

Chapter 7: Occupancy

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Occupancy

The Occupancy option contains information on the occupancy eligibility and detailed unit information. These pages assist with information Housing can use to provide accurate information to Congress and the public concerning the inventory of affordable multifamily housing units reserved for the elderly and disabled. In addition, the Housing for Disabled Survey information is entered, updated and viewed prior to submission in this section.

Since the data for the Housing for Disabled Survey is obtained from owners or management agents, it is important that users enter the information in **iREMS** exactly as it is presented. The original survey form will be kept on file, however, **iREMS** will be used for storing and reporting this data.

*Note: Contract Administrators have view-only access to the first two pages in the **Occupancy** sidebar option.*

Objectives:

By the end of this chapter, you will be able to:

- View the number of non-contract property units
- View the number of total units
- View notes pertaining to the occupancy
- Enter information for the Housing for Disabled Survey
- Submit the Housing for Disabled Survey

7.1 Type and Occupancy Eligibility Tab

The **Occupancy** page displays with the *Type and Occupancy Eligibility* tab active when **Occupancy** is selected in the **iREMS** sidebar. This page allows you to view information pertaining to the *Initial Occupancy Date, the Property Type, Any Amenities, Any Current Waivers and Disability Type*. You can also view occupancy eligibility restriction information which is taken from the survey data entered into **iREMS**. This information can be used for reference purposes when completing the current Housing for the Disabled survey.

Accessing the Occupancy Page:

To access the **Occupancy** page you must first select a specific property. Once you have selected a property, the **Property Attributes** page displays. From the **Property Attributes** page you can select the *Occupancy* link from the **iREMS** sidebar. (See Chapter 3: Asset Management Portfolio/Dashboard or Chapter 2. Getting Started for detailed information.)

✎ The Property Header located at the top of the page, displays the Property ID, Name, Contract/FHA#, Active Status, Watch List, Troubled Status and DEC Status. This Header will appear on most of the pages in iREMS. There is also a search feature in the header that allows the user to select a different property without having to return to the Portfolio/Dashboard to make the change.

To view Type and Occupancy information:

1. From the **Property Attributes** page, click on the *Occupancy* tab and the **Property Information** page displays.

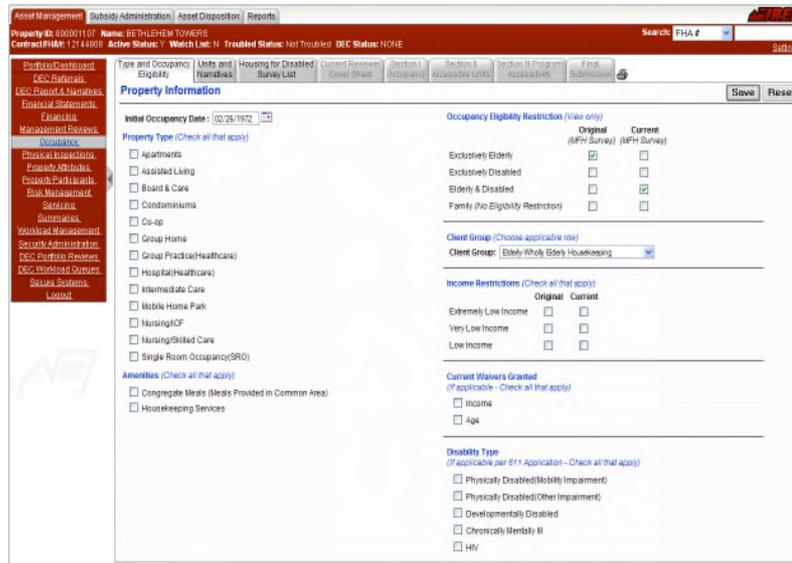


Figure 7-1. Property Information page

2. View occupancy information.
3. Click on another sidebar option or a new tab to view additional information.

7.2 Units and Narratives

The *Units and Narratives* tab contains the number of contract units, the number of insured and/or non-contract units and the total number of units in the property. This page also contains a section on the unit counts for the 232 Detail. In addition, you can view two narrative comment fields on occupancy.

To view information on the Units and Narratives page:

1. From the **Property Information** page, click on the *Units and Narratives* tab. The **Unit and Narrative** page displays.

Unit Type	#Contract Units	#Insured and/or Non-contract Units	#Total Units
0	33	23	56
1	53	35	88
2	0	0	0
3	0	0	0
4	0	0	0
5	0	0	0
6	0	0	0
7	0	0	0
8	0	0	0
9	0	0	0
Unknown	0	0	0
Total Units	86	58	144

Property Unit Information from PASS
 Total Units: 0
 Total Assisted Units: 0
 Date of Unit data update: 02/12/2013

Grand Totals (HUD and Other Agencies)
 Grand Total of Assisted Units: 86

232 Detail
 Number of Assisted Living Units:
 Number of Nursing Home Beds:
 Number of Intermediate Care Units:
 Number of Board and Care Units:

Narratives
 Owner/Field Office Contacts Narrative: Occupancy
 Summary Narrative: Occupancy

Figure 7-2. Units and Narratives page

2. View the following information:
 - *Property Unit Information*
 - *Property Unit Information from PASS*
 - *Grand Totals (HUD and Other Agencies)*
 - *232 Detail (unit information)*
 - *Owner/Field Office Contact Narrative: Occupancy*
 - *Summary Narrative: Occupancy*

3. Click on another tab to view additional information.

7.3 Housing for Disabled Survey List

iREMS users can enter survey data obtained from the owner or management agent. The survey information will be used to provide accurate information to Congress and the public concerning the inventory of affordable Multifamily housing units reserved for the elderly and disabled.

The survey module contains six pages:

- Housing for Disabled Survey List - This page lists all surveys related to the property, including all completed surveys and the current survey, which may be in progress and incomplete. Data in the Survey-Date Signed column serves as a link to the following pages.

- Current Reviewer Cover Sheet -This page is view-only and displays review type information about the property. Its purpose is to give project managers conducting the survey interview a more accurate view of the property.
- Section I Occupancy -This is a data entry page that allows users to enter data specific to the type of occupancy and the number of units occupied.
- Section II Accessible Units -This is a data entry page that allows users to enter data related to the number of units by bedroom size.
- Section III Program Accessibility -This is a data entry page that allows users to enter information pertaining to program accessibility.
- Review Survey Result for Final Submission - This page displays all values entered into the survey and identifies all missing data, indicating whether the field is required or not.

The new survey information can be viewed by all users but can only be edited by the following roles: SPM, PM, BPM, SCA, PBCA, BCA, MFD and PA. Users with these roles must also be assigned to the property to enter or edit a survey.

Users assigned the DSD role have view and survey delete rights. Users with this role do not have to be assigned to the property to delete a survey. When a DSD user accesses the survey from the list page, the default is the Final Submission page, regardless if the survey has been finalized or not. A delete button displays on the Final Submission page. Once selected a warning message displays indicating that the survey will be deleted and allows the user an opportunity to select okay or cancel.

There should only be one active survey per year for a property. However, there are instances where more than one physical property has been combined under a single iREMS property ID, due to multiple loans combined and refinanced under a single loan. In these cases, there will be multiple surveys completed under an iREMS propertyID (one for each property). iREMS allows multiple active surveys. However, if there are no combined properties, there should only be one active survey.

To access the Housing for Disabled Survey List page:

1. Click on **Housing for Disabled Survey List** tab and the **Housing for Disabled Survey List** page displays.

Type and Occupancy Eligibility	Units and Narratives	Housing for Disabled Survey List	Current Reviewer Cover Sheet	Section I Occupancy	Section II Accessible Units	Section III Program Accessibility	Final Submission
Housing For Disabled Survey List							Add New Survey
Survey - Date Signed	Survey Fiscal Year	Completion Status	Active Indicator	Updated By	Last Update Date		
12/08/2009	2010	Y	N	KESHA M GRIFFIN	12/30/2009 09:15:26 PM		
12/16/2008	2009	Y	Y	IRMA A ARIAS	12/29/2008 10:22:38 PM		

Figure 7-3. Housing For Disabled Survey List page

To add a new Survey:

1. From the **Housing for Disabled Survey List**, click on **Add New Survey** and the **Multifamily Housing Inventory Survey (Cover sheet)** page displays.

Type and Occupancy Eligibility	Units and Narratives	Housing for Disabled Survey List	Current Reviewer Cover Sheet	Section I Occupancy	Section II Accessible Units	Section III Program Accessibility	Final Submission
Multifamily Housing Inventory Survey (Cover Sheet)							
Property ID: 800212624							
Property Name: COVENT GARDENS							
Property Address: 3315 DUNN STREET,S,W HUNTSVILLE AL USA 35805-6421							
To be completed by Reviewer:							
Name of Owner/General Partner: CMP Garden Cove L.P.							
Address of Owner/General Partner: 1465 Northside Dr NW Atlanta GA USA 30318-4212							
Name of Management Agent: ALEXANDER PROPERTIES GROUP, INC.							
Address of Management Agent: 2299 Perimeter Park Drive, Suite 150 ATLANTA GA USA 30341							
Property Type:							
<input type="checkbox"/> Apartments							
<input type="checkbox"/> Assisted Living							
<input type="checkbox"/> Board & Care							
<input type="checkbox"/> Condominiums							
<input type="checkbox"/> Co-op							
<input type="checkbox"/> Group Home							
<input type="checkbox"/> Group Practice (Healthcare)							
<input type="checkbox"/> Hospital (Healthcare)							
<input type="checkbox"/> Intermediate Care							
<input type="checkbox"/> Mobile Home Park							
<input type="checkbox"/> Nursing/ICF							
<input type="checkbox"/> Nursing/Skilled Care							
<input type="checkbox"/> Single Room Occupancy (SRO)							
Type of Development/Occupancy Eligibility/Designed For:							
<input type="checkbox"/> Elderly							
<input checked="" type="checkbox"/> Disabled							
<input type="checkbox"/> Elderly and Disabled							
<input checked="" type="checkbox"/> Family							
Total Number of Units: 199 Total Assisted Units: 0							
Type of Federal Financial Assistance:							
<input type="checkbox"/> Section 8 <input type="checkbox"/> Section 202 <input type="checkbox"/> Section 202/8 <input type="checkbox"/> Section 202/PAC							
<input type="checkbox"/> Section 202 PRAC <input type="checkbox"/> Section 811 <input type="checkbox"/> Section 221(d)(3)BMIR <input type="checkbox"/> Section 236							
Number of Units of Each Type/Size:							
0 BR: 1 1 BR: 50 2 BR: 99 3 BR: 50 4 BR: 5 5 BR: 6+ BR: 0							
Date of First Occupancy: 01/01/1991							
Residents Manager's unit: <input type="checkbox"/>							
504 Service Coordinator by Property: <input type="checkbox"/>							
Reviewed by:							
Housing <input type="checkbox"/>							
PBCA <input type="checkbox"/>							
CA <input type="checkbox"/>							
Reviewer: _____							
Date: _____							
Phone: _____							

Figure 7-4. Multifamily Housing Inventory Survey (Cover Sheet) page

Information that is housed in iREMS or was entered on a previous survey will populate the cover sheet. The data on the cover sheet is view only.

- View the information. You can print this page to use as a guide for completing the rest of the survey.
- Click on *Section 1 Occupancy* tab and the **Section 1 Occupancy** page displays.

Type and Occupancy Eligibility	Units and Narratives	Housing for Disabled Survey List	Current Reviewer Cover Sheet	Section I Occupancy	Section II Accessible Units	Section III Program Accessibility	Final Submission
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SECTION I OCCUPANCY Save Reset

***This property was designed primarily for:**

Exclusively Elderly
 Exclusively Disabled
 Elderly & Disabled
 Family (No Eligibility Restriction)

Indicate the number of units currently occupied by client group below:

Exclusively Elderly
Exclusively Disabled
Elderly and Disabled
Near Elderly-Disabled
Family

Is there a use agreement or any other document that indicates that this property must serve only elderly tenants?

Yes No Unknown

If yes, please indicate:

Type of Document:
Date of Document:

If this project is a 'covered Section 8 housing project' (see instructions), is there an occupancy preference for the elderly in accordance with Section 651 of Title VI, Subtitle D of the Housing and Community Development Act of 1992?

Yes No Unknown

If yes, please indicate:

Date of the elderly preference:
Number of units that must be reserved for occupancy by non-elderly persons with disabilities: , and
Date used to determine the number of units reserved for non-elderly persons with disabilities:

Is there an occupancy restriction for the elderly in accordance with Section 658 of Title VI, Subtitle D of the Housing and Community Development Act of 1992?

Yes No Unknown

Total Number of Units Exclusively for the Elderly:
Total Number of Units Exclusively for Persons with Disabilities:
Total Number of Units that must be occupied only by Non-Elderly Persons with Disabilities:

Signature Name: *** Date Signed**

Figure 7-5. Section I Occupancy

4. Enter the requested information exactly as it appears on the paper survey.
5. Click on **Save** and the page refreshes with the *Save was successful* message.

✍ If you are finished you can stop here. However, if you want to complete the next page of the survey, continue on the next section.

To complete Section II Accessible Units:

1. Click on *Section II Accessible Units* tab and the **Section II Accessible Units** page displays.

Bedroom Size	0	1	2	3	4	5	6+	Total
1. All Units	<input type="text" value="0"/>							
2. Total units with project-based rental assistance	<input type="text" value="0"/>							
3. Mobility accessible units	<input type="text" value="0"/>							
4. Vision and/or Hearing accessible Units	<input type="text" value="0"/>							
5. Total Accessible Units	<input type="text" value="0"/>							
6. Number of persons on waiting list who are eligible for accessible units	<input type="text" value="0"/>							
7. Number of accessible units occupied by elderly or family tenants	<input type="text" value="0"/>							
8. Number of accessible units occupied by non-elderly tenants with disabilities who require the features of the unit	<input type="text" value="0"/>							
9. Number of accessible units occupied by elderly tenants with disabilities who require the features of the unit	<input type="text" value="0"/>							
10. Percentage of Total Units with project-based Rental Assistance <small>(Total line 2 divided by Total line 1 x 100)</small>								<input type="text" value="0"/> %
11. Percentage of Total Units that are mobility accessible <small>(Total line 3 divided by Total line 1 x 100)</small>								<input type="text" value="0"/> %
12. Percentage of Total Units that are vision and/or hearing accessible <small>(Total line 4 divided by Total line 1 x 100)</small>								<input type="text" value="0"/> %

Figure 7-6. Section II Accessible Units

The following rules apply to this page:

The All Units field must have an entry for a complete survey

All entries must be a number

Data in fields without user entered values, will default to zeros

*If you enter a percentage that is inconsistent with the **iREMS** calculation, a warning message will display. However, if your entry is identical to the entry on the paper survey, the survey data should remain. **iREMS** will not replace entered data with the systems calculated percentage.*

2. Enter the requested information exactly as it appears on the paper survey.
3. Click on **Save** and the save was successful message displays.

If you are finished you can stop here. However, if you want to complete the next page of the survey, continue on the next section.

To complete Section III Program Accessibility:

1. Click on the *Section III Program Accessibility* tab and the **Section III Program Accessibility** page displays.

SECTION III - PROGRAM ACCESSIBILITY [Save] [Reset]

1. Does the recipient employ at least 15 employees?
 Yes No Unknown
If yes, answer Question 2.; If no skip to Question 3.

2. Is at least one person designated to coordinate its Section 504 responsibilities?
 Yes No N/A
If yes, provide the person's name and telephone number below.

Name: [] [] []
(First Name) (M.I.) (Last Name)

Telephone Number: []

Program Accessibility

3. Has the owner/agent taken steps to ensure effective communication using:

Qualified sign language and oral interpreters
 Yes No Unknown
Comments: []

Readers
 Yes No Unknown
Comments: []

Use of tapes
 Yes No Unknown
Comments: []

Braille materials
 Yes No Unknown
Comments: []

Other(Describe)
 Yes No Unknown
Comments: []

Figure 7-7. Section III Program Accessibility

✍ Note: The following rules apply to this page:

✍ Follow page instructions for questions 1 and 2.

*✍ Use dashes to separate the phone number. **iREMS** will not add any formatting.*

✍ Comment fields are unlimited.

2. Enter the requested information exactly as it appears on the paper survey.
3. Click on and the save was successful message displays.

✍ If you are finished you can stop here. However, if you want to complete the next page of the survey, continue on the next section.

To view Final Submission:

1. Click on the *Final Submission* tab and the **Multifamily Housing Inventory Survey** page displays.

Type and Occupancy Eligibility	Units and Narratives	Housing for Disabled Survey List	Current Reviewer Cover Sheet	Section I Occupancy	Section II Accessible Units	Section III Program Accessibility	Final Submission
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Multifamily Housing Inventory Survey (Survey Data)

Property ID: 800038268

Property Name: Cannon Apartments

Property Address: 3425 Wisconsin Avenue, VICKSBURG, MS 39180-5348

Survey Active: Yes No

Comments:

SECTION I - OCCUPANCY

This property was designed primarily for:

- Exclusively Elderly
- Exclusively Disabled
- Elderly & Disabled
- Family (No Eligibility Restriction)

Indicate the number of units currently occupied by client group below:

Exclusively Elderly
Exclusively Disabled
Elderly and Disabled
Near Elderly-Disabled
Family

Is there a use agreement or any other document that indicates that this property must serve only elderly tenants?

Yes No

Type of Document :
Date of Document :

If this project is a 'covered Section 8 housing project' (see instructions), is there an occupancy preference for the elderly in accordance with Section 651 of Title VI, Subtitle D of the Housing and Community Development Act of 1992?

Yes No

If yes, please indicate:

Date of the elderly preference:
Number of units that must be reserved for occupancy by non-elderly persons with disabilities:
Date used to determine the number of units reserved for non-elderly persons with disabilities:

Is there an occupancy restriction for the elderly in accordance with Section 658 of Title VI, Subtitle D of the Housing and Community Development Act of 1992?

Yes No

Total Number of Units Exclusively for the Elderly:
Total Number of Units Exclusively for Persons with Disabilities:
Total Number of Units that must be occupied only by Non-Elderly Persons with Disabilities

Signature Name: _____ Date Signed: _____

Figure 7-8. Multifamily Housing Inventory Survey (Survey Data) (part 1 of page)

SECTION II - ACCESSIBLE UNITS								
Bedroom Size	0	1	2	3	4	5	6+	Total
1. All Units								
2. Total units with project-based rental assistance								
3. Mobility <i>accessible</i> units								
4. Vision and/or Hearing <i>accessible</i> Units								
5. Total Accessible Units								
6. Number of persons on waiting list who are eligible for <i>accessible</i> units								
7. Number of accessible units <i>occupied</i> by elderly or family tenants								
8. Number of <i>accessible</i> units occupied by non-elderly tenants with disabilities who require the features of the unit								
9. Number of <i>accessible</i> units occupied by elderly tenants with disabilities who require the features of the unit								
10. Percentage of Total Units with Project-Based Rental Assistance <i>(Total line 2 divided by Total line 1 x 100)</i>								%
11. Percentage of Total Units that are mobility accessible <i>(Total line 3 divided by Total line 1 x 100)</i>								%
12. Percentage of Total Units that are vision and/or hearing accessible <i>(Total line 4 divided by Total line 1 x 100)</i>								%

SECTION III - PROGRAM ACCESSIBILITY

1. Does the recipient employ at least 15 employees?
 Yes No

If yes, answer Question 2.; If no skip to Question 3.

2. Is at least one person designated to coordinate its Section 504 responsibilities?
 Yes No N/A

If yes, provide the persons name and telephone number below.

Name:
 Telephone
 Number:

Program Accessibility

3. Has the owner/agent taken steps to ensure effective communication using:

Qualified sign language and oral interpreters Yes No
 Comments:

Readers Yes No
 Comments:

Use of tapes Yes No
 Comments:

Braille materials Yes No
 Comments:

Other (Describe) Yes No
 Comments:

Figure 7- 9. Multifamily Housing Inventory Survey (Survey Data) (part 2 of page)

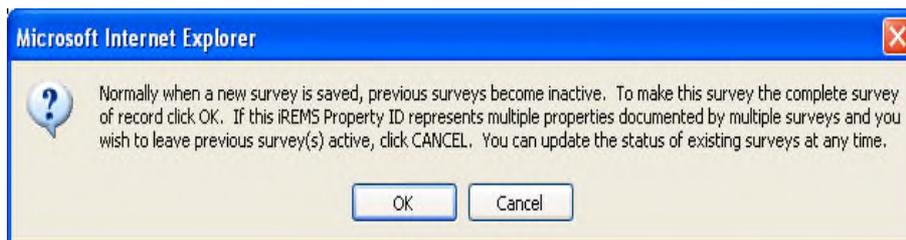
Note: The following rules apply to this page:

Any necessary changes must be made on the input pages. This page is view only.

2. Review the entered data and compare it to the paper survey.
3. Click on and the page refreshes with the message *Survey Completed*.

If you are unable to save the survey record, a pop-up message will display indicating where the required information is missing. Required information must be entered in order to save a record. If your paper survey is missing the required information, that information must be obtained from the person completing the survey.

When a survey is saved and there is another active survey, the following message displays:



To View an existing survey record

1. From the **Housing for Disabled Survey List** page, highlight and click on a survey in the list and the **Multifamily Housing Inventory Survey (Survey Data)** page displays.

Type and Occupancy Eligibility	Units and Narratives	Housing for Disabled Survey List	Current Reviewer Cover Sheet	Section I Occupancy	Section II Accessible Units	Section III Program Accessibility	Final Submission
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Multifamily Housing Inventory Survey (Survey Data) Save Reset

Property ID: 800038268

Property Name:

Property Address:

Survey Active: Yes No

Comments:

SECTION I - OCCUPANCY

This property was designed primarily for:

- Exclusively Elderly
- Exclusively Disabled
- Elderly & Disabled
- Family (No Eligibility Restriction)

Indicate the number of units currently occupied by client group below:

Exclusively Elderly
 Exclusively Disabled
 Elderly and Disabled
 Near Elderly-Disabled
 Family

Is there a use agreement or any other document that indicates that this property must serve only elderly tenants?

Yes No

Type of Document :
 Date of Document :

If this project is a 'covered Section 8 housing project' (see instructions), is there an occupancy preference for the elderly in accordance with Section 651 of Title VI, Subtitle D of the Housing and Community development Act of 1992?

Yes No

If yes, please indicate:

Date of the elderly preference:
 Number of units that must be reserved for occupancy by non-elderly persons with disabilities:
 Date used to determine the number of units reserved for non-elderly persons with disabilities:

Is there an occupancy restriction for the elderly in accordance with Section 658 of Title VI, Subtitle D of the Housing and Community Development Act of 1992?

Yes No

Total Number of Units Exclusively for the Elderly:
 Total Number of Units Exclusively for Persons with Disabilities:
 Total Number of Units that must be occupied only by Non-Elderly Persons with Disabilities

Signature Name: _____ Date Signed: _____

Figure 7-9. Final Submission (part 1 of page)

SECTION II - ACCESSIBLE UNITS								
Bedroom Size	0	1	2	3	4	5	6+	Total
1. All Units	0	47	100	52	0	0	0	199
2. Total units with project-based rental assistance	0	0	0	0	0	0	0	0
3. Mobility accessible units	0	4	0	0	0	0	0	4
4. Vision and/or Hearing accessible Units	0	0	0	0	0	0	0	0
5. Total Accessible Units	0	4	0	0	0	0	0	4
6. Number of persons on waiting list who are eligible for accessible units	0	0	0	0	0	0	0	0
7. Number of accessible units occupied by elderly or family tenants	0	0	0	0	0	0	0	0
8. Number of accessible units occupied by non-elderly tenants with disabilities who require the features of the unit	0	3	0	0	0	0	0	3
9. Number of accessible units occupied by elderly tenants with disabilities who require the features of the unit	0	0	0	0	0	0	0	0
10. Percentage of Total Units with Project-Based Rental Assistance (Total line 2 divided by Total line 1 x 100)								0 %
11. Percentage of Total Units that are mobility accessible (Total line 3 divided by Total line 1 x 100)								2 %
12. Percentage of Total Units that are vision and/or hearing accessible (Total line 4 divided by Total line 1 x 100)								0 %

SECTION III - PROGRAM ACCESSIBILITY

1. Does the recipient employ at least 15 employees?
 Yes No

If yes, answer Question 2.; If no skip to Question 3.

2. Is at least one person designated to coordinate its Section 504 responsibilities?
 Yes No N/A

If yes, provide the persons name and telephone number below.

Name:
 Telephone Number:

Program Accessibility

3. Has the owner/agent taken steps to ensure effective communication using:

Qualified sign language and oral interpreters Yes No
 Comments:

Readers Yes No
 Comments:

Use of tapes Yes No
 Comments:

Braille materials Yes No
 Comments:

Other (Describe) Yes No
 Comments:

Figure 7-11. Final Submission (part 2 of page)

2. View the survey.
3. Click on another sidebar option to view additional information.