



HOUSING AUTHORITY OF THE
CITY AND COUNTY OF SAN FRANCISCO

Housing Choice Voucher Program Owner/Tenant Self-Certification of Correction Form

Entity ID: _____

Inspection ID: _____

The Housing Authority of the City and County of San Francisco (Authority) accepts self-certification for certain inspection failure items. This certification will not be accepted by the Authority for life-threatening failure items, failures resulting from lack of access to the unit, initial inspections, re-inspections to cure an abatement, or if there are 8 or more failed items. These instances cannot be resolved through this certification statement and will require physical re-inspection.

Please include supporting documentation for extermination and/or elevator compliance failures.

Both the Owner and Tenant must sign this form, verifying that all repairs have been completed. Falsifying this certification of completed repairs is considered a breach of contract and family obligations, which may result in termination of Housing Assistance Payment (HAP) Contract, termination of assistance, and/or removal of the unit from the Project-Based Voucher (PBV) HAP Contract.

You may complete this certification of repairs and submit it to the Authority via email at PBVinspections@sfha.org at least two business days prior to the scheduled re-inspection date, otherwise a physical re-inspection shall occur. The Housing Authority of the City and County of San Francisco reserves the right to request supporting documentation at any time.

Unit address: _____

Owner certifies that all Owner required repairs have been completed.

Owner Name (print)

Owner Signature

Date

Tenant certifies that all Tenant required repairs have been completed.

Tenant Name (print)

Tenant Signature

Date

Inspection failure summary: (continued on page 2)



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Inspection failure summary:

Please scan/attach the list of deficiencies from the inspection letter or list all inspection failures below.

- 1.
- 2.
- 3.
- 4.
- 5.
- 6.
- 7.