

AFHMP Review Verification



Project Name: _____

OHFA Project Number: _____

Address: _____

Owner Name: _____

Contact completing AFHMP Name: _____

Contact Email: _____

Demographic Groups Least Likely to Apply

Housing Marketing Area:

Is Housing Marketing Area selection based on? Population/Density Multiple Sites/Census Tracts Other _____

Has there been a significant change in the demographics to: the Project? Yes No

the Housing Marketing Area? Yes No

Indicate which demographic group(s) from the housing market area that have changed. *(check all that apply)*

- White American Indian/ Alaska Native Native Hawaiian/ Other Pacific Islander
 Asian Black or African American Hispanic/ Latino Persons with Disabilities Families with Children
 Other ethnic group, religion etc. (specify) _____

State Protected Classes: Ancestry Military Status Local Protected Classes/Underserved: _____

Community Contacts for Marketing and Outreach

Have there been any changes to community contacts used for Outreach or Marketing? Yes No If yes, list below.

List the organization name, names of contact persons, their addresses, their telephone numbers, and title of the contact person

Methods of Advertising

Have there been any changes to advertising methods used? Yes No If yes, list below.

List the Name of Media Organization, Size & Duration of Advertising, and the Type of Media.

Evaluation of Marketing

Has the evaluation of marketing been effective? Yes No If No, explain the issues and any changes.

Staff Instruction/Fair Housing Training: Samples and Dates

Please provide documentation of fair housing training and list below the names of attendees and dates of trainings.

Signature and Acknowledgement

By signing this form, the agent/owner acknowledges that they have reviewed and found no need for significant updates to the AFHMP. I hereby certify that all the information stated herein, as well as any information provided in the attached, is true and accurate.

Owner Signature

Name of Company

Approved By

Name (type or print)

Title

Approval Date

Date of Submission

