

**Certification by State or Local
Official of PHA Plans Consistency
with the Consolidated Plan or
State Consolidated Plan
(All PHAs)**

U. S Department of Housing and Urban Development
Office of Public and Indian Housing
OMB No. 2577-0226
Expires 3/31/2024

**Certification by State or Local Official of PHA Plans
Consistency with the Consolidated Plan or State Consolidated Plan**

I, Ramón L. Rivera Cruz, the Mayor of the Municipality of Bayamón
Official's Name *Official's Title*

certify that the 5-Year PHA Plan for fiscal years 2020-2025 and/or Annual PHA Plan for fiscal
year 2022 of the Puerto Rico Public Housing Administration is consistent with the
PHA Name

Consolidated Plan or State Consolidated Plan including the Analysis of Impediments (AI) to Fair
Housing Choice or Assessment of Fair Housing (AFH) as applicable to the

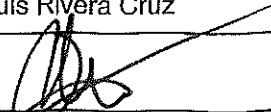
Bayamón
Local Jurisdiction Name

pursuant to 24 CFR Part 91 and 24 CFR §§ 903.7(o)(3) and 903.15.

Provide a description of how the PHA Plan's contents are consistent with the Consolidated Plan or
State Consolidated Plan.

The PHA Plan contents are consistent with the Consolidated plan as their projects align to the same general
purpose, serving communities with low and moderate income. Neither of the plans interferes with each other.

I hereby certify that all the information stated herein, as well as any information provided in the accompaniment herewith, is true and accurate. Warning: HUD will
prosecute false claims and statements. Conviction may result in criminal and/or civil penalties. (18 U.S.C. 1001, 1010, 1012; 31 U.S.C. 3729, 3802)

Name of Authorized Official: Ramón Luis Rivera Cruz	Title: Mayor, Municipality of Bayamón
Signature: 	Date:

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Code, Section 1701 et seq, and regulations promulgated thereunder at Title 12, Code of Federal Regulations. Responses to the collection of information
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Public reporting burden for this information collection is estimated to average 0.16 hours per year per response, including the time for reviewing
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**Certification by State or Local Official of PHA Plans
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I, Luis Irizarry Pabón, the Mayor of the Municipality of Ponce
Official's Name *Official's Title*

certify that the 5-Year PHA Plan for fiscal years 2020-2025 and/or Annual PHA Plan for fiscal
 year 2022 of the Puerto Rico Public Housing Administration is consistent with the
PHA Name

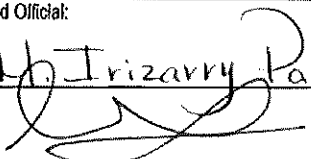
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 Housing Choice or Assessment of Fair Housing (AFH) as applicable to the

Ponce
Local Jurisdiction Name

pursuant to 24 CFR Part 91 and 24 CFR §§ 903.7(o)(3) and 903.15.

Provide a description of how the PHA Plan's contents are consistent with the Consolidated Plan or
 State Consolidated Plan.

I hereby certify that all the information stated herein, as well as any information provided in the accompaniment herewith, is true and accurate. Warning: HUD will prosecute false claims and statements. Conviction may result in criminal and/or civil penalties. (18 U.S.C. 1001, 1010, 1012; 31 U.S.C. 3729, 3802)

Name of Authorized Official: <u>Luis H. Irizarry Pabón</u>	Title: <u>Mayor</u>
Signature: 	Date: <u>April 13, 2022</u>

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**Certification by State or Local Official of PHA Plans
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I, Angel D. Concepción González, the Mayor of the Municipality of Cidra
Official's Name *Official's Title*

certify that the 5-Year PHA Plan for fiscal years 2020-2025 and/or Annual PHA Plan for fiscal
year 2022 of the Puerto Rico Public Housing Administration is consistent with the
PHA Name

Consolidated Plan or State Consolidated Plan including the Analysis of Impediments (AI) to Fair
Housing Choice or Assessment of Fair Housing (AFH) as applicable to the

Cidra
Local Jurisdiction Name

pursuant to 24 CFR Part 91 and 24 CFR §§ 903.7(o)(3) and 903.15.

Provide a description of how the PHA Plan's contents are consistent with the Consolidated Plan or
State Consolidated Plan.

I hereby certify that all the information stated herein, as well as any information provided in the accompaniment herewith, is true and accurate. Warning: HUD will prosecute false claims and statements. Conviction may result in criminal and/or civil penalties. (18 U.S.C. 1001, 1010, 1012; 31 U.S.C. 3729, 3802)

Name of Authorized Official: <u>Angel D. Concepción González</u>	Title: <u>Mayor</u>
Signature: <u>A D</u>	Date: <u>4/4/22</u>

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**Certification by State or Local Official of PHA Plans
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I, Ramón A. Hernández Torres, the Mayor of the Municipality of Juana Díaz
Official's Name *Official's Title*

certify that the 5-Year PHA Plan for fiscal years 2020-2025 and/or Annual PHA Plan for fiscal
year 2022 of the Puerto Rico Public Housing Administration is consistent with the
PHA Name

Consolidated Plan or State Consolidated Plan including the Analysis of Impediments (AI) to Fair
Housing Choice or Assessment of Fair Housing (AFH) as applicable to the

Juana Díaz
Local Jurisdiction Name

pursuant to 24 CFR Part 91 and 24 CFR §§ 903.7(o)(3) and 903.15.

Provide a description of how the PHA Plan's contents are consistent with the Consolidated Plan or
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I hereby certify that all the information stated herein, as well as any information provided in the accompaniment herewith, is true and accurate. Warning: HUD will prosecute false claims and statements. Conviction may result in criminal and/or civil penalties. (18 U.S.C. 1001, 1010, 1012; 31 U.S.C. 3729, 3802)

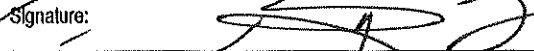
Name of Authorized Official:

Ramón A. Hernández Torres

Title:

Mayor

Signature:



Date:

April 11, 2022

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**Certification by State or Local Official of PHA Plans
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I, José C. Aponte-Dalmau, the Mayor of the Municipality of Carolina
Official's Name *Official's Title*

certify that the 5-Year PHA Plan for fiscal years 2020-2025 and/or Annual PHA Plan for
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PHA Name

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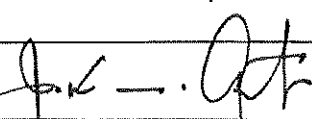
Carolina
Local Jurisdiction Name

pursuant to 24 CFR Part 91 and 24 CFR §§ 903.7(o)(3) and 903.15.

Provide a description of how the PHA Plan's contents are consistent with the Consolidated Plan or
State Consolidated Plan.

**We have revised the draft submitted for the PHA Plan 2022-2023. The projects included in
the plan regarding our municipality are consistent with our Action Plan 2022-2023**

I hereby certify that all the information stated herein, as well as any information provided in the accompaniment herewith, is true and accurate. Warning: HUD will
prosecute false claims and statements. Conviction may result in criminal and/or civil penalties. (18 U.S.C. 1001, 1010, 1012; 31 U.S.C. 3729, 3802)

Name of Authorized Official: José C. Aponte-Dalmau	Title: Mayor
Signature: 	Date: 4/6/22

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**Certification by State or Local Official of PHA Plans
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I, Rolando Ortiz Velázquez, the Mayor of the Municipality of Cayey
Official's Name *Official's Title*

certify that the 5-Year PHA Plan for fiscal years 2020-2025 and/or Annual PHA Plan for fiscal
year 2022 of the Puerto Rico Public Housing Administration is consistent with the
PHA Name

Consolidated Plan or State Consolidated Plan including the Analysis of Impediments (AI) to Fair
Housing Choice or Assessment of Fair Housing (AFH) as applicable to the

Cayey
Local Jurisdiction Name

pursuant to 24 CFR Part 91 and 24 CFR §§ 903.7(o)(3) and 903.15.

Provide a description of how the PHA Plan's contents are consistent with the Consolidated Plan or
State Consolidated Plan.

I hereby certify that all the information stated herein, as well as any information provided in the accompaniment herewith, is true and accurate. Warning: HUD will prosecute false claims and statements. Conviction may result in criminal and/or civil penalties. (18 U.S.C. 1001, 1010, 1012; 31 U.S.C. 3729, 3802)

Name of Authorized Official:	Title:
Signature:	Date:

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**Certification by State or Local Official of PHA Plans
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I, José Sánchez González, the Mayor of the Municipality of Manatí
Official's Name *Official's Title*

certify that the 5-Year PHA Plan for fiscal years 2020-2025 and/or Annual PHA Plan for fiscal
year 2022 of the Puerto Rico Public Housing Administration is consistent with the
PHA Name

Consolidated Plan or State Consolidated Plan including the Analysis of Impediments (AI) to Fair
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Manatí

Local Jurisdiction Name

pursuant to 24 CFR Part 91 and 24 CFR §§ 903.7(o)(3) and 903.15.

Provide a description of how the PHA Plan's contents are consistent with the Consolidated Plan or
State Consolidated Plan.

*Activities contained in the PHA Plans are consistent with the
Municipality and State Consolidated Plan. Activities and services are
aimed to improve the quality of life of LMI persons and to provide
housing and economic development opportunities.*

I hereby certify that all the information stated herein, as well as any information provided in the accompaniment herewith, is true and accurate. Warning: HUD will prosecute false claims and statements. Conviction may result in criminal and/or civil penalties. (18 U.S.C. 1001, 1010, 1012; 31 U.S.C. 3729, 3802)

Name of Authorized Official:

Hon. José A. Sánchez González

Title:

Mayor

Signature:



Date:

April 1, 2022

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**Certification by State or Local Official of PHA Plans
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I, José A. Meléndez Méndez, the Mayor of the Municipality of Fajardo
Official's Name *Official's Title*

certify that the 5-Year PHA Plan for fiscal years 2020-2025 and/or Annual PHA Plan for fiscal
year 2022 of the Puerto Rico Public Housing Administration is consistent with the
PHA Name

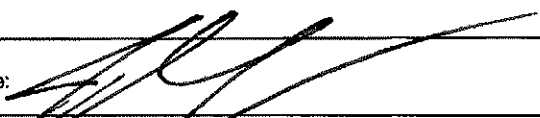
Consolidated Plan or State Consolidated Plan including the Analysis of Impediments (AI) to Fair
Housing Choice or Assessment of Fair Housing (AFH) as applicable to the

Fajardo
Local Jurisdiction Name

pursuant to 24 CFR Part 91 and 24 CFR §§ 903.7(o)(3) and 903.15.

Provide a description of how the PHA Plan's contents are consistent with the Consolidated Plan or
State Consolidated Plan.

I hereby certify that all the information stated herein, as well as any information provided in the accompaniment herewith, is true and accurate. Warning: HUD will prosecute false claims and statements. Conviction may result in criminal and/or civil penalties. (18 U.S.C. 1001, 1010, 1012; 31 U.S.C. 3729, 3802)

Name of Authorized Official: <u>José A. Meléndez Méndez</u>	Title: <u>Mayor Municipality of Fajardo</u>
Signature: 	Date: <u>03/30/2022</u>

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**Certification by State or Local Official of PHA Plans
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I, Edward O'Neill Rosa, the Mayor of the Municipality of Guaynabo
Official's Name *Official's Title*

certify that the 5-Year PHA Plan for fiscal years 2020-2025 and/or Annual PHA Plan for fiscal
year 2022 of the Puerto Rico Public Housing Administration is consistent with the
PHA Name

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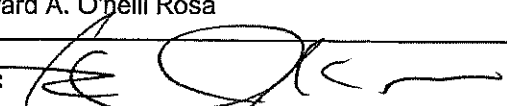
Guaynabo
Local Jurisdiction Name

pursuant to 24 CFR Part 91 and 24 CFR §§ 903.7(o)(3) and 903.15.

Provide a description of how the PHA Plan's contents are consistent with the Consolidated Plan or
State Consolidated Plan.

I have no objection to the Consolidated State Plan. The objective and goals of this plan address the housing
needs of the low-income population in Puerto Rico. Our housing programs have the same purpose.

I hereby certify that all the information stated herein, as well as any information provided in the accompaniment herewith, is true and accurate. Warning: HUD will
prosecute false claims and statements. Conviction may result in criminal and/or civil penalties. (18 U.S.C. 1001, 1010, 1012; 31 U.S.C. 3729, 3802)

Name of Authorized Official: Edward A. O'Neill Rosa	Title: Mayor
Signature: 	Date: march 30, 2022

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**Certification by State or Local Official of PHA Plans
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I, Miguel E. Méndez Pérez, the Mayor of the Municipality of Isabela
Official's Name *Official's Title*

certify that the 5-Year PHA Plan for fiscal years 2020-2025 and/or Annual PHA Plan for fiscal
year 2022 of the Puerto Rico Public Housing Administration is consistent with the
PHA Name

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Isabela

Local Jurisdiction Name

pursuant to 24 CFR Part 91 and 24 CFR §§ 903.7(o)(3) and 903.15.

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Name of Authorized Official: <u>Miguel E. Méndez Pérez</u>	Title: <u>Mayor</u>
Signature: <u>Miguel E. Méndez Pérez</u>	Date: <u>March 24 / 2022</u>

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**Certification by State or Local Official of PHA Plans
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I, William Miranda Torres, the Mayor of the Municipality of Caguas
Official's Name *Official's Title*

certify that the 5-Year PHA Plan for fiscal years 2020-2025 and/or Annual PHA Plan for fiscal
year 2022 of the Puerto Rico Public Housing Administration is consistent with the
PHA Name


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Caguas
Local Jurisdiction Name

pursuant to 24 CFR Part 91 and 24 CFR §§ 903.7(o)(3) and 903.15.

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Name of Authorized Official:	Title:
Signature: 	Date:

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I, Aida Gracia Rivera, the CDBG State Program Director
Official's Name *Official's Title*

certify that the 5-Year PHA Plan for fiscal years 2020-2024 and/or Annual PHA Plan for
fiscal year 2022 of the Puerto Rico Public Housing Administration is consistent with the
PHA Name


Consolidated Plan or State Consolidated Plan including the Analysis of Impediments (AI) to Fair
Housing Choice or Assessment of Fair Housing (AFH) as applicable to the

CDBG State Program
Local Jurisdiction Name

pursuant to 24 CFR Part 91 and 24 CFR §§ 903.7(o)(3) and 903.15.

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Name of Authorized Official: Aida Gracia Rivera	Title: CDBG State Program Director
Signature: 	Date: April 18, 2022

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