enrollment.

### 4.6.3 Documentation of Chronic Homelessness

This requirement applies only for subgrantees whose contract or funding requires that they serve chronically homeless. These subgrantees must verify and document the length of time homeless prior to program entry. Backup documentation must be kept in the client file. See Appendix J: Disability and/or Length of Time Homeless Documentation Requirements.

Acceptable documentation of length of time homeless must include at least one the following (in order of priority):

- Written verification from a third party.
- Intake worker observations.
- Self-certification from the person seeking assistance.

Records contained in HMIS or comparable database used by victim service or legal service providers are acceptable evidence of third-party documentation and intake worker observation.

### 4.6.4 Maintaining Homeless Status for Permanent Housing

While receiving Rapid Re-Housing assistance, households maintain their homeless status for purposes of eligibility for other permanent housing placements.

### 4.7 Definition of Households with Minor Children

Households with minor children include:

- Persons who are pregnant or have one or more children under the age of 18.
- Homeless families whose only children are at or over the age of 18 and under the age of 21 may qualify for assistance if:
  - The adult children are living with the applicant household, and
  - They can provide proof that the adult children are enrolled in high school or equivalent.
- Pregnant or parenting youth under the age of 18 may qualify as independent families if they are legally emancipated or reside in DSHS licensed or approved facilities.
Partial custody: Households with partial custody of their only children for less than 51% of the time may only be enrolled upon written funder pre-authorization and must take partial custody into consideration when determining unit size.

Temporary absence: Children temporarily absent from the home may be counted as household members. A household whose only children are temporarily absent from the home may participate in the program when there is a documented likelihood that a child will be returned to their custody.

5 Allowable Expenses

5.1 Administration

Allowable administrative costs are those costs that benefit the organization as a whole and cannot be attributed specifically to a particular program. Administrative costs may include the same types of expenses that are listed in program operations (such as IT staff and office supplies), in the case that these costs are benefiting the agency as a whole and are not attributed to a particular program. Administrative costs may include, but are not limited to the following:

✓ Executive director salary and benefits.
✓ General organization insurance.
✓ Organization wide audits.
✓ Board expenses.
✓ Organization-wide membership fees and dues.
✓ Washington State Quality Award (WSQA) expenses.
✓ General agency facilities costs (including those associated with executive positions) such as rent, depreciation expenses and operations and maintenance.

All amounts billed to administration must be supported by actual costs. If actual costs exceed the budget, they may be charged in equal monthly amounts. These costs must be charged to grant cost centers by one of the following three methods:

✓ Billed directly such as IT services that are billed by the hour.
✓ Shared costs that are allocated directly by means of a cost allocation plan.
✓ Costs related to executive personnel such that a direct relationship between the cost and the benefit cannot be established, must be charged indirectly by use of
an indirect cost rate which has been appropriately negotiated with an approved cognizant agency or by use of the 10 percent de minimus rate.

### 5.2 Program Costs

Program costs are directly attributable to a particular program.

- ✓ Salaries and benefits for staff costs directly attributable to the program, including but not limited to program staff, information technology (IT) staff, human resources (HR) staff, bookkeeping staff, and accounting staff.
- ✓ Office space, utilities, supplies, phone, internet, and training related to grant management and/or service delivery conferences/travel and per diem
- ✓ Equipment up to $5,000 per two-year period, unless approved in advance by King County.
- ✓ Intake and Assessment.
- ✓ Housing Stability Services.
- ✓ Housing Search and Placement Services.
- ✓ Outreach services.
- ✓ Optional support services.
- ✓ Mediation and outreach to property owners (landlord incentives).
- ✓ Data collection and entry.
- ✓ General liability insurance and automobile insurance
- ✓ Other costs as approved in advance by King County

### 5.3 Facility Costs

#### 5.3.1 Lease Payments

- ✓ Lease or rent payment on a building used to provide temporary housing or permanent supportive housing.
- ✓ Hotel/Motel expenses for less than 90-days when no suitable shelter bed is available
- ✓ Move-in costs (security deposits, first and last month’s rent) for permanent housing

#### 5.3.2 Other Facility Costs

- ✓ Utilities
- ✓ Facility Maintenance supplies and services. Maintenance activities include: cleaning activities, protective or preventative measures to keep a building, its systems, and its grounds in working order; and replacement of existing appliances or objects that are not fixtures or part of the building.
✓ Security and janitorial services.
✓ Essential facility equipment and supplies
✓ Expendable transportation costs.
✓ On-site and off-site management costs related to the building.
✓ Facility specific insurance (mortgage insurance is not allowable) and accounting.
✓ Costs for securing permanent housing including: application fees, background check fees, credit check fees, utility deposits, and costs of urinalyses for drug testing of household members if necessary/required for housing.
✓ Other expenses as approved by King County.

### 5.3.3 Ineligible Expenses

☒ Replacement or operating reserves.
☒ Debt service.
☒ Construction or building rehabilitation. Rehabilitation includes those items that are done building-wide or affect a large portion of the property such as roof replacement, major repairs of building components, or improvements that add value to the building.
☒ CHG facility support in combination with CHG funded rent and rent/utility assistance.
☒ Mortgage payment for the facility.

### 5.3.4 HEN Facility Support

Lease payments and other facility support are allowable for HEN funding for transitional housing and permanent supportive housing. Emergency shelter is not allowable.

### 5.4 Rent

Rent Payments and Other Housing Costs must be paid directly to a third party on behalf of the household.

#### 5.4.1 Rent Payments

✓ Monthly rent and any combination of first and last months’ rent. Rent assistance

---

1 Non-HEN rent payments must have landlord documentation on file. Refer to Appendix F: Landlord Documentation Requirements.
is limited to 24 months per episode unless a rental assistance hardship request is granted by funder. Monthly rent is not time-limited for HEN households or households in a PSH program. Rent may only be paid one month at a time, although rental arrears, pro-rated rent, and last month’s may be included with the first month’s payment.

✓ Rental arrears for up to six months and associated late fees. Rental arrears may be paid if the payment enables the household to obtain or maintain permanent housing. If funds are used to pay rental arrears, arrears must be included in determining the total period of the household’s rental assistance. Rental arrears for HEN households can be paid for a time when the client was not HEN enrolled.

Note that rental arrears can be paid on behalf of a household receiving an ongoing subsidy from another public program (e.g., Section 8) because it represents a different time period and cost type than the rental subsidy.

✓ Lot rent for RV or manufactured home.
✓ Costs of parking spaces when connected to a unit.
✓ Utilities that are included in rent.
✓ Other fees that are included in rent, including washer/dryer fees and landlord administrative fees.
✓ Security deposits for households moving into new units. Any security deposit payments greater than two months’ rent must be pre-approved by King County and cannot be paid from federal funds.

✓ Landlord incentives, including reimbursements for damages paid to a landlord. (Provided there are written policies and/or procedures explaining what constitutes landlord incentives, how they are determined, and who has approval and review responsibilities).

✓ Hotel/Motel expenses when used as permanent housing or when used as Emergency Shelter for up to 90 days if no suitable shelter option is available.

### 5.4.2 Other Housing Costs

✓ Utility payments. (Electric, natural gas, phone, internet, water and sewer, garbage removal).
✓ Utility arrears for up to six months. Utility arrears may be paid if the payment enables the household to obtain or maintain permanent housing.
✓ Utility deposits for a household moving into a new unit.
✓ Application fees, background, credit check fees, and costs of urinalyses for drug testing of household members if necessary/required for rental housing.
✓ Other costs as approved by King County.

### 5.4.3 Special Circumstances

✓ **Master-Lease**: Security deposit and monthly rent is allowable when an organization master-leases a unit, and then sub-leases the property to CHG eligible households in the context of a Rapid Re-Housing or Permanent Supportive Housing program.

✓ **Temporary absence**: If a household must be temporarily away from the unit but is expected to return (such as temporary incarceration, hospitalization, or residential treatment), subgrantees may pay for the household’s rent for up to 60 days and charge the grant for eligible costs. While a household is temporarily absent, he or she may continue to receive case management. Any temporary absence must be documented in the client file.

✓ **Subsidized Housing**: CHG rent/utility assistance may be used for move-in costs (security deposits, last month’s rent) for subsidized housing (where household’s rent is adjusted based on income), including project- or tenant-based housing.\(^3\) CHG funds may also be used for rental arrears or utility arrears for subsidized housing.

### 5.4.4 Ineligible Expenses

☒ **First month or ongoing rent/utilities for subsidized housing.**

☒ **CHG rent and rent/utility assistance in combination with CHG-funded facility support.**

☒ **Cable or satellite TV deposits or services.**

☒ **Mortgage assistance or utility assistance for homeowners.**

☒ **Financial assistance to a program participant who is receiving the same type (as listed in the bullet points 5.4.1 and 5.4.2 above) of assistance through other public sources (either full or partial subsidy).**

---

\(^2\) Master Leasing is a model of affordable housing in which a nonprofit entity would contract with King County to fully lease (“master lease”) from a landlord or housing provider a block of affordable housing units for an extended period of time. The nonprofit would then manage the block of units, making the units available to tenants who may be otherwise ineligible or unable to compete for rental housing.

\(^3\) In this context tax credit units are not considered subsidized housing.
5.5 Other Direct Client Assistance

5.5.1 Flexible Funding

Flexible Funding is used for the provision of goods or payments of expenses that directly help a household to obtain or maintain permanent housing or meet essential household needs.

Essential household need means personal health and hygiene items, cleaning supplies, transportation passes and other personal need items. Essential household need items are available to all eligible households. Verification of housing status is not required for households with a HEN Referral. Essential needs distribution does not need to be documented in housing stability plans.

All eligible households are eligible for Flexible Funding up to $5,000 per household. Households receiving only Flexible Funding and not ongoing assistance are exempt from income eligibility requirements. Verification of housing status is required.

Payments must be noted in the household’s housing stability plan. Flexible Funding payments must be paid directly to a third party on behalf of the household. Flexible Funding is for items such as:

- Expenses necessary for obtaining/maintaining permanent housing (such as document fees, legal fees, fines accrued as a result of housing crisis, renters’ insurance, reasonable moving costs such as truck rental, furniture, bedding, kitchen items, and small appliances).
- Expenses associated with increasing income (such as work shoes or uniform required for employment, and licensing or certification costs required for employment, or hair cut for a job interview).
- Items necessary for life or safety to address an essential need (such as food, baby formula, diapers, child car seat, clothing, cleaning supplies, toiletries or food and care for a service animal).
- Vehicle costs (such as minor car repairs, registration tabs, car insurance and oil changes) when necessary for obtaining/maintaining permanent housing or maintain or increase income.
- Local transportation such as a transportation pass or Lyft/Uber rides when necessary to maintain or increase someone’s income (such as to a job or job interview) or achieve or maintain housing stability (such as to view potential housing options, fill out housing applications or to priority medical/health appointments).
- Costs of travel to permanent housing, when permanent housing has been identified.
✓ Other expenses as approved in advance by King County.

### 5.5.1.1 Ineligible Expenses

- Retailer or merchant gift cards, vouchers, or certificates that can be exchanged for cash or that allow the recipient to purchase alcohol or tobacco products.
- Payment of consumer debts.

### 6 Requirements of all Subgrantees

#### 6.1 Progressive Engagement

Subgrantees must employ a progressive engagement (PE) service model in both facility-based (Overnight Only and Continuous-stay Shelters, Transitional Housing) and rent assistance programs. PE includes the following requirements:

- Individualized services that are responsive to the needs of each household.
- Initial assessment and services address the immediate housing crisis with the minimal services needed.
- Frequent re-assessment determines the need for additional services.
- Supportive services are voluntary and build on the strengths and resources of each household, respecting their autonomy.
- Households must be exited to permanent housing as soon as possible.
- The ability to access assistance if a household faces homelessness again.

While providing targeted prevention or rapid re-housing assistance to a household; the subgrantee must require* the program participant to meet with a case manager not less than once per month to assist the household in ensuring long-term housing stability.

*The subgrantee is exempt from the requirement for monthly meetings if the household is fleeing domestic violence, or in cases where the subgrantee is prohibited by state or federal law from making its shelter or housing conditional on the participant’s acceptance of services.

#### 6.2 Assessment and Housing Stability Planning

Subgrantees must assess each household’s housing needs and facilitate planning with the goal of obtaining or maintaining housing stability. Housing stability planning must be housing-focused and client-driven. Assessments and housing stability planning must be documented.

Assessments and housing stability planning are not required for Targeted Prevention or for Overnight Drop in Shelters.
### 6.2.1 Housing Focused Case Management

Housing focused case management focuses on immediate efforts to address housing attainment, utilizing the minimum assistance needed to address each household’s immediate housing crisis. Staff works with each household to identify and refer households to other resources in the community (mainstream services, benefit services, food assistance programs, childcare resources, etc.) to support on-going housing stability. Services are generally light-touch, housing-focused and person-centered; but can be increased through progressive engagement if more services are necessary to help households stabilize in housing.

### 6.2.2 Housing Stability Plan

A Housing Stability Plan is an individualized housing and service plan that is housing-focused and client-driven. Housing stability plans are individualized based on housing needs as identified by each household and are used to facilitate housing-focused case management with the goal of obtaining or maintaining housing stability. Services should be voluntary and build on the strengths and resources of each household, respecting their autonomy.

### 6.2.3 Re-Assessment

For households in a rapid re-housing program, re-assessment must be done at least every three months from the beginning of the rental subsidy, or more frequently. The re-assessment must be used to establish continued eligibility and amount of continued subsidy based on the rental assistance model of the program. The re-assessment form must include at least these elements:

- Length of subsidy period to date
- Household income as a percentage of Area Median Income
- Rent to income ratio
- Whether there is adequate progress on housing stability and income goals
- Whether the head of household or primary wage earner has experienced a recent change in circumstances that is impacting their income or ability to work.
- Whether the household lacks sufficient resources and support networks necessary to retain housing without financial assistance.

### 6.3 HMIS

Subgrantees and all Emergency Shelter, Transitional Housing, Safe Haven, Homelessness Prevention or any Permanent Housing type program must enter accurate client data
into the Homeless Management Information System (HMIS) with the most current [HMIS Data Standards](#).

### 6.3.1 Data Quality

Projects are required to provide quality data to the best of their ability. Maintaining good data quality is important for effective program evaluation. Data quality has four elements. Completeness, timeliness, accuracy and consistency.

#### 6.3.1.1 Completeness

Completeness of data is measured by the percentage of incomplete fields in required data elements.

Agencies are expected to collect first name, last name, date of birth, race, and ethnicity from clients that give consent on the HMIS consent form. Agencies will never require a client to provide this information even if they have consented but should gather it to the best of their ability.

All clients, consenting and non-consenting, must have complete prior living situation and exit destination data.

#### 6.3.1.2 Timeliness

Data must be entered into HMIS for the complete month within five (5) business days following the end of each month.

#### 6.3.1.3 Accuracy

Data entered into HMIS must reflect the real situation of the client/household as closely as possible.

Accurate data is necessary to ensure any project reporting fairly represents the work of the project and each client’s story.

#### 6.3.1.4 Consistency

Consistent data helps ensure that any reporting generated by a project is understood. Data consistency is important for effectively communicating the processes and outcomes of a project.

All data will be collected, entered, and stored in accordance with the Agency Partner Agreement.

All data elements and responses will be entered per the [HUD data Standards Manual](#). To avoid inconsistency, agencies should use language on intake forms that closely matches the elements and responses in HMIS.
Clients who refuse consent must be made anonymous per HMIS consent refused client entry policy.

6.3.2 Consent for Entry of Personally Identifying Information

6.3.2.1 Identified Records

✓ Personally identifying information (PII) must not be entered into HMIS unless all adult household members have provided informed consent.
✓ Informed consent must be documented with a signed copy of the form “Client Release of Information and Informed Consent” in the client file. If electronic consent has been received, a copy does not need to be printed in the client file but must be available in HMIS. If telephonic consent has been received, complete the consent form the first time the household is seen in person. See: Agency Partner HMIS Agreement.

6.3.2.2 Anonymous Records

The following types of records must be entered anonymously:

✓ Households entering a domestic violence program or currently fleeing or in danger from a domestic violence, dating violence, sexual assault, human trafficking, stalking, or other life-threatening situation.
✓ Minors under the age of 13 with no parent or guardian available to consent to the minor’s information in HMIS.
✓ Households in which one or more adult household member does not provide informed consent for themselves or their dependents.
✓ Households in programs that are required by funders to report HIV/AIDS status.

6.3.2.3 Special Circumstances

If the reporting of the HIV/AIDS status of clients is not specifically required, the HIV/AIDS status must not be entered in HMIS.

If a combination of race, ethnicity, gender, or other demographic data could be identifying in your community, those data should not be entered for anonymous records.

6.3.2.4 Records Maintenance and Destruction

Paper records derived from HMIS, which contain personally identifying information, must be destroyed within seven years after the last day the household received services from the subgrantee.
6.4 Ensure Habitability

6.4.1 Ensure Habitability

Documented habitability is required for all housing units into which households will be moving, (except when a household moves into a hotel/motel; or in with friends or family unit and there are no federal funds in the subgrantee contract).

Housing units must be documented as habitable prior to paying the rent subsidy and information kept in the client file.

All facilities must conduct and document an inspection at least once a year using the HHS form or HQS form.

6.4.2 Allowable Methods for Unit Habitability Determination

Inspections: Programs may use either the CHG Housing Habitability Standards (HHS) form or the HUD Housing Quality Standards (HQS) form.

OR

If there are no federal funds in the subgrantee contract, a Rapid Re-Housing or Prevention program may choose to use the CHG Landlord Habitability Standards Certification Form in lieu of housing inspection. This form references the state Landlord Tenant Act (RCW 59.18.060) and requires the landlord (as defined in RCW 59.18.030) to certify that the unit meets the safety and habitability standards detailed in the law. The landlord’s failure to comply with the law may result in termination of the rent subsidy.

6.4.3 Habitability Complaint Procedure

Each household must be informed in writing of the habitability complaint process and assured that complaints regarding their housing unit’s safety and habitability will not affect the household’s program eligibility.

Subgrantee must have a written procedure describing the response to complaints regarding unit safety and habitability. This procedure must include:

✓ Mandatory inspection when a complaint is reported using the HHS form, HQS form, or documenting the specific complaint in an alternate format that includes follow-up and resolution.

6.5 Lead Based Paint Assessment

To prevent lead poisoning in young children, subgrantees must comply with the Lead-Based Paint Poisoning Prevention Act of 1973 and its applicable regulations found at 24 CFR 35, Parts A, B, M, and R.
A visual assessment must be conducted on an annual basis thereafter (as long as assistance is provided.) Visual assessments must be conducted by a HUD-Certified Visual Assessor and must be documented on the HQS or HHS and maintained in the client file.

For a guide to compliance see Appendix D: Lead Based Paint Visual Assessment Requirements.

### 6.5.1 For Rent Assistance

A lead-based paint visual assessment must be completed prior to providing rapid re-housing or prevention rent assistance if a child under the age of six or pregnant woman resides in a unit constructed prior to 1978.

### 6.5.2 For Facilities

All facilities constructed prior to 1978 must conduct an annual lead-based paint visual assessment which is documented on the HQS or HHS, and readily accessible for review.

### 6.5.3 Exceptions to the Lead-Based Paint Visual Assessment Requirement

Visual assessments are not required under the following circumstances:

- ✓ Zero-bedroom or SRO-sized units.
- ✓ X-ray or laboratory testing of all painted surfaces by certified personnel has been conducted in accordance with HUD regulations and the unit is officially certified to not contain lead-based paint.
- ✓ The property has had all lead-based paint identified and removed in accordance with HUD regulations.
- ✓ The unit has already undergone a visual assessment within the past 12 months – obtained documentation that a visual assessment has been conducted; or
- ✓ It meets any of the other exemptions described in 24 CFR Part 35.115(a).

If any of the exceptions outlined above are met, subgrantees must include the information in the client file.

### 6.6 PSH CHF Referral to Foundational Community Supports (FCS)

PSH CHF eligible households must be offered a referral to Foundational Community Supports (FCS). A provider directory can be found [here](#). Households are not required to participate in FCS services.

### 6.7 Additional Requirements of all Subgrantees

#### 6.7.1 Client File Check List and Required Forms

Programs must create a client file checklist to record the contents of each client file. All documentation listed in Appendix A King County CHG Client File Checklist and Required
Documentation for the type of service provided must be included on this checklist and in the client file (see Appendix A).

Overnight drop in shelters are not required have a client file checklist. HMIS informed consent forms and documentation of annual habitability inspection are required. (See sections 6.3.2, 6.4 and Appendix A).

### 6.7.1.1 Required Forms

King County provides the following forms, which are required in client files when applicable. See also Appendix A: Client File Checklist.

These forms are available at [www.kingcounty.gov/CSDContracts](http://www.kingcounty.gov/CSDContracts).

**All Programs:**

- ✓ Housing Habitability Standards (HHS) Inspection
  - (See section 6.4 Ensure Habitability)
- ✓ Income Eligibility Verification Form
  - (See Appendix A: Client File Checklist and Appendix C: Income Eligibility Documentation Requirements)
- ✓ DSHS Client Consent form for Benefits Verification System (BVS)
  - When BVS is used. (See 6.7.2; Appendix A: Client File Checklist; and Appendix G: Access to the DSHS Benefits Verification System)
- ✓ Self-Certification Form
  - For documentation of homelessness, income or length of time homeless. Use this form only when unable to obtain third-party verification.
- ✓ Third-Party Oral Verification Form
  - For documentation of homelessness, income or length of time homeless. Use this form only when unable to obtain written third-party verification.

**Prevention Programs:**

- ✓ Targeted Prevention Eligibility Screening
  - (See section 7.6 Targeted Prevention)
- ✓ No Subsequent Residence and Insufficient Resources Certification
  - (See Appendix B: Housing Status Documentation Requirements)
- ✓ Move-in Rent Limits Checklist (if moving into a new unit)
  - (See Appendix E: Rent Limits by Zip Code and Unit Size)
- ✓ Eviction Certification – Family or Friend
  - If applicable. (See Appendix B: Housing Status Documentation Requirements)
Rapid Re-Housing Programs:

✓ Subsidy Calculation Worksheet
  o (See 7.8 Determining Rent Subsidy Procedure)
✓ Re-Assessment Form
  o (See 7.8 Determining Rent Subsidy Procedure)
✓ Rental Assistance Hardship Request
  o (See 7.8.1.1 Rental Assistance Hardship Request)
✓ Rental Subsidy Agreement
  o Suggested. (See 7.5.1 Rental Subsidy Agreement)
✓ Payment Obligation Certification Family or Friend
  o (See 7.5.3 Certification of Payment Obligation)
✓ Roommate agreement
  o Suggested, as applicable.
✓ Landlord Habitability Standards Certification Form
  o (use only for units outside of King County and only very rarely)

6.7.2 Informed Consent to Review Information in the Benefits Verification System

Programs may review confidential information in the BVS only after all adult household members have provided informed consent as documented using the form DSHS 14-012(x)(REV 02/2003). See Appendix G: Access to the DSHS Benefits Verification System Data Security Requirements for more information.

6.7.3 Personal Identifying Information

Personal identifying information must never be sent electronically unless sent via a secure file transfer.

6.7.4 Required Policies and Procedures

✓ Habitability Complaint Procedure (section 6.4.3)
✓ Grievance Procedure (section 6.7.4.1)
✓ Termination and Denial of Service Policy (section 6.7.4.2)

6.7.4.1 Grievance Procedure

Programs must have a written grievance procedure for households seeking or receiving services which includes the household’s right to review decisions and present concerns to program staff not involved in the grievance.

This procedure must:

✓ Clearly describe how households can request a review or report concerns.
✓ Be accessible to all households seeking or receiving services.
6.7.4.2 Termination and Denial of Services Policy

Subgrantees must have a termination and denial policy.

This policy must:

 ✓ Describe the reasons a household would be denied services and/or terminated from program participation.
 ✓ Describe the notification process.
 ✓ Ensure households are made aware of the client grievance procedure.

6.7.5 Records Maintenance and Destruction

Subgrantees must maintain records relating to this grant for a period of six years following the date of final payment.

Paper records derived from HMIS which contain personally identifying information must be destroyed within seven years after the last day the household received services from the subgrantee.

6.7.6 Prohibitions

 ✓ Programs may not require clients to participate in a religious service as a condition of receiving program assistance.
 ✓ Programs must not terminate or deny services to households based on refusal to participate in supportive services. Supportive services are helping or educational resources that include support groups, mental health services, alcohol and substance abuse services, life skills or independent living services, vocation services and social activities. Supportive services do not include housing stability planning or case management.
 ✓ Programs may not deny housing or housing related services based on the household’s inability to pay. Fees for shelter are not permitted.
 ✓ If a program serves households with children, the age of a minor child cannot be used as a basis for denying any household’s admission to the program.
 ✓ If a program operates gender-segregated facilities, the program must allow the use of facilities consistent with the client’s gender expression or identity.

6.7.7 Nondiscrimination

Subgrantees must comply with all federal, state, and local nondiscrimination laws, regulations and policies.

Programs must comply with the Washington State Law Against Discrimination, RCW 49.60, as it now reads or as it may be amended. RCW 49.60 currently prohibits discrimination or unfair practices because of race, creed, color, national origin, families
with children, sex, marital status, sexual orientation, age, honorably discharged veteran or military status, or the presence of any sensory, mental, or physical disability or the use of a trained dog guide or service animal by a person with a disability.

Programs must comply with the Federal Fair Housing Act and its amendments as it now reads or as it may be amended. The Fair Housing Act currently prohibits discrimination because of race, color, national origin, religion, sex, disability or family status. The Fair Housing Act prohibits enforcing a neutral rule or policy that has a disproportionately adverse effect on a protected class.

Programs serving households with children must serve all family compositions. If a program operates gender-segregated facilities, the program must allow the use of facilities consistent with the client’s gender expression or identity.

Local nondiscrimination laws may include additional protected classes.

### 6.7.8 Training

Subgrantee staff that provide direct services and supervise staff who provide direct services should receive training and demonstrate competency in, at a minimum:

- ✓ Trauma Informed Services
- ✓ Mental Health First Aid
- ✓ Harm Reduction
- ✓ Supporting survivors of domestic violence
- ✓ Local coordinated entry policies and procedures
- ✓ Fair Housing
- ✓ Housing First
- ✓ Racial Equity
- ✓ LGBTQ+ competency
- ✓ Rapid Rehousing
- ✓ Progressive Engagement and Problem-Solving (Diversion)

Other recommended trainings include crisis intervention, professional boundaries, and case management.

In addition, subgrantee staff are highly encouraged to attend the annual Washington State Conference on Ending Homelessness. [https://www.wliha.org/conference](https://www.wliha.org/conference)

Costs to attend trainings are an eligible program expense (see Section 5.2 Program Costs).
7.1 Seattle-King County Rapid Re-Housing Program Model

Rapid Re-Housing programs must refer to and follow the Seattle King County Rapid Re-Housing Program Model.

7.2 Interested Landlord List

Programs must distribute information about interested landlords and rental properties to all households offered rent assistance.

7.3 Outreach to Landlords

Programs must conduct and document outreach to private rental housing landlords about opportunities to provide rental housing to people experiencing homelessness. This requirement may be met through partnerships with other service providers.

7.4 Washington Residential Landlord-Tenant Act

Programs must provide information on the Washington Residential Landlord Tenant Act (RCW 59.18) to households receiving rent assistance.

For more information on this law visit Washington Law Help, housing page, tenant rights at www.washingtonlawhelp.com.

7.5 Landlord Documentation

Client files must contain the following if rent assistance is paid on their behalf:

- Proof of ownership, which is typically a print-out from the county parcel viewer website. (See Appendix F: Landlord Documentation)
- Rental Subsidy Agreement between the subgrantee and landlord; and
- One of the following:
  - Lease; or
  - Certification of Payment Obligation (only allowed for HEN or if no federal funds in subgrantee contract); or
  - Intent to Rent form (only allowed if the rent assistance paid is move-in costs only).

7.5.1 Rental Subsidy Agreement

A Rental Subsidy Agreement, as described in this section, is a requirement for Rapid Re-Housing programs with ESG funding, and recommended as a best practice for all Rapid Re-Housing programs.
Rapid Re-Housing programs may make rental assistance payments only to an owner with whom the subgrantee has entered into a Rental Subsidy Agreement. The Rental Subsidy Agreement must set forth the terms under which rental assistance will be provided, including:

- Maximum length of subsidy period,
- Maximum amount or percentage of rental assistance that the household may receive,
- Maximum number of months that the household may receive rental assistance.
- Any requirements that the household share in the costs of the rent.

The Rental Subsidy Agreement must provide that, during the term of the agreement, the owner must give the subgrantee a copy of any notice to the household to vacate the housing unit, or any complaint used to commence an eviction action against the household.

The subgrantee must make timely payments to each owner in accordance with the Rental Subsidy Agreement. The Rental Subsidy Agreement must contain the same payment due date, grace period and late payment penalty requirements as the program participant’s lease. The subgrantee is solely responsible for paying late payment penalties that it incurs with its own funds.

### 7.5.2 Lease

At a minimum, the lease or rent agreement must be between the household and the landlord and must contain the following:

- Name of tenant
- Name of landlord
- Address of rental property
- Occupancy (who gets to live at the rental)
- Term of agreement (lease start and end date)
- Rent rate and date due
- Deposits (if any and what for/term)
- Signature of tenant/date
- Signature of landlord/date

### 7.5.3 Certification of Payment Obligation

For programs with no federal funding in their contract, a CHG Certification of Payment Obligation form can be used in lieu of a lease for rent subsidies paid to a friend or family member who is not in the business of property management. The CHG Certification of Payment Obligation form must be kept in the client file.
7.6 Targeted Prevention

Programs that provide prevention assistance must prioritize households most likely to become homeless, using the CHG Targeted Prevention Eligibility Screening form or equivalent. The CHG Targeted Prevention Eligibility Screening form must be kept in the client file.

7.7 Rent Limits by Zip Code and Unit Size

Programs must determine and document rent limits for all units for which CHG rental assistance (including arrears) is provided. This requirement applies when households move into new units or stay in the same unit; and must be completed before the subsidy is paid.

Programs must use the King County CHG Rent Limits Checklist and Certification form to document rent limits. This form must be retained in the client file.

Unit rents must not exceed the most current rent limit from the King County CHG Rent Limits by Zip Code and Unit Size. If electricity and heat are not included in the rent, then subtract the utility allowance (based on unit size) from the rent limit as described on the form.

Rent limits are adjusted annually based on HUD Fair Market Rent (FMR) for King County. Exceptions to rent limits must be documented in the client file together with “rent reasonableness” comparison of three comparable units in that zip code.

7.8 Determining Rent Subsidy Procedure

Programs must use the Seattle-King County Rapid Re-Housing Subsidy and Re-Assessment Calculation form for determining the amount of rent subsidy for each household, the length of assistance and if there will be any adjustments over time.

Complete this calculation at move-in and each 90 days after, until the end of rent subsidy. Rent subsidy should also be re-assessed whenever there is a change in household circumstance, income or need. Include a copy of the Calculation Form in household file, together with:

✓ Rapid Re-Housing 90-day Re-assessment Form
✓ Documentation of household income

7.8.1 Rental Assistance Hardship Request

Occasionally, situations come up that put an extra, unexpected financial burden on a household. When that happens, programs can use the Rental Assistance Hardship Request Form to request additional financial support from the program to help the
household remain stably housed.

A Rental Assistance Hardship Request form is required to document requests for additional financial support due to any of the following circumstances:

**No King County pre-authorization required:**

✓ Client has income but cannot afford to pay 60% of income towards rent (or 30% in month two).
✓ Client does not have income after 6 months of receiving 100% rental subsidy.
✓ Client cannot take over full rent after 12 months of rental subsidy.
✓ Client needs an additional month of partial subsidy after increasing income to 60% rent to income ratio.
✓ Payment of back rent, costs and/or fees arising from client not paying their share of rent on time.
✓ Move outside of King County; or
✓ Client has exited rental subsidy but needs emergency rental assistance during the two-month follow-up period.

**Requests that require written pre-authorization from funder:**

✓ Client needs to move to a new unit; (request for second payment of first/last & deposit).
✓ Client cannot take over full rent after 24 months of rental subsidy.
✓ 90+ days of rental subsidy outside of King County; or
✓ Rent arrears over the limit described by the funding contract.

**Put completed Hardship Request in household file; together with:**

✓ Rapid re-housing subsidy and re-assessment calculation form.
✓ Rapid re-Housing 90-day Re-Assessment form; and
✓ Any other supporting documentation.

**For second move in, client file documentation to also include:**

✓ Itemization of move-in cost amounts paid from first move-in and anticipated cost of second move-in.

**For move outside of King County, client file documentation to also include a detailed plan describing:**

✓ Plan for increasing income so that client can sustain the rent within 90 days of move-in.
✓ Plan for how case management and maintaining client contact will be addressed.
✓ Description of the support network at place moving to.
✓ Plan for how transportation and moving costs would be paid.
✓ Verification of unit habitability; and
✓ Copy of county parcel viewer report for the property, including owner’s name.

Submit copy of Tracking Sheet to funder with each invoice, to include:

✓ Date of request
✓ Client ID
✓ Type of hardship
✓ Dollar amounts requested

8 Washington State’s Landlord Mitigation Law

Washington State’s Landlord Mitigation Law (RCW 43.31.605) became effective on June 7, 2018, to provide landlords with an incentive and added security to work with tenants receiving rental assistance. The program offers up to $1,000 to the landlord in reimbursement for some potentially required move-in upgrades, up to fourteen days’ rent loss and up to $5,000 in qualifying damages caused by a tenant during tenancy. A move in/move out condition report is required for a landlord to receive reimbursement.

For more information, please visit https://commerce.wa.gov/landlordfund

9 Appendices
9.1 Appendix A: Client File Checklist and Required Documentation

The following chart summarizes the documentation required in each client file, depending on the type of service provided. Details and specific information for each requirement are explained in the indicated sections. Other documentation may be required based on individual circumstances. Forms indicated as “CHG” are specifically provided by King County and Subgrantee is required to use those forms as listed below. CHG forms may be modified if all content is included.

<table>
<thead>
<tr>
<th>Documentation (and relevant sections of King County CHG Guidelines)</th>
<th>When</th>
<th>Notes</th>
<th>Overnight Drop in Shelter</th>
<th>Continuous Stay Shelter</th>
<th>Transitional Housing (Facility)</th>
<th>Rapid Re-Housing (or Rent)</th>
<th>PSH</th>
<th>HEN Rent Assistance</th>
<th>CHG Prevention Rent Assistance</th>
<th>Section</th>
<th>Form Source</th>
</tr>
</thead>
<tbody>
<tr>
<td>Client File Checklist (6.7.1 and Appendix A)</td>
<td>Intake</td>
<td>Each program must develop their own checklist with all required elements as listed on this form.</td>
<td>x</td>
<td>x</td>
<td>x</td>
<td>X</td>
<td>x</td>
<td>x</td>
<td>x</td>
<td>6.7.1</td>
<td>use own form</td>
</tr>
<tr>
<td>HMIS Informed Consent Form (6.3.2)</td>
<td>Intake</td>
<td>Required if HMIS record contains personally identifying information. Not required for DV programs</td>
<td>x</td>
<td>x</td>
<td>x</td>
<td>X</td>
<td>x</td>
<td>x</td>
<td>x</td>
<td>6.3.2</td>
<td>HMIS</td>
</tr>
<tr>
<td>Documentation of Housing Status - Homeless (4.2; Appendix B)</td>
<td>Intake</td>
<td>Backup documentation as indicated in Appendix B.</td>
<td></td>
<td></td>
<td></td>
<td>X</td>
<td></td>
<td></td>
<td>(homeless)</td>
<td>4.2</td>
<td>Backup documents</td>
</tr>
<tr>
<td>Documentation of Housing Status - At-Risk of Homelessness (4.2, Appendix B) AND Documentation of “No Subsequent Residence and Insufficient Resources”</td>
<td>Intake</td>
<td>Including backup documentation as indicated in Appendix B)</td>
<td></td>
<td></td>
<td></td>
<td>X (at risk)</td>
<td></td>
<td></td>
<td>x</td>
<td>4.2</td>
<td>Backup documents</td>
</tr>
<tr>
<td>CHG Targeted Prevention Eligibility Screening (7.6)</td>
<td>Intake</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>x</td>
<td>7.6</td>
<td>CHG</td>
</tr>
<tr>
<td>Documentation of Income Eligibility (4.4, Appendix C)</td>
<td>Intake</td>
<td>Backup documentation as indicated in Appendix C.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>x</td>
<td></td>
<td>x</td>
<td>4.4</td>
<td>Backup documents</td>
</tr>
<tr>
<td>Documentation of Income Eligibility (4.4, Appendix C)</td>
<td>at each 90 days</td>
<td>Backup documentation as indicated in Appendix C.</td>
<td></td>
<td></td>
<td>x (if over 90 days)</td>
<td></td>
<td>x</td>
<td></td>
<td>x (if over 90 days)</td>
<td>4.4</td>
<td>Backup documents</td>
</tr>
<tr>
<td>Documentation (and relevant sections of King County CHG Guidelines)</td>
<td>When</td>
<td>Notes</td>
<td>Over-night Drop in Shelter</td>
<td>Contin-uous Stay Shelter</td>
<td>Transitio-nal Housing (Facility)</td>
<td>Rapid Re-Housing (or Rent)</td>
<td>PSH</td>
<td>HEN Rent Assis-tance</td>
<td>Preven-tion Rent Assis-tance</td>
<td>Section</td>
<td>Form Source</td>
</tr>
<tr>
<td>---</td>
<td>---</td>
<td>---</td>
<td>---</td>
<td>---</td>
<td>---</td>
<td>---</td>
<td>---</td>
<td>---</td>
<td>---</td>
<td>---</td>
<td>---</td>
</tr>
<tr>
<td>Copy of BVS search if used to document income (4.4)</td>
<td>Intake (if applicable)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>x</td>
<td>4.4</td>
</tr>
<tr>
<td>Copy of BVS search documenting HEN referral/eligibility</td>
<td>Intake (and every subsequent 90 days)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>x</td>
<td>Appendix I</td>
</tr>
<tr>
<td>BVS Client Consent Form (for BVS) (6.7.2)</td>
<td>If applicable</td>
<td>Required for any BVS/eJAS search to document income or as otherwise needed and appropriate.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>x</td>
<td>6.7.2</td>
</tr>
<tr>
<td>Documentation of Disability (and/or length of time homeless) and backup documentation as indicated (4.6.2 and Appendix J)</td>
<td>Intake</td>
<td>Document length of time homeless in addition to disability if required by your contract to serve chronically homeless (as described in Appendix J)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>x</td>
<td>4.6.2</td>
</tr>
<tr>
<td>Documentation of assessment and housing stability planning (6.2)</td>
<td>Intake (and ongoing)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>x</td>
<td>6.2</td>
</tr>
<tr>
<td>Income Recertification: Documentation of Income Eligibility(4.5 and Appendix C)</td>
<td>every subsequent 90 days</td>
<td>Obtain current backup documentation and confirm within 30% AMI.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>x</td>
<td>N/A</td>
</tr>
<tr>
<td>CHG Rent Limits Checklist and certification (7.7)</td>
<td>Beginning of rent subsidy</td>
<td>Includes Rent limits by Zip Code and Unit Size</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>x (if rent subsidy)</td>
<td></td>
<td>x</td>
<td>x</td>
<td>7.7</td>
</tr>
<tr>
<td>Rapid Re-Housing Subsidy Calculation Worksheet and RRH Re-Assessment Form. (household rent share/rent subsidy calculation) (7.7 and 7.8)</td>
<td>Beginning of rent subsidy (and every 90 days)</td>
<td>Includes Rent limits by Zip Code and Unit Size</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>x</td>
<td></td>
<td></td>
<td></td>
<td>7.7, 78</td>
</tr>
<tr>
<td>Documentation (and relevant sections of King County CHG Guidelines)</td>
<td>When</td>
<td>Notes</td>
<td>Over-night Drop in Shelter</td>
<td>Contin-uous Stay Shelter</td>
<td>Transi-tio-nal Housing (Facility)</td>
<td>Rapid Re-Housing (or Rent)</td>
<td>PSH</td>
<td>HEN Rent Assistance</td>
<td>Preven-tion Rent Assistance</td>
<td>Section</td>
<td>Form Source</td>
</tr>
<tr>
<td>---</td>
<td>---</td>
<td>---</td>
<td>---</td>
<td>---</td>
<td>---</td>
<td>---</td>
<td>---</td>
<td>---</td>
<td>---</td>
<td>---</td>
<td>---</td>
</tr>
<tr>
<td>Executed Lease (or rent agreement) (7.5.2) <strong>OR:</strong> (for HEN or if no federal funds) CHG Certification of Payment Obligation from Friend/Family (7.5.3)</td>
<td>At Move-in or beginning of rent subsidy</td>
<td>Lease required if rent assistance is paid to a landlord (or if there are federal funds in your contract)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Rental Subsidy Agreement (7.5.1)</td>
<td>Beginning of rent subsidy</td>
<td>An agreement between the subgrantee and the landlord.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>CHG HSS or HUD HQS Inspection Checklist, including Lead Based Paint Assessment (6.4) <strong>OR:</strong> (if no federal funds) CHG Landlord Habitability Standard Certification Form (6.4.2)</td>
<td>When moving into a new unit (or annually for facilities)</td>
<td>Inspection not required if moving in with family or friends (and no federal funds). Refer to guidelines re Lead Based Paint requirements.</td>
<td>Required annually. Does not have to be in client file.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Proof of ownership: Print-out from County parcel website (Appendix F)</td>
<td>beginning of rent subsidy</td>
<td>If rent assistance is paid to a landlord (see Appendix F)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
## Appendix B: Housing Status Documentation Requirements

<table>
<thead>
<tr>
<th>Situation</th>
<th>Required Documentation</th>
</tr>
</thead>
</table>
| Unsheltered (place not meant for human habitation)                        | - Third-party verification.  
  OR - Self declaration signed and dated by applicant stating where they are residing.  
      Self declaration should be used very rarely and only when written third-party verification cannot be obtained. |
| Residing in a temporary housing program (shelter, transitional or motel)  | - Letter signed and dated from the provider of the temporary housing.  
  OR - A telephone call to the provider of temporary housing that is documented, signed, and dated by the case manager making the call.  
  OR - Current HMIS record from homeless housing program, including dates of stay.  
  OR - Self declaration signed and dated by applicant stating where they are residing.  
      Self declaration should be used very rarely and only when written third-party verification cannot be obtained. |
| Exiting a system of care, resided 90 days or less, in shelter or unsheltered prior and no housing options | - Letter signed and dated by system of care representative. Letter must include: a statement verifying current stay of household member(s) and indicate household member(s) have no available housing option after exiting.  
  AND - Third-party, oral or self-certification of housing situation immediately prior to entering system of care or institution. |
| Fleeing domestic violence, sexual assault, stalking, etc.                  | - Signed and dated self declaration from individual (complete Self Declaration form). |
### Housing Status: At Imminent Risk of Homelessness

*(Applies to Prevention programs only)*

<table>
<thead>
<tr>
<th>Situation</th>
<th>Required Documentation in Client File</th>
</tr>
</thead>
</table>
| Losing housing within 14 days                  | - Letter signed and dated from the provider of the temporary residence (e.g., homeowner, landlord, motel owner/manager). Letter must include:  
  a. Statement verifying the applicant’s current living situation, and  
  b. Date when the household must vacate the temporary housing.  
  OR  
  - A telephone call to the provider of temporary housing that is documented, signed, and dated by the case manager making the call.  
  OR  
  - Certification of Payment Obligation/Potential Eviction for Friend/Family form.  
  OR  
  - Self-declaration signed and dated by applicant stating where they are residing.  
  Self-declaration of housing status should be used very rarely and only when written third-party verification cannot be obtained. |
| Nonpayment of rent or other lease violation    | - Pay or vacate notice or eviction notice.  
  AND  
  Copy of lease naming household member as lease holder or other written occupancy agreement identifying them as legal tenant of unit.  
  OR  
  - Certification of Payment Obligation/Potential Eviction for Friend/Family form. |
| Nonpayment of utilities (see program guidelines for eligibility) | - Completed Utility-Only Assistance form and required backup. |

**Also Required to document At Imminent Risk of Homelessness:**

- Documentation of no subsequent residence and insufficient resources/support networks
- Targeted Prevention Eligibility Screening
# Appendix C: Income Eligibility Documentation Requirements

The CHG Income Eligibility Verification Form and required backup documentation must be available for review upon request: All allowable income documentation must be kept in the client file. Documentation dated within 30 days is acceptable. Households that have no income are required to complete a Self-Declaration Form.

<table>
<thead>
<tr>
<th>Type of Income</th>
<th>Required Documentation in Client File</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>No Income</strong></td>
<td>BVS at entry – HEN ONLY.</td>
</tr>
<tr>
<td></td>
<td>OR</td>
</tr>
<tr>
<td></td>
<td>Self-declaration signed and dated by applicant (complete Self-Declaration form).</td>
</tr>
<tr>
<td></td>
<td><em>Self-declaration for HEN households at recertification can be obtained through telephone or email.</em></td>
</tr>
<tr>
<td><strong>Wages and Salary Income</strong></td>
<td>Copy of most recent pay stub(s).</td>
</tr>
<tr>
<td></td>
<td>OR</td>
</tr>
<tr>
<td></td>
<td>Dated mail, fax, or email verification from employer that includes name of employer, client name, pay amount and frequency, average hours worked per week, amount of any additional compensation.</td>
</tr>
<tr>
<td></td>
<td>OR</td>
</tr>
<tr>
<td></td>
<td>Oral verification from employer that includes name of employer, client name, pay amount and frequency, average hours worked per week, amount of any additional compensation (complete Third-Party Oral Verification form. Equivalent case notes may be substituted.).</td>
</tr>
<tr>
<td></td>
<td>OR</td>
</tr>
<tr>
<td></td>
<td>Self-declaration signed and dated by applicant that includes source of income, income amount, and frequency of income (complete Self-Declaration form). Case manager must document attempts to obtain written and oral verification.</td>
</tr>
<tr>
<td></td>
<td><em>Self-declaration for HEN households can be obtained through telephone or email.</em></td>
</tr>
<tr>
<td><strong>Self-Employment and Business Income</strong></td>
<td>Copy of most recent federal and state tax return.</td>
</tr>
<tr>
<td></td>
<td>OR</td>
</tr>
<tr>
<td></td>
<td>Self-declaration that includes source of income, income amount and frequency of income (complete Self-Declaration form). Case manager must document attempts to obtain written and oral verification.</td>
</tr>
<tr>
<td></td>
<td><em>Self-declaration for HEN households can be obtained through telephone or email.</em></td>
</tr>
<tr>
<td><strong>Interest and Dividend Income</strong></td>
<td>Copy of most recent interest or dividend income statement.</td>
</tr>
<tr>
<td></td>
<td>OR</td>
</tr>
<tr>
<td></td>
<td>Copy of most recent federal and state tax return.</td>
</tr>
<tr>
<td></td>
<td>OR</td>
</tr>
<tr>
<td></td>
<td>Self-declaration for HEN households can be obtained through telephone, email, or Self-Declaration form.</td>
</tr>
<tr>
<td><strong>Pension/Retirement Income</strong></td>
<td>Copy of most recent payment statement, benefit notice from Social Security, pension provider or other source.</td>
</tr>
<tr>
<td></td>
<td>OR</td>
</tr>
<tr>
<td></td>
<td>Dated mail, fax, or email verification from Social Security, pension provider, or other source that includes name of income</td>
</tr>
</tbody>
</table>
source and income amount.

**OR**

Oral verification from source that includes name of income source and income amount (complete Third-Party Oral Verification form. Equivalent case notes may be substituted.).

**OR**

Self-declaration for HEN households can be obtained through telephone, email, or Self-Declaration form.

<table>
<thead>
<tr>
<th>Unemployment and Disability Income</th>
<th>Copy of most recent payment statement or benefit notice.</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td><strong>OR</strong></td>
</tr>
<tr>
<td></td>
<td>Dated mail, fax, or email verification from unemployment administrator or workers compensation administrator of former employer that includes name of income source and income amount.</td>
</tr>
<tr>
<td></td>
<td><strong>OR</strong></td>
</tr>
<tr>
<td></td>
<td>Oral verification from source that includes name of income source and income amount (complete Third-Party Oral Verification form. Equivalent case notes may be substituted.).</td>
</tr>
<tr>
<td></td>
<td><strong>OR</strong></td>
</tr>
<tr>
<td></td>
<td>Self-declaration for HEN households can be obtained through telephone, email, or Self-Declaration form.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>TANF/ Public Assistance</th>
<th>Copy of most recent payment statement, benefit notice, or copy of search from Department of Social and Health Services (DSHS) Benefits Verification System (BVS).</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td><strong>OR</strong></td>
</tr>
<tr>
<td></td>
<td>Oral verification from source that includes name of income source and income amount (complete Third-Party Oral Verification form. Equivalent case notes may be substituted.).</td>
</tr>
<tr>
<td></td>
<td><strong>OR</strong></td>
</tr>
<tr>
<td></td>
<td>Self-declaration for HEN households can be obtained through telephone, email, or Self-Declaration form.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Alimony, Child Support, Foster Care Payments</th>
<th>Copy of most recent payment statement, notices, or orders.</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td><strong>OR</strong></td>
</tr>
<tr>
<td></td>
<td>Dated mail, fax, or email verification from child support enforcement agency, court liaison, or other source that includes name of income source and income amount.</td>
</tr>
<tr>
<td></td>
<td><strong>OR</strong></td>
</tr>
<tr>
<td></td>
<td>Oral verification from source that includes name of income source and income amount (complete Third-Party Oral Verification form).</td>
</tr>
<tr>
<td></td>
<td><strong>OR</strong></td>
</tr>
<tr>
<td></td>
<td>Self-declaration signed and dated by applicant that includes source of income, income amount, and frequency of income (complete Self-Declaration form). Case manager must document attempts to obtain written and oral verification.</td>
</tr>
<tr>
<td></td>
<td><strong>OR</strong></td>
</tr>
<tr>
<td></td>
<td>Self-declaration for HEN households can be obtained through telephone or email.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Armed Forces Income</th>
<th>Copy of pay stubs, payment statement, or other government issued statement indicating income amount.</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td><strong>OR</strong></td>
</tr>
<tr>
<td></td>
<td>Dated mail, fax, or email verification from child support enforcement agency, court liaison, or other source that includes</td>
</tr>
</tbody>
</table>

King County CHG Guidelines.  Effective April 22, 2022  Page | 48
| Student Financial Aid | name of income source and income amount.  
| | **OR**  
| | Oral verification from source that includes name of income source and income amount (complete Third-Party Oral Verification form).  
| | **OR:** Self-declaration for HEN households can be obtained through telephone, email, or Self-Declaration form.  
| | Copy of student financial assistance award letter or other educational institution issued statement indicating amounts.  
| | **OR**  
| | Dated mail, fax, or email verification from financial aid office or other source that includes name of income source and income amount.  
| | **OR**  
| | Oral verification from source that includes name of income source and income amount (complete Third-Party Oral Verification form).  
| | **OR:** Self-declaration for HEN households can be obtained through telephone, email, or Self-Declaration form. |
9.4 Appendix D: Lead Based Paint Visual Assessment Requirements

To prevent lead-poisoning in young children, Subgrantees must comply with the Lead-Based Paint Poisoning Prevention Act of 1973 and its applicable regulations found at 24 CFR 35, Parts A, B, M, and R.

Disclosure Requirements

For ALL properties constructed prior to 1978, landlords must provide tenants with:

✓ Disclosure form for rental properties disclosing the presence of known and unknown lead-based paint.

✓ A copy of the “Protect Your Family from Lead in the Home” pamphlet.

Both the disclosure form and pamphlet are available at: https://www.epa.gov/lead/real-estate-disclosure

It is recommended that rent assistance providers also share this information with their clients.

Determining the Age of the Unit

Subgrantees should use formal public records, such as tax assessment records, to establish the age of a unit. These records are typically maintained by the state or county and will include the year built or age of the property. To find online, search for your county name with one of the following phrases:

✓ “property tax records”

✓ “property tax database”

✓ “real property sales”

Print the screenshot for the case file. If not available online, the information is public and can be requested from the local authorities.

Conducting a Visual Assessment

Visual assessments are required when:

✓ The leased property was constructed before 1978.

   AND

✓ A child under the age of six will be living in the unit occupied by the household receiving CHG rent assistance.

A visual assessment must be conducted prior to providing CHG rent assistance to the unit and on an annual basis thereafter (as long as assistance is provided). Subgrantees may choose to have their program staff complete the visual assessments or they may procure services from a contractor. Visual assessments must be conducted by a HUD-Certified Visual Assessor. Anyone may become a HUD-Certified Visual Assessor by successfully completing a 20-minute
online training on HUD’s website at:

http://www.hud.gov/offices/lead/training/visualassessment/h00101.htm

If a visual assessment reveals problems with paint surfaces, Subgrantees cannot approve the unit for CHG assistance until the deteriorating paint has been repaired. Subgrantees may wait until the repairs are completed or work with the household to locate a different (lead-safe) unit.

**Locating a Certified Lead Professional and Further Training**

To locate a certified lead professional in your area:

✓ Call your state government (health department, lead poison prevention program, or housing authority).

✓ Call the National Lead Information Center at 1-800-424-LEAD (5323).

✓ Go to the US Environmental Protection Agency website at [https://www.epa.gov/lead](https://www.epa.gov/lead) and click on "Find a Lead-Safe Certified Firm."


For more information on the Federal training and certification program for lead professionals, contact the National Lead Information Center (NLIC) at [https://www.epa.gov/lead/forms/leadhotline-national-lead-information-center](https://www.epa.gov/lead/forms/leadhotline-national-lead-information-center) or 1-800-424-LEAD to speak with an information specialist.

The Lead Safe Housing Rule as well as a HUD training module can be accessed at [http://portal.hud.gov/hudportal/HUD?src=/program_offices/healthy_homes/enforcement/Ls hr](http://portal.hud.gov/hudportal/HUD?src=/program_offices/healthy_homes/enforcement/Ls hr)
### Appendix E: Rent Limits by Zip Code and Unit Size

#### Rent Limits by Zip Code — King County ESG and CHG:
Look for unit zip code below to determine the tier; then look at the bottom table for that unit size in that tier to find the rent limit for King County ESG or CHG funding for that unit.

<table>
<thead>
<tr>
<th>Zip</th>
<th>Area</th>
<th>Tier</th>
</tr>
</thead>
<tbody>
<tr>
<td>98001</td>
<td>Auburn</td>
<td>1</td>
</tr>
<tr>
<td>98002</td>
<td>Auburn</td>
<td>1</td>
</tr>
<tr>
<td>98003</td>
<td>Federal Way</td>
<td>1</td>
</tr>
<tr>
<td>98004</td>
<td>Bellevue</td>
<td>5</td>
</tr>
<tr>
<td>98005</td>
<td>Bellevue</td>
<td>5</td>
</tr>
<tr>
<td>98006</td>
<td>Bellevue</td>
<td>5</td>
</tr>
<tr>
<td>98007</td>
<td>Bellevue</td>
<td>5</td>
</tr>
<tr>
<td>98008</td>
<td>Bellevue</td>
<td>5</td>
</tr>
<tr>
<td>98009</td>
<td>Bellevue</td>
<td>5</td>
</tr>
<tr>
<td>98010</td>
<td>Black Diamond</td>
<td>1</td>
</tr>
<tr>
<td>98013</td>
<td>Burton</td>
<td>1</td>
</tr>
<tr>
<td>98014</td>
<td>Carnation</td>
<td>2</td>
</tr>
<tr>
<td>98015</td>
<td>Bellevue</td>
<td>5</td>
</tr>
<tr>
<td>98019</td>
<td>Duvall</td>
<td>2</td>
</tr>
<tr>
<td>98022</td>
<td>Enumclaw</td>
<td>1</td>
</tr>
<tr>
<td>98023</td>
<td>Federal Way</td>
<td>1</td>
</tr>
<tr>
<td>98024</td>
<td>Fall City</td>
<td>2</td>
</tr>
<tr>
<td>98025</td>
<td>Hobart</td>
<td>2</td>
</tr>
<tr>
<td>98027</td>
<td>Issaquah</td>
<td>4</td>
</tr>
<tr>
<td>98028</td>
<td>Kenmore</td>
<td>4</td>
</tr>
<tr>
<td>98029</td>
<td>Issaquah</td>
<td>4</td>
</tr>
<tr>
<td>98030</td>
<td>Kent</td>
<td>1</td>
</tr>
<tr>
<td>98042</td>
<td>Kent</td>
<td>1</td>
</tr>
<tr>
<td>98045</td>
<td>North Bend</td>
<td>2</td>
</tr>
<tr>
<td>98047</td>
<td>Pacific</td>
<td>1</td>
</tr>
<tr>
<td>98050</td>
<td>Preston</td>
<td>2</td>
</tr>
<tr>
<td>98051</td>
<td>Ravensdale</td>
<td>2</td>
</tr>
<tr>
<td>98052</td>
<td>Redmond</td>
<td>4</td>
</tr>
<tr>
<td>98053</td>
<td>Redmond</td>
<td>4</td>
</tr>
<tr>
<td>98055</td>
<td>Renton</td>
<td>3</td>
</tr>
<tr>
<td>98056</td>
<td>Renton</td>
<td>3</td>
</tr>
<tr>
<td>98057</td>
<td>Renton</td>
<td>3</td>
</tr>
<tr>
<td>98058</td>
<td>Renton</td>
<td>3</td>
</tr>
<tr>
<td>98059</td>
<td>Renton</td>
<td>3</td>
</tr>
<tr>
<td>98062</td>
<td>Seahurst</td>
<td>2</td>
</tr>
<tr>
<td>98063</td>
<td>Federal Way</td>
<td>1</td>
</tr>
<tr>
<td>98064</td>
<td>Kent</td>
<td>1</td>
</tr>
<tr>
<td>98065</td>
<td>Snoqualmie</td>
<td>4</td>
</tr>
<tr>
<td>98070</td>
<td>Vashon</td>
<td>1</td>
</tr>
<tr>
<td>98071</td>
<td>Auburn</td>
<td>1</td>
</tr>
<tr>
<td>98072</td>
<td>Woodinville</td>
<td>4</td>
</tr>
<tr>
<td>98073</td>
<td>Redmond</td>
<td>4</td>
</tr>
<tr>
<td>98074</td>
<td>Sammamish</td>
<td>4</td>
</tr>
<tr>
<td>98075</td>
<td>Sammamish</td>
<td>4</td>
</tr>
<tr>
<td>98077</td>
<td>Woodinville</td>
<td>4</td>
</tr>
<tr>
<td>98107</td>
<td>Ballard</td>
<td>5</td>
</tr>
<tr>
<td>98108</td>
<td>Beacon/Georgetown</td>
<td>5</td>
</tr>
<tr>
<td>98109</td>
<td>S. Lake Union</td>
<td>5</td>
</tr>
<tr>
<td>98110</td>
<td>Bainbridge</td>
<td>5</td>
</tr>
<tr>
<td>98112</td>
<td>Madison Park</td>
<td>5</td>
</tr>
<tr>
<td>98115</td>
<td>Wedgewood</td>
<td>5</td>
</tr>
<tr>
<td>98116</td>
<td>W. Seattle</td>
<td>5</td>
</tr>
<tr>
<td>98117</td>
<td>Crown Hill</td>
<td>5</td>
</tr>
<tr>
<td>98118</td>
<td>Columbia City</td>
<td>5</td>
</tr>
<tr>
<td>98119</td>
<td>Interbay</td>
<td>5</td>
</tr>
<tr>
<td>98121</td>
<td>Belltown</td>
<td>5</td>
</tr>
<tr>
<td>98122</td>
<td>East Union</td>
<td>5</td>
</tr>
<tr>
<td>98125</td>
<td>Northgate</td>
<td>5</td>
</tr>
<tr>
<td>98126</td>
<td>Westwood Village</td>
<td>5</td>
</tr>
<tr>
<td>98133</td>
<td>Shoreline/Bitter Lk</td>
<td>3</td>
</tr>
<tr>
<td>98134</td>
<td>University</td>
<td>5</td>
</tr>
<tr>
<td>98136</td>
<td>Westwood</td>
<td>5</td>
</tr>
<tr>
<td>98144</td>
<td>First Hill/Mt Baker</td>
<td>5</td>
</tr>
<tr>
<td>98146</td>
<td>White Center</td>
<td>2</td>
</tr>
<tr>
<td>98148</td>
<td>Normandy Park</td>
<td>2</td>
</tr>
<tr>
<td>98155</td>
<td>Shoreline</td>
<td>3</td>
</tr>
<tr>
<td>98164</td>
<td>Downtown</td>
<td>5</td>
</tr>
<tr>
<td>98166</td>
<td>Burien</td>
<td>2</td>
</tr>
<tr>
<td>Zip Code</td>
<td>City</td>
<td>Tier</td>
</tr>
<tr>
<td>---------</td>
<td>----------</td>
<td>------</td>
</tr>
<tr>
<td>98031</td>
<td>Kent</td>
<td>1</td>
</tr>
<tr>
<td>98032</td>
<td>Kent</td>
<td>1</td>
</tr>
<tr>
<td>98033</td>
<td>Kirkland</td>
<td>5</td>
</tr>
<tr>
<td>98034</td>
<td>Kirkland</td>
<td>5</td>
</tr>
<tr>
<td>98035</td>
<td>Kent</td>
<td>1</td>
</tr>
<tr>
<td>98038</td>
<td>Maple Valley</td>
<td>2</td>
</tr>
<tr>
<td>98039</td>
<td>Medina</td>
<td>5</td>
</tr>
<tr>
<td>98040</td>
<td>Mercer Island</td>
<td>5</td>
</tr>
<tr>
<td>98041</td>
<td>Bothell</td>
<td>4</td>
</tr>
</tbody>
</table>

**2022 Rent Limits by Tier and Fund Source**

<table>
<thead>
<tr>
<th>FUND</th>
<th>Basis</th>
<th>Tier</th>
<th>Studio</th>
<th>1 BR</th>
<th>2 BR</th>
<th>3 BR</th>
<th>4 BR</th>
<th>5 BR</th>
<th>6 BR</th>
</tr>
</thead>
<tbody>
<tr>
<td>ESG</td>
<td>FMR *.8</td>
<td>1</td>
<td>1,339</td>
<td>1,391</td>
<td>1,635</td>
<td>2,236</td>
<td>2,628</td>
<td>3,022</td>
<td>3,475</td>
</tr>
<tr>
<td>CHG</td>
<td>FMR</td>
<td>1</td>
<td>1,674</td>
<td>1,739</td>
<td>2,044</td>
<td>2,796</td>
<td>3,285</td>
<td>3,778</td>
<td>4,344</td>
</tr>
<tr>
<td>ESG</td>
<td>FMR *.85</td>
<td>2</td>
<td>1,423</td>
<td>1,478</td>
<td>1,737</td>
<td>2,377</td>
<td>2,792</td>
<td>3,211</td>
<td>3,692</td>
</tr>
<tr>
<td>CHG</td>
<td>FMR</td>
<td>2</td>
<td>1,674</td>
<td>1,739</td>
<td>2,044</td>
<td>2,796</td>
<td>3,285</td>
<td>3,778</td>
<td>4,344</td>
</tr>
<tr>
<td>ESG</td>
<td>FMR *.95</td>
<td>3</td>
<td>1,590</td>
<td>1,652</td>
<td>1,942</td>
<td>2,656</td>
<td>3,121</td>
<td>3,589</td>
<td>4,127</td>
</tr>
<tr>
<td>CHG</td>
<td>FMR</td>
<td>3</td>
<td>1,674</td>
<td>1,739</td>
<td>2,044</td>
<td>2,796</td>
<td>3,285</td>
<td>3,778</td>
<td>4,344</td>
</tr>
<tr>
<td>ESG</td>
<td>FMR</td>
<td>4</td>
<td>1,674</td>
<td>1,739</td>
<td>2,044</td>
<td>2,796</td>
<td>3,285</td>
<td>3,778</td>
<td>4,344</td>
</tr>
<tr>
<td>CHG</td>
<td>FMR</td>
<td>4</td>
<td>1,674</td>
<td>1,739</td>
<td>2,044</td>
<td>2,796</td>
<td>3,285</td>
<td>3,778</td>
<td>4,344</td>
</tr>
<tr>
<td>ESG</td>
<td>FMR</td>
<td>5</td>
<td>1,674</td>
<td>1,739</td>
<td>2,044</td>
<td>2,796</td>
<td>3,285</td>
<td>3,778</td>
<td>4,344</td>
</tr>
<tr>
<td>CHG</td>
<td>FMR *.12</td>
<td>5</td>
<td>2,009</td>
<td>2,087</td>
<td>2,453</td>
<td>3,355</td>
<td>3,942</td>
<td>4,534</td>
<td>5,213</td>
</tr>
</tbody>
</table>

**NOTES:** ESG rent limits are based on relative rents per Dupree-Scott apartment vacancy report September 2017, up to a maximum of HUD Fair Market Rent for Seattle-Bellevue. Above rents include electricity and heat. Limits for 4, 5 and 6 BR units are estimated 15% increase per BR.
## Rent Limits by Zip Code (Alternate Sort):

<table>
<thead>
<tr>
<th>Zip</th>
<th>Neighborhood</th>
<th>Tier</th>
</tr>
</thead>
<tbody>
<tr>
<td>98001</td>
<td>Auburn</td>
<td>1</td>
</tr>
<tr>
<td>98002</td>
<td>Auburn</td>
<td>1</td>
</tr>
<tr>
<td>98071</td>
<td>Auburn</td>
<td>1</td>
</tr>
<tr>
<td>98092</td>
<td>Auburn</td>
<td>1</td>
</tr>
<tr>
<td>98110</td>
<td>Bainbridge</td>
<td>5</td>
</tr>
<tr>
<td>98107</td>
<td>Ballard</td>
<td>5</td>
</tr>
<tr>
<td>98224</td>
<td>Baring</td>
<td>1</td>
</tr>
<tr>
<td>98108</td>
<td>Beacon Hill</td>
<td>5</td>
</tr>
<tr>
<td>98004</td>
<td>Bellevue</td>
<td>5</td>
</tr>
<tr>
<td>98005</td>
<td>Bellevue</td>
<td>5</td>
</tr>
<tr>
<td>98006</td>
<td>Bellevue</td>
<td>5</td>
</tr>
<tr>
<td>98007</td>
<td>Bellevue</td>
<td>5</td>
</tr>
<tr>
<td>98008</td>
<td>Bellevue</td>
<td>5</td>
</tr>
<tr>
<td>98009</td>
<td>Bellevue</td>
<td>5</td>
</tr>
<tr>
<td>98015</td>
<td>Bellevue</td>
<td>5</td>
</tr>
<tr>
<td>98121</td>
<td>Belltown</td>
<td>5</td>
</tr>
<tr>
<td>98133</td>
<td>Bitter Lake</td>
<td>3</td>
</tr>
<tr>
<td>98010</td>
<td>Black Diamond</td>
<td>1</td>
</tr>
<tr>
<td>98011</td>
<td>Bothell</td>
<td>4</td>
</tr>
<tr>
<td>98041</td>
<td>Bothell</td>
<td>4</td>
</tr>
<tr>
<td>98166</td>
<td>Burien</td>
<td>2</td>
</tr>
<tr>
<td>98146</td>
<td>Burien</td>
<td>2</td>
</tr>
<tr>
<td>98013</td>
<td>Burton</td>
<td>1</td>
</tr>
<tr>
<td>98102</td>
<td>Capitol Hill</td>
<td>5</td>
</tr>
<tr>
<td>98003</td>
<td>Federal Way</td>
<td>1</td>
</tr>
<tr>
<td>98023</td>
<td>Federal Way</td>
<td>1</td>
</tr>
<tr>
<td>98063</td>
<td>Federal Way</td>
<td>1</td>
</tr>
<tr>
<td>98093</td>
<td>Federal Way</td>
<td>1</td>
</tr>
<tr>
<td>98144</td>
<td>First Hill</td>
<td>5</td>
</tr>
<tr>
<td>98103</td>
<td>Fremont</td>
<td>5</td>
</tr>
<tr>
<td>98108</td>
<td>Georgetown</td>
<td>5</td>
</tr>
<tr>
<td>98251</td>
<td>Gold Bar</td>
<td>1</td>
</tr>
<tr>
<td>98103</td>
<td>Greenlake</td>
<td>5</td>
</tr>
<tr>
<td>98025</td>
<td>Hobart</td>
<td>2</td>
</tr>
<tr>
<td>98104</td>
<td>International Dist</td>
<td>5</td>
</tr>
<tr>
<td>98119</td>
<td>Interbay</td>
<td>5</td>
</tr>
<tr>
<td>98027</td>
<td>Issaquah</td>
<td>4</td>
</tr>
<tr>
<td>98029</td>
<td>Issaquah</td>
<td>4</td>
</tr>
<tr>
<td>98028</td>
<td>Kenmore</td>
<td>4</td>
</tr>
<tr>
<td>98030</td>
<td>Kent</td>
<td>1</td>
</tr>
<tr>
<td>98031</td>
<td>Kent</td>
<td>1</td>
</tr>
<tr>
<td>98032</td>
<td>Kent</td>
<td>1</td>
</tr>
<tr>
<td>98035</td>
<td>Kent</td>
<td>1</td>
</tr>
<tr>
<td>98042</td>
<td>Kent</td>
<td>1</td>
</tr>
<tr>
<td>98064</td>
<td>Kent</td>
<td>1</td>
</tr>
<tr>
<td>98089</td>
<td>Kent</td>
<td>1</td>
</tr>
<tr>
<td>98033</td>
<td>Kirkland</td>
<td>5</td>
</tr>
<tr>
<td>98034</td>
<td>Kirkland</td>
<td>5</td>
</tr>
<tr>
<td>98125</td>
<td>Northgate</td>
<td>5</td>
</tr>
<tr>
<td>98047</td>
<td>Pacific</td>
<td>1</td>
</tr>
<tr>
<td>98104</td>
<td>Pioneer Square</td>
<td>5</td>
</tr>
<tr>
<td>98050</td>
<td>Preston</td>
<td>2</td>
</tr>
<tr>
<td>98051</td>
<td>Ravensdale</td>
<td>2</td>
</tr>
<tr>
<td>98052</td>
<td>Redmond</td>
<td>4</td>
</tr>
<tr>
<td>98053</td>
<td>Redmond</td>
<td>4</td>
</tr>
<tr>
<td>98073</td>
<td>Redmond</td>
<td>4</td>
</tr>
<tr>
<td>98055</td>
<td>Renton</td>
<td>3</td>
</tr>
<tr>
<td>98056</td>
<td>Renton</td>
<td>3</td>
</tr>
<tr>
<td>98057</td>
<td>Renton</td>
<td>3</td>
</tr>
<tr>
<td>98058</td>
<td>Renton</td>
<td>3</td>
</tr>
<tr>
<td>98059</td>
<td>Renton</td>
<td>3</td>
</tr>
<tr>
<td>98177</td>
<td>Richmond Beach</td>
<td>3</td>
</tr>
<tr>
<td>98109</td>
<td>S. Lake Union</td>
<td>5</td>
</tr>
<tr>
<td>98074</td>
<td>Sammamish</td>
<td>4</td>
</tr>
<tr>
<td>98075</td>
<td>Sammamish</td>
<td>4</td>
</tr>
<tr>
<td>98062</td>
<td>Seahurst</td>
<td>2</td>
</tr>
<tr>
<td>98155</td>
<td>Shoreline</td>
<td>3</td>
</tr>
<tr>
<td>98133</td>
<td>Shoreline</td>
<td>3</td>
</tr>
<tr>
<td>98288</td>
<td>Skykomish</td>
<td>1</td>
</tr>
<tr>
<td>98178</td>
<td>Skyway</td>
<td>2</td>
</tr>
<tr>
<td>98065</td>
<td>Snoqualmie</td>
<td>4</td>
</tr>
<tr>
<td>98168</td>
<td>Tukwila</td>
<td>2</td>
</tr>
<tr>
<td>Zip Code</td>
<td>City</td>
<td>Area</td>
</tr>
<tr>
<td>----------</td>
<td>-------------</td>
<td>---------</td>
</tr>
<tr>
<td>98014</td>
<td>Carnation</td>
<td>2</td>
</tr>
<tr>
<td>98118</td>
<td>Columbia City</td>
<td>5</td>
</tr>
<tr>
<td>98117</td>
<td>Crown Hill</td>
<td>5</td>
</tr>
<tr>
<td>98106</td>
<td>Delridge</td>
<td>5</td>
</tr>
<tr>
<td>98198</td>
<td>Des Moines</td>
<td>1</td>
</tr>
<tr>
<td>98101</td>
<td>Downtown</td>
<td>5</td>
</tr>
<tr>
<td>98164</td>
<td>Downtown</td>
<td>5</td>
</tr>
<tr>
<td>98019</td>
<td>Duvall</td>
<td>2</td>
</tr>
<tr>
<td>98122</td>
<td>East Union</td>
<td>5</td>
</tr>
<tr>
<td>98022</td>
<td>Enumclaw</td>
<td>1</td>
</tr>
<tr>
<td>98024</td>
<td>Fall City</td>
<td>2</td>
</tr>
<tr>
<td>98083</td>
<td>Kirkland</td>
<td>5</td>
</tr>
<tr>
<td>98105</td>
<td>Laurelhurst</td>
<td>5</td>
</tr>
<tr>
<td>98112</td>
<td>Madison Park</td>
<td>5</td>
</tr>
<tr>
<td>98199</td>
<td>Magnolia</td>
<td>5</td>
</tr>
<tr>
<td>98038</td>
<td>Maple Valley</td>
<td>2</td>
</tr>
<tr>
<td>98039</td>
<td>Medina</td>
<td>5</td>
</tr>
<tr>
<td>98040</td>
<td>Mercer Island</td>
<td>5</td>
</tr>
<tr>
<td>98354</td>
<td>Milton</td>
<td>1</td>
</tr>
<tr>
<td>98144</td>
<td>Mt. Baker</td>
<td>5</td>
</tr>
<tr>
<td>98148</td>
<td>Normandy Park</td>
<td>2</td>
</tr>
<tr>
<td>98045</td>
<td>North Bend</td>
<td>2</td>
</tr>
<tr>
<td>98188</td>
<td>Tukwila</td>
<td>2</td>
</tr>
<tr>
<td>98105</td>
<td>U. District</td>
<td>5</td>
</tr>
<tr>
<td>98134</td>
<td>University</td>
<td>5</td>
</tr>
<tr>
<td>98070</td>
<td>Vashon</td>
<td>1</td>
</tr>
<tr>
<td>98116</td>
<td>W. Seattle</td>
<td>5</td>
</tr>
<tr>
<td>98115</td>
<td>Wedgewood</td>
<td>5</td>
</tr>
<tr>
<td>98136</td>
<td>Westwood</td>
<td>5</td>
</tr>
<tr>
<td>98126</td>
<td>Westwood Villge</td>
<td>5</td>
</tr>
<tr>
<td>98146</td>
<td>White Center</td>
<td>2</td>
</tr>
<tr>
<td>98072</td>
<td>Woodinville</td>
<td>4</td>
</tr>
<tr>
<td>98077</td>
<td>Woodinville</td>
<td>4</td>
</tr>
</tbody>
</table>
9.6 Appendix F: Landlord Documentation Requirements

Required for direct rent assistance. Hotels/motels are exempt from the documentation requirement.

Required documentation must be available for King County review upon request:

a. Copy of lease/rental agreement (for each household)

b. Proof of ownership; one of these items, listed in order of preference:
   i. Print-out of property report from County assessor website; or
   ii. CHG Landlord Certification Form completed by property owner or representative (for property outside of Washington State and only if no county assessor parcel viewer can be found on the Internet)

Documentation Procedure:

1. Obtain a copy of the lease or rental agreement. Including:
   - Payee
   - Client name (for rent assistance) or Agency name (for facility support)
   - Rental unit address
   - Amount of monthly rent

2. Note the rental unit address as listed on the lease/rental agreement.

3. Document the name of the property owner by printing the property report from the County Assessor’s web page.
   - Parcel viewers vary by county. Links to parcel viewers for other counties in Washington State can be found at: [http://www.research-wa.com/parcel-search.html](http://www.research-wa.com/parcel-search.html)
   - King County Assessor’s eRealProperty web page is found at this link, with descriptions below:
     [info.kingcounty.gov/Assessor/eRealProperty/](http://info.kingcounty.gov/Assessor/eRealProperty/)

   ![Property Report Example]

   - Note in the “Parcel” section of the property report the exact “Name” of the property owner. (In the example above, the property owner is King County Property Svcs)
   - Print page 1 of the property report for your files. (Right click and select “print”)

Q: What if the property address (from the lease) does not show up on the web search?

A: Sometimes the unit address does not match the parcel address in the County property records. This can happen, for instance, if there is a large apartment building or complex with multiple addresses.
**In that case:** First confirm the address on the Parcel viewer page. Then print the property report from the eRealProperty page:

- **Connect to the King County Parcel Viewer:** [http://gismaps.kingcounty.gov/parcelviewer2/](http://gismaps.kingcounty.gov/parcelviewer2/)
- **Click “Start Parcel Viewer”**
- **In the top left corner type in the property address (or partial address) and click “Search Results”**.
- **Click on the address from the results.**
- **Then click on the parcel highlighted in the map.**
- **This page will show the parcel number, the parcel address, and the taxpayer’s name. We can assume that the taxpayer’s name is the property owner.**

- **Scroll down to the very bottom of the parcel “info box”; click on “property report”; then print page 1 of the property report for your files:** (Note the “name” on the property report is the same as the “taxpayer name” on the parcel viewer. Either of those can be considered the name of the property owner.)
- **Write a note on the printed property report that “this parcel address was confirmed as a match for (property address on lease) by parcel viewer search on (date) by (your name)”**.

4. **Note from the property report the exact name of the property owner.** (Listed as “Name” on the property report)

![Parcel Viewer Screenshot](image)

5. **Determine property owner type as follows:**
   - **Individual owner:** Private Landlord
   - **Business owner:** Private Landlord
   - **Nonprofit owner:** Private Landlord
   - **Housing Authority:** Private Landlord
   - **Tribal government:** Government Landlord
   - **Government owner:** “Government owned parcels” are identified in the “Tax Roll History” section of the report: Government Landlord
9.7 Appendix G: Access to the DSHS Benefits Verification System Data Security Requirements

1. **Definitions.** The words and phrases listed below, as used in this Appendix, shall each have the following definitions:

   a. “Authorized User(s)” means an individual or individuals with an authorized business requirement to access DSHS Confidential Information.

   b. “Hardened Password” means a string of at least eight characters containing at least one alphabetic character, at least one number and at least one special character such as an asterisk, ampersand or exclamation point.

   c. “Unique User ID” means a string of characters that identifies a specific user and which, in conjunction with a password, passphrase or other mechanism, authenticates a user to an information system.

   d. “Contractor” means CHG Subgrantees.

2. **Data Transport.** When transporting DSHS Confidential Information electronically, including via email, the Data will be protected by:

   a. Transporting the Data within the (State Governmental Network) SGN or Contractor’s internal network, or.

   b. Encrypting any Data that will be in transit outside the SGN or Contractor’s internal network. This includes transit over the public Internet.

3. **Protection of Data.** The Contractor agrees to store Data on one or more of the following media and protect the Data as described:

   a. **Hard disk drives.** Data stored on local workstation hard disks. Access to the Data will be restricted to Authorized User(s) by requiring logon to the local workstation using a Unique User ID and Hardened Password or other authentication mechanisms which provide equal or greater security, such as biometrics or smart cards.

   b. **Network server disks.** Data stored on hard disks mounted on network servers and made available through shared folders. Access to the Data will be restricted to Authorized Users through the use of access control lists which will grant access only after the Authorized User has authenticated to the network using a Unique User ID and Hardened Password or other authentication mechanisms which provide equal or greater security, such as biometrics or smart cards. Data on disks mounted to such servers must be located in an area which is accessible only to authorized personnel, with access controlled through use of a key, card key, combination lock, or comparable mechanism.

   For DSHS Confidential Information stored on these disks, deleting unneeded Data is sufficient as long as the disks remain in a Secured Area and otherwise meet the requirements listed in the above paragraph. Destruction of the Data as outlined in Section 5. Data Disposition may be deferred until the disks are retired, replaced, or otherwise taken out of the Secured Area.
c. **Optical discs (CDs or DVDs) in local workstation optical disc drives.** Data provided by DSHS on optical discs which will be used in local workstation optical disc drives and which will not be transported out of a Secured Area. When not in use for the contracted purpose, such discs must be locked in a drawer, cabinet or other container to which only Authorized Users have the key, combination or mechanism required to access the contents of the container. Workstations which access DSHS Data on optical discs must be located in an area which is accessible only to authorized personnel, with access controlled through use of a key, card key, combination lock, or comparable mechanism.

d. **Optical discs (CDs or DVDs) in local workstation optical disc drives.** Data provided by DSHS on optical discs which will be attached to network servers and which will not be transported out of a Secured Area. Access to Data on these discs will be restricted to Authorized Users through the use of access control lists which will grant access only after the Authorized User has authenticated to the network using a Unique User ID and Hardened Password or other authentication mechanisms which provide equal or greater security, such as biometrics or smart cards. Data on discs attached to such servers must be located in an area which is accessible only to authorized personnel, with access controlled through use of a key, card key, combination lock, or comparable mechanism.

e. **Paper documents.** Any paper records must be protected by storing the records in a Secured Area which is only accessible to authorized personnel. When not in use, such records must be stored in a locked container, such as a file cabinet, locking drawer, or safe, to which only authorized persons have access.

f. **Remote Access.** Access to and use of the Data over the State Governmental Network (SGN) or Secure Access Washington (SAW) will be controlled by DSHS staff who will issue authentication credentials (e.g. a Unique User ID and Hardened Password) to Authorized Users on Contractor staff. Contractor will notify DSHS staff immediately whenever an Authorized User in possession of such credentials is terminated or otherwise leaves the employ of the Contractor, and whenever an Authorized User’s duties change such that the Authorized User no longer requires access to perform work for this Contract.

g. **Data storage on portable devices or media.**

(1) Except where otherwise specified herein, DSHS Data shall not be stored by the Contractor on portable devices or media unless specifically authorized within the terms and conditions of the Contract. If so authorized, the Data shall be given the following protections:

(a) Encrypt the Data with a key length of at least 128 bits

(b) Control access to devices with a Unique User ID and Hardened Password or stronger authentication method such as a physical token or biometrics.

(c) Manually lock devices whenever they are left unattended and set devices to lock automatically after a period of inactivity, if this feature is available. Maximum period of inactivity is 20 minutes.
Physically Secure the portable device(s) and/or media by

(d) Keeping them in locked storage when not in use

(e) Using check-in/check-out procedures when they are shared, and

(f) Taking frequent inventories

(2) When being transported outside of a Secured Area, portable devices and media with DSHS Confidential Information must be under the physical control of Contractor staff with authorization to access the Data.

(3) Portable devices include, but are not limited to; smart phones, tablets, flash memory devices (e.g. USB flash drives, personal media players), portable hard disks, and laptop/notebook/netbook computers if those computers may be transported outside of a Secured Area.

(4) Portable media includes, but is not limited to; optical media (e.g. CDs, DVDs), magnetic media (e.g. floppy disks, tape), or flash media (e.g. CompactFlash, SD, MMC).

h. Data stored for backup purposes.

(1) DSHS data may be stored on portable media as part of a Contractor’s existing, documented backup process for business continuity or disaster recovery purposes. Such storage is authorized until such time as that media would be reused during the course of normal backup operations. If backup media is retired while DSHS Confidential Information still exists upon it, such media will be destroyed at that time in accordance with the disposition requirements in Section 5. Data Disposition

(2) DSHS Data may be stored on non-portable media (e.g. Storage Area Network drives, virtual media, etc.) as part of a Contractor’s existing, documented backup process for business continuity or disaster recovery purposes. If so, such media will be protected as otherwise described in this exhibit. If this media is retired while DSHS Confidential Information still exists upon it, the data will be destroyed at that time in accordance with the disposition requirements in Section 5. Data Disposition.

4. Data Segregation.

a. DSHS Data must be segregated or otherwise distinguishable from non-DSHS data. This is to ensure that when no longer needed by the Contractor, all DSHS Data can be identified for return or destruction. It also aids in determining whether DSHS Data has or may have been compromised in the event of a security breach. As such, one or more of the following methods will be used for data segregation.

b. DSHS Data will be kept on media (e.g. hard disk, optical disc, tape, etc.) which will contain no non-DSHS data. And/or,

c. DSHS Data will be stored in a logical container on electronic media, such as a partition or folder dedicated to DSHS Data. And/or,

d. DSHS Data will be stored in a database which will contain no non-DSHS data. And/or,
e. DSHS Data will be stored within a database and will be distinguishable from non-DSHS data by the value of a specific field or fields within database records.

f. When stored as physical paper documents, DSHS Data will be physically segregated from non-DSHS data in a drawer, folder, or other container.

g. When it is not feasible or practical to segregate DSHS Data from non-DSHS data, then both the DSHS Data and the non-DSHS data with which it is commingled must be protected as described in this exhibit.

5. **Data Disposition.** When the contracted work has been completed or when no longer needed, except as noted in Section 3. Protection of Data b. Network Server Disks above, Data shall be returned to DSHS or destroyed. Media on which Data may be stored and associated acceptable methods of destruction are as follows:

<table>
<thead>
<tr>
<th>Data Stored On:</th>
<th>Will be Destroyed By:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Server or workstation hard disks, or</td>
<td>Using a “wipe” utility which will overwrite the Data at least three (3) times using either random or single character data, or</td>
</tr>
<tr>
<td>Removable media (e.g. floppies, USB flash drives, portable hard disks) excluding optical discs</td>
<td>Degaussing sufficiently to ensure that the Data cannot be reconstructed, or</td>
</tr>
<tr>
<td></td>
<td>Physically destroying the disk</td>
</tr>
<tr>
<td>Paper documents with sensitive or Confidential Information</td>
<td>Recycling through a contracted firm provided the contract with the recycler assures that the confidentiality of Data will be protected.</td>
</tr>
<tr>
<td>Paper documents containing Confidential Information requiring special handling (e.g. protected health information)</td>
<td>On-site shredding, pulping, or incineration</td>
</tr>
<tr>
<td>Optical discs (e.g. CDs or DVDs)</td>
<td>Incineration, shredding, or completely defacing the readable surface with a coarse abrasive</td>
</tr>
<tr>
<td>Magnetic tape</td>
<td>Degaussing, incinerating or crosscut shredding</td>
</tr>
</tbody>
</table>
6. **Notification of Compromise or Potential Compromise.** The compromise or potential compromise of DSHS shared Data must be reported to the Department of Commerce Contact designated in the Grant Agreement within one (1) business day of discovery.

7. **Data shared with Subcontractors.** If DSHS Data access provided under this Contract is to be shared with a subcontractor, the Contract with the subcontractor must include all of the data security provisions within this Contract and within any amendments, attachments, or exhibits within this Contract.
As required under RCW 43.185C 230 and RCW 74.62.030, the Lead/sub grantee may use the *HEN Referral List* information for the sole purpose of improving access to HEN assistance for individuals determined eligible for a referral to HEN.

Access to Data shall be limited to staff whose duties specifically require access to such Data in the performance of their assigned duties.

Prior to making Data available to its staff, the Data Recipient shall notify all such staff of the Use and Disclosure requirements.

All staff accessing the data must sign a *DSHS Nondisclosure of Confidential Information – Non Employee* form prior to accessing the Data.

The Lead/sub grantee shall maintain a list of such staff and their signed *DSHS Nondisclosure of Confidential Information – Non Employee* forms. These forms must be updated annually and submitted to Commerce upon request.

**Limitations on Use of Data:** If the Data and analyses generated by the Lead/sub grantee contain personal information about DSHS clients, then any and all reports utilizing these Data shall be subject to review and approval by Commerce prior to publication in any medium or presentation in any forum.

**1. Definitions.** The words and phrases listed below, as used in this Exhibit, shall each have the following definitions:


b. “Authorized User(s)” means an individual or individuals with a business need to access DSHS Confidential Information, and who has or have been authorized to do so.

c. “Business Associate Agreement” means an agreement between DSHS and a contractor who is receiving Data covered under the Privacy and Security Rules of the Health Insurance Portability and Accountability Act of 1996. The agreement establishes permitted and required uses and disclosures of protected health information (PHI) in accordance with HIPAA requirements and provides obligations for business associates to safeguard the information.

d. “Category 4 Data” is data that is confidential and requires special handling due to statutes or regulations that require especially strict protection of the data and from which especially serious consequences may arise in the event of any compromise of such data. Data classified as Category 4 includes but is not limited to data protected by: the Health Insurance Portability and Accountability Act (HIPAA), Pub. L. 104-191 as amended by the Health Information Technology for Economic and Clinical Health Act of 2009 (HITECH), 45 CFR Parts 160 and 164; the Family Educational Rights and Privacy Act (FERPA), 20 U.S.C. §1232g; 34 CFR Part 99; Internal Revenue Service Publication 1075 (https://www.irs.gov/pub/irs-pdf/p1075.pdf); Substance Abuse and Mental Health Services Administration regulations on Confidentiality of...
Alcohol and Drug Abuse Patient Records, 42 CFR Part 2; and/or Criminal Justice Information Services, 28 CFR Part 20.

e. “Cloud” means data storage on servers hosted by an entity other than the Contractor and on a network outside the control of the Contractor. Physical storage of data in the cloud typically spans multiple servers and often multiple locations. Cloud storage can be divided between consumer grade storage for personal files and enterprise grade for companies and governmental entities. Examples of consumer grade storage would include iTunes, Dropbox, Box.com, and many other entities. Enterprise cloud vendors include Microsoft Azure, Amazon Web Services, and Rackspace.

f. “Encrypt” means to encode Confidential Information into a format that can only be read by those possessing a “key”; a password, digital certificate or other mechanism available only to authorized users. Encryption must use a key length of at least 256 bits for symmetric keys, or 2048 bits for asymmetric keys. When a symmetric key is used, the Advanced Encryption Standard (AES) must be used if available.

g. “FedRAMP” means the Federal Risk and Authorization Management Program (see www.fedramp.gov), which is an assessment and authorization process that federal government agencies have been directed to use to ensure security is in place when accessing Cloud computing products and services.

h. “Hardened Password” means a string of at least eight characters containing at least three of the following four character classes: Uppercase alphabetic, lowercase alphabetic, numeral, and special characters such as an asterisk, ampersand, or exclamation point.

i. “Mobile Device” means a computing device, typically smaller than a notebook, which runs a mobile operating system, such as iOS, Android, or Windows Phone. Mobile Devices include smart phones, most tablets, and other form factors.

j. “Multi-factor Authentication” means controlling access to computers and other IT resources by requiring two or more pieces of evidence that the user is who they claim to be. These pieces of evidence consist of something the user knows, such as a password or PIN; something the user has such as a key card, smart card, or physical token; and something the user is, a biometric identifier such as a fingerprint, facial scan, or retinal scan. “PIN” means a personal identification number, a series of numbers which act as a password for a device. Since PINs are typically only four to six characters, PINs are usually used in conjunction with another factor of authentication, such as a fingerprint.

k. “Portable Device” means any computing device with a small form factor, designed to be transported from place to place. Portable devices are primarily battery powered devices with base computing resources in the form of a processor, memory, storage, and network access. Examples include, but are not limited to, mobile phones, tablets, and laptops. Mobile Device is a subset of Portable Device.

l. “Portable Media” means any machine readable media that may routinely be stored or moved independently of computing devices. Examples include magnetic tapes, optical discs (CDs or DVDs), flash memory (thumb drive) devices, external hard drives, and internal hard drives that have been removed from a computing device.
m. “Secure Area” means an area to which only authorized representatives of the entity possessing the Confidential Information have access, and access is controlled through use of a key, card key, combination lock, or comparable mechanism. Secure Areas may include buildings, rooms or locked storage containers (such as a filing cabinet or desk drawer) within a room, as long as access to the Confidential Information is not available to unauthorized personnel. In otherwise Secure Areas, such as an office with restricted access, the Data must be secured in such a way as to prevent access by non-authorized staff such as janitorial or facility security staff, when authorized Contractor staff are not present to ensure that non-authorized staff cannot access it.

n. “Trusted Network” means a network operated and maintained by the Contractor, which includes security controls sufficient to protect DSHS Data on that network. Controls would include a firewall between any other networks, access control lists on networking devices such as routers and switches, and other such mechanisms which protect the confidentiality, integrity, and availability of the Data.

o. “Unique User ID” means a string of characters that identifies a specific user and which, in conjunction with a password, passphrase or other mechanism, authenticates a user to an information system.

2. Authority. The security requirements described in this document reflect the applicable requirements of Standard 141.10 (https://ocio.wa.gov/policies) of the Office of the Chief Information Officer for the state of Washington, and of the DSHS Information Security Policy and Standards Manual. Reference material related to these requirements can be found here: https://www.dshs.wa.gov/fsa/central-contract-services/keeping-dshs-client-information-private-and-secure, which is a site developed by the DSHS Information Security Office and hosted by DSHS Central Contracts and Legal Services.

3. Administrative Controls. The Lead/sub grantee must have the following controls in place:

   a. A documented security policy governing the secure use of its computer network and systems, and which defines sanctions that may be applied to Lead/sub grantee staff for violating that policy.

4. Authorization, Authentication, and Access. In order to ensure that access to the Data is limited to authorized staff, the Lead/sub grantee must:

   a. Have documented policies and procedures governing access to systems with the shared Data.

   b. Restrict access through administrative, physical, and technical controls to authorized staff.

   c. Ensure that user accounts are unique and that any given user account logon ID and password combination is known only to the one employee to whom that account is assigned. For purposes of non-repudiation, it must always be possible to determine which employee performed a given action on a system housing the Data based solely on the logon ID used to perform the action.

   d. Ensure that only authorized users are capable of accessing the Data.
e. Ensure that an employee’s access to the Data is removed immediately:

(1) Upon suspected compromise of the user credentials.

(2) When their employment is terminated.

(3) When they no longer need access to the Data.

f. Have a process to periodically review and verify that only authorized users have access to systems containing DSHS Confidential Information.

g. When accessing the Data from within the Lead/sub grantee’s network (the Data stays within the Lead/sub grantee’s network at all times), enforce password and logon requirements for users within the Lead/sub grantee network, including:

(1) A minimum length of 8 characters, and containing at least three of the following character classes: uppercase letters, lowercase letters, numerals, and special characters such as an asterisk, ampersand, or exclamation point.

(2) That a password does not contain a user’s name, logon ID, or any form of their full name.

(3) That a password does not consist of a single dictionary word. A password may be formed as a passphrase which consists of multiple dictionary words.

(4) That passwords are significantly different from the previous four passwords. Passwords that increment by simply adding a number are not considered significantly different.

h. When accessing Confidential Information from an external location (the Data will traverse the Internet or otherwise travel outside the Lead/sub grantee network), mitigate risk and enforce password and logon requirements for users by employing measures including:

(1) Ensuring mitigations applied to the system don’t allow end-user modification.

(2) Not allowing the use of dial-up connections.

(3) Using industry standard protocols and solutions for remote access. Examples would include RADIUS and Citrix.

(4) Encrypting all remote access traffic from the external workstation to Trusted Network or to a component within the Trusted Network. The traffic must be encrypted at all times while traversing any network, including the Internet, which is not a Trusted Network.

(5) Ensuring that the remote access system prompts for re-authentication or performs automated session termination after no more than 30 minutes of inactivity.

(6) Ensuring use of Multi-factor Authentication to connect from the external end point to the internal end point.

i. Passwords or PIN codes may meet a lesser standard if used in conjunction with another authentication mechanism, such as a biometric (fingerprint, face recognition, iris scan) or token (software, hardware, smart card, etc.) in that case:
(1) The PIN or password must be at least 5 letters or numbers when used in conjunction with at least one other authentication factor

(2) Must not be comprised of all the same letter or number (11111, 22222, aaaaa, would not be acceptable)

(3) Must not contain a “run” of three or more consecutive numbers (12398, 98743 would not be acceptable)

j. If the contract specifically allows for the storage of Confidential Information on a Mobile Device, passcodes used on the device must:

(1) Be a minimum of six alphanumeric characters.

(2) Contain at least three unique character classes (upper case, lower case, letter, number).

(3) Not contain more than a three consecutive character run. Passcodes consisting of 12345, or abcd12 would not be acceptable.

k. Render the device unusable after a maximum of 10 failed logon attempts.

5. Protection of Data. The Lead/sub grantee agrees to store Data on one or more of the following media and protect the Data as described:

a. Hard disk drives. For Data stored on local workstation hard disks, access to the Data will be restricted to Authorized User(s) by requiring logon to the local workstation using a Unique User ID and Hardened Password or other authentication mechanisms which provide equal or greater security, such as biometrics or smart cards.

b. Network server disks. For Data stored on hard disks mounted on network servers and made available through shared folders, access to the Data will be restricted to Authorized Users through the use of access control lists which will grant access only after the Authorized User has authenticated to the network using a Unique User ID and Hardened Password or other authentication mechanisms which provide equal or greater security, such as biometrics or smart cards. Data on disks mounted to such servers must be located in an area which is accessible only to authorized personnel, with access controlled through use of a key, card key, combination lock, or comparable mechanism.

For DSHS Confidential Information stored on these disks, deleting unneeded Data is sufficient as long as the disks remain in a Secure Area and otherwise meet the requirements listed in the above paragraph. Destruction of the Data, as outlined below in Section 8 Data Disposition, may be deferred until the disks are retired, replaced, or otherwise taken out of the Secure Area.

c. Optical discs (CDs or DVDs) in local workstation optical disc drives. Data provided by DSHS on optical discs which will be used in local workstation optical disc drives and which will not be transported out of a Secure Area. When not in use for the contracted purpose, such discs must be Stored in a Secure Area. Workstations which access DSHS Data on optical discs must
be located in an area which is accessible only to authorized personnel, with access controlled through use of a key, card key, combination lock, or comparable mechanism.

d. **Optical discs (CDs or DVDs) in drives or jukeboxes attached to servers.** Data provided by DSHS on optical discs which will be attached to network servers and which will not be transported out of a Secure Area. Access to Data on these discs will be restricted to Authorized Users through the use of access control lists which will grant access only after the Authorized User has authenticated to the network using a Unique User ID and Hardened Password or other authentication mechanisms which provide equal or greater security, such as biometrics or smart cards. Data on discs attached to such servers must be located in an area which is accessible only to authorized personnel, with access controlled through use of a key, card key, combination lock, or comparable mechanism.

e. **Paper documents.** Any paper records must be protected by storing the records in a Secure Area which is only accessible to authorized personnel. When not in use, such records must be stored in a Secure Area.

f. **Remote Access.** Access to and use of the Data over the State Governmental Network (SGN) or Secure Access Washington (SAW) will be controlled by DSHS staff who will issue authentication credentials (e.g. a Unique User ID and Hardened Password) to Authorized Users on Contractor’s staff. Contractor will notify DSHS staff immediately whenever an Authorized User in possession of such credentials is terminated or otherwise leaves the employ of the Contractor, and whenever an Authorized User’s duties change such that the Authorized User no longer requires access to perform work for this Contract.

g. **Data storage on portable devices or media.**

   (1) Except where otherwise specified herein, DSHS Data shall not be stored by the Lead/sub grantee on portable devices or media unless specifically authorized within the terms and conditions of the Grant. If so authorized, the Data shall be given the following protections:

   (a) Encrypt the Data.

   (b) Control access to devices with a Unique User ID and Hardened Password or stronger authentication method such as a physical token or biometrics.

   (c) Manually lock devices whenever they are left unattended and set devices to lock automatically after a period of inactivity, if this feature is available. Maximum period of inactivity is 20 minutes.

   (d) Apply administrative and physical security controls to Portable Devices and Portable Media by:

      i. Keeping them in a Secure Area when not in use,

      ii. Using check-in/check-out procedures when they are shared, and

      iii. Taking frequent inventories.
(2) When being transported outside of a Secure Area, Portable Devices and Portable Media with DSHS Confidential Information must be under the physical control of Lead/sub grantee staff with authorization to access the Data, even if the Data is encrypted.

h. **Data stored for backup purposes.**

(1) DSHS Confidential Information may be stored on Portable Media as part of a Lead/sub grantee’s existing, documented backup process for business continuity or disaster recovery purposes. Such storage is authorized until such time as that media would be reused during the course of normal backup operations. If backup media is retired while DSHS Confidential Information still exists upon it, such media will be destroyed at that time in accordance with the disposition requirements below in Section 8 *Data Disposition.*

(2) Data may be stored on non-portable media (e.g. Storage Area Network drives, virtual media, etc.) as part of a Lead/sub grantee’s existing, documented backup process for business continuity or disaster recovery purposes. If so, such media will be protected as otherwise described in this exhibit. If this media is retired while DSHS Confidential Information still exists upon it, the data will be destroyed at that time in accordance with the disposition requirements below in Section 8 *Data Disposition.*

i. **Cloud storage.** DSHS Confidential Information requires protections equal to or greater than those specified elsewhere within this exhibit. Cloud storage of Data is problematic as neither DSHS nor the Lead/sub grantee has control of the environment in which the Data is stored. For this reason:

(1) DSHS Data will not be stored in any consumer grade Cloud solution, unless all of the following conditions are met:

   (a) Lead/sub grantee has written procedures in place governing use of the Cloud storage and Contractor attests in writing that all such procedures will be uniformly followed.

   (b) The Data will be Encrypted while within the Lead/sub grantee network.

   (c) The Data will remain Encrypted during transmission to the Cloud.

   (d) The Data will remain Encrypted at all times while residing within the Cloud storage solution.

   (e) The Lead/sub grantee will possess a decryption key for the Data, and the decryption key will be possessed only by the Lead/sub grantee and/or DSHS.

   (f) The Data will not be downloaded to non-authorized systems, meaning systems that are not on either the DSHS or Lead/sub grantee networks.

   (g) The Data will not be decrypted until downloaded onto a computer within the control of an Authorized User and within either the DSHS or Lead/sub grantee’s network.

(2) Data will not be stored on an Enterprise Cloud storage solution unless either:

   (a) The Cloud storage provider is treated as any other Sub-Contractor, and agrees in writing to all of the requirements within this exhibit; or,
(b) The Cloud storage solution used is FedRAMP certified.

(3) If the Data includes protected health information covered by the Health Insurance Portability and Accountability Act (HIPAA), the Cloud provider must sign a Business Associate Agreement prior to Data being stored in their Cloud solution.

6. System Protection. To prevent compromise of systems which contain DSHS Data or through which that Data passes:

a. Systems containing DSHS Data must have all security patches or hotfixes applied within 3 months of being made available.

b. The Lead/sub grantee will have a method of ensuring that the requisite patches and hotfixes have been applied within the required timeframes.

c. Systems containing DSHS Data shall have an Anti-Malware application, if available, installed.

d. Anti-Malware software shall be kept up to date. The product, its anti-virus engine, and any malware database the system uses, will be no more than one update behind current.

7. Data Segregation.

a. DSHS Data must be segregated or otherwise distinguishable from non-DSHS data. This is to ensure that when no longer needed by the Lead/sub grantee, all DSHS Data can be identified for return or destruction. It also aids in determining whether DSHS Data has or may have been compromised in the event of a security breach. As such, one or more of the following methods will be used for data segregation.

(1) DSHS Data will be kept on media (e.g. hard disk, optical disc, tape, etc.) which will contain no non-DSHS Data. And/or,

(2) DSHS Data will be stored in a logical container on electronic media, such as a partition or folder dedicated to DSHS Data. And/or,

(3) DSHS Data will be stored in a database which will contain no non-DSHS data. And/or,

(4) DSHS Data will be stored within a database and will be distinguishable from non-DSHS data by the value of a specific field or fields within database records.

(5) When stored as physical paper documents, DSHS Data will be physically segregated from non-DSHS data in a drawer, folder, or other container.

b. When it is not feasible or practical to segregate DSHS Data from non-DSHS data, then both the DSHS Data and the non-DSHS data with which it is commingled must be protected as described in this exhibit.

8. Data Disposition. When the contracted work has been completed or when the Data is no longer needed, except as noted above in Section 5.b, Data shall be returned to DSHS or destroyed. Media on which Data may be stored and associated acceptable methods of destruction are as follows:
### Data Stored On:

- Server or workstation hard disks, or
- Removable media (e.g. floppies, USB flash drives, portable hard disks) excluding optical discs

### Will be Destroyed By:

- Using a “wipe” utility which will overwrite the Data at least three (3) times using either random or single character data, or
- Degaussing sufficiently to ensure that the Data cannot be reconstructed, or
- Physically destroying the disk

### Paper documents with sensitive or Confidential Information

- Recycling through a contracted firm provided the contract with the recycler assures that the confidentiality of Data will be protected.

### Paper documents containing Confidential Information requiring special handling (e.g. protected health information)

- On-site shredding, pulping, or incineration

### Optical discs (e.g. CDs or DVDs)

- Incineration, shredding, or completely defacing the readable surface with a coarse abrasive

### Magnetic tape

- Degaussing, incinerating or crosscut shredding
Appendix I. Overview of HEN Eligibility at Enrollment and Recertification

HEN Eligibility Determination at Program Enrollment and Recertification

Program Enrollment Eligibility

- DSHS makes HEN Referral
  - YES: HEN Referral verified through BVS
  - NO: Exit

- Housing status eligibility verified
  - YES: Enroll in HEN
  - NO: Exit

- 3 months HEN services

Recertification Eligibility

- Income eligibility verified
  - YES: Eligible for Standard CHG
    - At or below 30% AMI: Exit
    - Above 30% AMI: Eligible for additional 3 months HEN or Standard CHG
  - NO: Exit

- Eligible for Standard CHG
  - At or below 30% AMI: Maintains HEN eligibility
  - Above 30% AMI: Exit

- Eligible for additional 3 months HEN or Standard CHG
  - Exit

Exit

- Exit
9.10 Appendix J: Disability and/or Length of Time Homeless Documentation Requirements

Documentation of a Disability *(required for permanent supportive housing)*.

<table>
<thead>
<tr>
<th>Disability -- Documentation Required in Client File:</th>
</tr>
</thead>
<tbody>
<tr>
<td>One of the following:</td>
</tr>
<tr>
<td>☐ Written verification of the disability from a professional licensed by the state to diagnose and treat the disability and his or her certification that the disability is expected to be long continuing or of indefinite duration and substantially impedes the individual’s ability to live independently.</td>
</tr>
<tr>
<td>☐ Written verification from the Social Security Administration.</td>
</tr>
<tr>
<td>☐ Disability check receipt (Social Security Disability Insurance check or Veteran Disability Compensation).</td>
</tr>
<tr>
<td>☐ Other documentation approved by King County, describe:_____________________________________________</td>
</tr>
<tr>
<td>☐ Program staff observation of disability. And one of the required documentations (listed above) must be obtained within 45 days of program enrollment.</td>
</tr>
<tr>
<td>☐ Documentation obtained. Type: ________________________________</td>
</tr>
<tr>
<td>Date:__________________</td>
</tr>
</tbody>
</table>

Documentation of Length of Time Homeless *(required for programs serving chronically homeless)*.

<table>
<thead>
<tr>
<th>Length of Time Homeless -- Documentation Required in Client File</th>
</tr>
</thead>
<tbody>
<tr>
<td>One of the following (in order of preference):</td>
</tr>
<tr>
<td>☐ Written verification from a third-party.</td>
</tr>
<tr>
<td>Third-Party name:______________________________________________</td>
</tr>
<tr>
<td>☐ Intake worker observations</td>
</tr>
<tr>
<td>How documented:________________________________________________</td>
</tr>
<tr>
<td>☐ Self-certification from the person seeking assistance (CHG self-certification form) AND documentation of attempts to obtain third-party documentation and why third-party documentation was not obtained.</td>
</tr>
<tr>
<td>Note: Records printed from HMIS or comparable database used by victim service or legal service providers are acceptable evidence of third-party documentation.</td>
</tr>
</tbody>
</table>