

# Attachment

## Certification of Compliance with Risk Management Responsibilities

I hereby certify that:

Check one:

- This housing agency meets all the standards contained in Table 6, Criteria 7, of PIH Notice 2006-14, or
- The housing agency has submitted supporting narrative explaining any extenuating circumstances that HUD should consider regarding the PHA's progress in addressing compliance issues in Table 6, Criteria 7.

Name: \_\_\_\_\_

Signature: \_\_\_\_\_

Date

Applicant PHA: \_\_\_\_\_

Required attachment if applicable: extenuating circumstances narrative.

Warning: HUD will prosecute false claims and statements. Conviction may result in the imposition of criminal and civil penalties. (18 U.S.C. 1001, 1010, 1012, 31 U.S.C. 3729, 3802)