

Certification of Inability to Absorb Utility Rate Increases Within the Current Funds Available in Accordance with Notice 2001-9 (HA)

(Name of Housing Agency)

Project Number _____

The housing authority referenced above has experienced an increase in utility rates that is creating a dire financial hardship. All available sources of funding, including eligible capital funds that would not otherwise be obligated during the fiscal year for urgent needs, have been exhausted to cover utility costs. I certify that I have reviewed the operating reserve level and annual operating expenses of the housing authority and have determined that its operating reserve level of \$_____.00 is less than or equal to 20 percent of its budgeted annual routine operating expenses of \$_____.00 (line 480 of Form HUD-52564, Operating Budget). I also certify that all materials submitted in accordance with Notice 2001-9 (HA) which must accompany this document are true and accurate to the best of my knowledge.

Name of Authorized Official	Title
Signature X	Date