

Language Access Program (LAP) Certification

MassHousing Project ID #: _____

Development Name: _____

Owner/Agent: _____

Form Completed by (please print name): _____

Please complete form by **December 31, 2013**. Information may be submitted electronically via e-mail to hpadellaro@masshousing.com or mailed attn: Helena Padellaro, MassHousing, One Beacon Street, Boston, MA 02108.

I certify that the Language Access Program (LAP) has been completed in accordance with HUD Guidelines⁽¹⁾

*** To certify for multiple developments, please sign once below and complete list on next page.**

Date of Completion: _____

Notes on Implementation: _____

Signed: _____ **Date:** _____

Title: _____

----- OR -----

I certify that the Language Access Program (LAP) has **NOT** been completed in accordance with HUD Guidelines ⁽¹⁾

Date LAP will be completed by: _____

Notes on progress/barriers: _____

Signed: _____ **Date:** _____

Title: _____

(1) "Final Guidance to Federal Financial Assistance Recipients Regarding Title VI Prohibition Against National Origin Discrimination Affecting Limited English Proficient Persons (72 FR 2732)

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