# PHAPlans5YearPlanforFiscalYears2002-2006AnnualPlanforFiscalYear2002

NOTE:THISPHAPLANSTEMPLATE(HUD50075)ISTOBE COMPLETEDIN ACCORDANCEWITHINSTRUCTIONSLOCATEDINAPPLICABLEPIHNOTICES

> HUD50075 OMBApprovalNo:2577 -0226 Expires:03/31/2002

### PHAPlan AgencyIdentification

PHAName: RustonHousingAuthority

PHANumber: LA054

PHAFiscalYearBeginning:(mm/yyyy) 07/2002

### **PublicAccesstoInformation**

# Informationregardinganyactivitiesoutlinedinthisplancanbeobtainedby contacting:(selectallthatapply)

- MainadministrativeofficeofthePHA
  - ] PHAdevelopmentmanagementoffices
  - PHAlocaloffices

### **DisplayLocationsForPHAPlansandSupportingDocuments**

ThePHAPlans(includingattachments)areavailableforpublicinspectionat:(selectall thatapply)

- MainadministrativeofficeofthePHA
  - PHAdevelopmentmanagementoffices
  - ] PHAlocaloffices
  - Mainadministrativeofficeofthelocalgovernment
  - MainadministrativeofficeoftheCountygovernment
  - Mainadministra tiveofficeoftheStategovernment
  - Publiclibrary
  - PHAwebsite
  - Other(listbelow)

PHAPlanSupportingDocumentsareavailableforinspectionat:(selectallthatapply)

- Mainbusin essofficeofthePHA
  - PHAdevelopmentmanagementoffices
  - Other(listbelow)

### 5-YEAR PLAN PHAF ISCAL YEARS 2002 -2006 [24CFRPart903.5]

### A.Mission

StatethePHA'smissionforservingtheneedsoflow -income,very lowincome,andextremelylow incomefamiliesinthePHA'sjurisdiction.(selectoneofthechoicesbelow)

ThemissionofthePHAisthesameasthatoftheDepartmentofHousingand UrbanDevelopment:Topromoteadequateandaffordabl ehousing,economic opportunityandasuitablelivingenvironmentfreefromdiscrimination.

ThePHA'smissionis:(statemissionhere)

The mission of the Housing Authority of the City of Rustonis to assist low income families with saf e, decent, and affordable housing opportunities as they strive to achieve self -sufficiency and improve the quality of their lives. The Housing Authority is committed to operating in an efficient, ethical, and professional manner. The Housing Authority will create and maintain partnerships with its clients and appropriate community agencies in order to accomplish this mission .

### **B.Goals**

ThegoalsandobjectiveslistedbelowarederivedfromHUD'sstrategicGoalsandObjectivesandthose emphasizedinrecent legislation.PHAsmayselectanyofthesegoalsandobjectivesastheirown,or identifyothergoalsand/orobjectives.WhetherselectingtheHUD -suggestedobjectivesortheirown, PHASARESTRONGLYEN COURAGEDTOIDENTIFY QUANTIFIABLEMEASUR ESOF SUCCESSINREACHINGTHEIR OBJECTIVESOVERTHE COURSEOFTHE5YEAR S. (Quantifiablemeasureswouldincludetargetssuchas:numbersoffamiliesservedorPHASscores achieved.)PHAsshouldidentifythesemeasuresinthespacestotherightoforbelowthestated objectives.

# HUDStrategicGoal:Increase the availability of decent, safe, and affordable housing.

PHAG	oal:Expandthesupplyofassistedhousing
Object	ives:
	Applyforadditionalrentalvouchers:
$\boxtimes$	Reducepublichousingvacancies:
	Leverageprivateorotherpublicfundstocreateadditionalhousing
	opportunities:
$\boxtimes$	Acquireorbuildunitsordevelopments
	Other(listbelow)

PHAGoal:Improvethequalityofassistedhousing
Objectives:

- Improvepublichousingmanagement:(PHASscore)
- Improvevouchermanagement:(SEMAPscore)
- Increasecustomersatisfaction:

Concentrateoneffortstoimprovespecificmanagementfunctions:

- (list;e.g.,publ ichousingfinance;voucherunitinspections)
- Renovateormodernizepublichousingunits:

Demolishordisposeofobsoletepublichousing:

Providereplacementpublichousing:

Providere placementvouchers:

Other:(listbelow)

PHAGoal:Increaseassistedhousingchoices Objectives:

Providevouchermobilityco unseling:

- Conductoutreacheffortstopotentialvoucherlandlords
- Increasevoucherpaymentstandards

Implementvoucherhomeownershipprogram:

Implementpublichousingorotherhomeow nershipprograms:

- Implementpublichousingsite -basedwaitinglists:
- Convertpublichousingtovouchers:
- ] Other:(listbelow)

### HUDStrategicGoal:Improvecommunityqualityoflifeandeconomicvita lity

- PHAGoal:Provideanimprovedlivingenvironment Objectives:
  - Implementmeasurestodeconcentratepovertybybringinghigher incomepublichousinghouseholdsintolowerincomedevelopments:
  - Implementmeasurestopromoteincomemixinginpublichousingby assuringaccessforlowerincomefamiliesintohigherincome developments:
  - Implementpublichousingsecurityimprovements:
  - Designatedevelopmentsorbuildingsf orparticularresidentgroups (elderly,personswithdisabilities)
  - Other:(listbelow)

# $\label{eq:hubble} HUDS trategicGoal: Promoteself \qquad -sufficiency and asset development of families \\ and individuals \qquad - sufficiency and asset development of families \\ \end{tabular}$

PHAGoal:Promoteself -sufficiencyandassetdevelopmentofassisted households

**Objectives:** 

- $\bowtie$ Increase the number and percentage of employed persons in assisted families:
- Provideorattractsupportiveservicestoimproveassistancerecipients' employability:
- Provide or attract support ives ervices to increase independence for theelderlyorfamilieswithdisabilities.
- Other:(listbelow)

### HUDStrategicGoal:EnsureEqualOpportunityinHousingforallAmericans

PHAGoal:Ensureequalopportunityandaffirmativelyfurtherfairhousing
Objectives:

Undertakeaffirmativemeasurestoensureaccesstoassistedhousing regardlessofrace, color, religionnational origin, sex, familial stat anddisability:

us,

- $\boxtimes$ Undertakeaffirmativemeasurestoprovideasuitableliving environmentforfamilieslivinginassistedhousing, regardless of race, color, religionnational origin, sex, familial status, and disability:
- Undertakeaffirmativemeasurestoensureaccessiblehousingtopersons withallvarietiesofdisabilitiesregardlessofunitsizerequired:
- Other:(listbelow)

### **OtherPHAGoalsandObjectives:**(listbelow)

### GeneralGoals:

TheRust onHousingAuthorityhasbothgeneralgoalsandmorespecificgoals andobjectives. The general goals are:

- 1. Increase the availability of decent, safe, and affordable housing.
- 2. Ensureequalopportunityinhouse.
- 3. Promoteself -sufficiencyandassetdevelopmen toffamiliesandindividuals.
- 4. Improvecommunityqualityoflifeandeconomicvitality.

### SpecificGoalsandObjectives:

Goal: ManagetheRustonHousingAuthority'sexistingpublichousingprograminan efficient and effective manner thereby qualif ying as at least a standard performer.

Objective: Whileweareveryconcernedabouttheaccuracyofthenew assessmentsystem,wearecommittedthatHUDshallcontinue torecognizetheRustonHousingAuthorityasahighperformer.

Goals: Enhancethema rketabilityoftheRustonHousingAuthority'spublichousing units.

Makepublichousingtheaffordablehousingofchoicefortheverylow -income residentsofourcommunity.

Objectives: TheRustonHousingAuthorityshallachievealevelofcustomer satisfactionthatgivestheagencythehighestscorepossiblein thiselementofthePublicHousingAssessmentSystem.In addition,enhancedmarketabilitywillbeevidencedinan increaseinourwaitinglist. TheRustonHousingAuthority shall remove all graffiti within 24 hours of discovering it by December31,2001.

> The Ruston Housing Authority shall achieve proper curbappeal for its public housing developments by improving its landscaping, keeping its grass cut, making the properties litter free and other actions by December 31,2001.

TheRustonHousingAuthorityshallbecomeamorecustomer - orientedorganization

Operate the Ruston Housing Authority in full compliance with all Equal Opportunity laws and regulations.

The Ruston Housing Authority shall ensure equal treatment of all applicants, residents, tenant -basedparticipants, employees, and vendors

- Objective: The Ruston Housing Authority shall mix its public housing development populations as much as possible with respect to ethnicity, race, and income.
- Goal: Ensure full compliance with all applicable standards and regulations including government generally accepted accounting practices.
  - Objectives: The Ruston Housing A uthority shall implement an effective anti-fraudprogrambyDecember31,2000.

The Ruston Housing Authority shall maintain its operating reserves to provide for a minimum of six months of operations betweennow and December 31,2004.

- Goal: Enhancethei mageofpublichousinginourcommunity.
  - Objectives: The Ruston Housing Authority's leadership shall speak to at leasttwocivic, religious or fraternal groups a year between now and December 31,2004, to explain how the housing authority is to the community.
- Goal: Improve economic opportunity (self -sufficiency) for the families and individualswhoresideinourhousing.
  - Objective: The Ruston Housing Authority shall assist its resident organizations in strengthening their organizations and helping themd eveloptheirownmissionstatement,goals,andobjectives byDecember31,2001

### AnnualPHAPlan PHAFiscalYear2002 [24CFRPart903.7]

### i. <u>AnnualPlanType:</u>

SelectwhichtypeofAnnualPlanthePHAwillsubmit.

StandardPlan

StreamlinedPlan:

- HighPerformingPHA
- SmallAgency(<250PublicHousingUnits)
- AdministeringSection8Only

### **TroubledAgencyPlan**

### ii. ExecutiveSummaryoftheAnnualPHAPlan

### [24C FRPart903.79(r)]

Provide a brief overview of the information in the Annual Plan, including highlights of major initiatives and the provided of the provided oand discretion ary policies the PHA has included in the Annual Plan.

### HUDnotice99 -51statesthatthisisoptional

### iii. AnnualPlan TableofContents

#### [24CFRPart903.79(r)]

ProvideatableofcontentsfortheAnnualPlan , including attachments, and a list of supporting documentsavailableforpublicinspection

### **TableofContents**

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### Attachments

Indicatewhichattachmentsareprovidedbyselectingallthatapply.Providetheattachment'sname (A, B, etc.) in the space to the left of the name of the attachment. Note: If the attachment is provided as a space of the s

 $\label{eq:separate} {\bf SEPARATE} files ubmission from the PHAP lansfile, provide the file name in parentheses in the space to the right of the title.$ 

RequiredAtta chments:

 $\boxtimes$ 

- AdmissionsPolicyforDeconcentration(ACOPla054a03)
- FY2002CapitalFundProgramAnnualStatement(la054b03)
  - Mostrecentboard -approvedoperatingbudget(RequiredAttachmentforPHAs thataretroubledoratriskofbeingdesignatedtroubledONLY)

**OptionalAttachments:** 

- **PHAManagementOrganizationalChart**
- FY2002CapitalFundProgram5YearActionPlan(la054b03)
- PublicHousingDrug EliminationProgram(PHDEP)Plan(la054c03)
- CommentsofResidentAdvisoryBoardorBoards(mustbeattachedifnot
  - includedinPHAPlantext)(inplantext)
- Other(Listbelow,providingeachattachmentname) DefinitionofSubstantialChange(la054d03)

### ${\small Supporting Documents Available for Review}$

Indicatewhichdocumentsareavailableforpublicreviewbyplacingamarkinthe"Applicable&On Display"columnintheappropriaterows.Alllisteddocumentsmustbeondi splayifapplicabletothe programactivitiesconductedbythePHA.

	ListofSupportingDocumentsAvailableforReview				
Applicable & OnDisplay	SupportingDocument	ApplicablePlan Component			
X	PHAPlanCertificationsofCompliancewiththePHAPlans and RelatedRegulations	5YearandAnnualPlans			
Х	State/LocalGovernmentCertificationofConsistencywith theConsolidatedPlan	5YearandAnnualPlans			
X	FairHousingDocumentation: RecordsreflectingthatthePHAhasexamineditsprograms orproposedp rograms,identifiedanyimpedimentstofair housingchoiceinthoseprograms,addressedoris addressingthoseimpedimentsinareasonablefashioninview oftheresourcesavailable,andworkedorisworkingwith localjurisdictionstoimplementanyofth ejurisdictions' initiativestoaffirmativelyfurtherfairhousingthatrequire thePHA'sinvolvement.	5YearandAnnualPlans			
Х	ConsolidatedPlanforthejurisdiction/sinwhichthePHAis located(whichincludestheAnalysisofImpedimentstoFair HousingChoice(AI)))andanyadditionalbackupdatato supportstatementofhousingneedsinthejurisdiction	AnnualPlan: HousingNeeds			
X	Mostrecentboard -approvedoperatingbudgetforthepublic housingprogram	AnnualPlan: FinancialResources;			
Х	PublicHousingAdmissionsand(Continued)Occupancy	AnnualPlan:Eligibility,			

Applicable &	ListofSupportingDocumentsAvailableforR SupportingDocument	ApplicablePlan Component		
<u>OnDisplay</u>	Policy(A&O),whichincludestheTenantSelectionand AssignmentPlan[TSAP]	Selection,andAdmissions Policies		
NA	Section8AdministrativePlan	AnnualPlan:Eligibility, Selection,andAdmissions Policies		
X	PublicHousingDeconcentrationandIncomeMixingDocumentation:1. PHAboardcertificationsofcompliancewith deconcentrationrequirements(section16(a)oftheUS HousingActof1937,asimplementedinthe2/18/ 99 QualityHousingandWorkResponsibilityActInitial Guidance;Notice andanyfurtherHUDguidance)and2. Documentationoftherequireddeconcentrationand incomemixinganalysis	AnnualPlan:Eligibility, Selection,andAdmissions Policies		
X	Publichousingrent determinationpolicies, including the methodology for setting publichousing flatrents       Annual Plan: Rent         Determination       Checkhereifincluded in the publichousing         A&OPolicy       Annual Plan: Rent			
X	Scheduleofflatrentsofferedateachpublichousing development checkhereifincludedinthepublichousing A&OPolicy	AnnualPlan:Rent Determination		
NA	Section8rentdetermination(paymentstandard)policies CheckhereifincludedinSection8 AdministrativePl an	AnnualPlan:Rent Determination		
X	Publichousingmanagementandmaintenancepolicy documents,includingpoliciesforthepreventionor eradicationofpestinfestation(includingcockroach infestation)	AnnualPlan:Operations andMaintenance		
Х	Publichousinggrievanceprocedures Checkhereifincludedinthepublichousing A&OPolicy	AnnualPlan:Grievance Procedures		
NA	Section8informalreviewandhearingprocedures CheckhereifincludedinSection8 AdministrativePlan	AnnualPlan:Grievance Procedures		
Х	TheHUD -approvedCapitalFund/ComprehensiveGrant ProgramAnnualStatement(HUD52837)fortheactivegrant year	AnnualPlan:CapitalNeeds		
NA	MostrecentCIAPBudget/ProgressReport(HUD52825)for anyactiveCIAPgrant	AnnualPlan:CapitalNeeds		
X	Mostrecent,approved5YearActionPlanfortheCapitalAnnualPlan:CapitalNeedsFund/ComprehensiveGrantProgram,ifnotincludedasan attachment(providedatPHAoption)AnnualPlan:CapitalNeeds			
NA	ApprovedHOPEVIapplic ationsor, if more recent, approvedor submitted HOPEVIRevitalization Plansor any	AnnualPlan:CapitalNeeds		

Applicable & OnDisplay	SupportingDocument	ApplicablePlan Component
10	otherapprovedproposalfordevelopmentofpublichousing	
NA	Approvedorsubmittedapplicationsfordemolitionand/or dispositionofpublich ousing	AnnualPlan:Demolition andDisposition
NA	Approvedorsubmittedapplicationsfordesignationofpublic housing(DesignatedHousingPlans)	AnnualPlan:Designationof PublicHousing
NA	Approvedorsubmittedassessmentsofreasonable revitalizationofpublichousingandapprovedorsubmitted conversionplanspreparedpursuanttosection2020fthe 1996HUDAppropriationsAct	AnnualPlan:Conversionof PublicHousing
NA	Approvedorsubmittedpublichousinghomeownership programs/plans	AnnualPl an: Homeownership
NA	PoliciesgoverninganySection8Homeownershipprogram checkhereifincludedintheSection8 AdministrativePlan	AnnualPlan: Homeownership
NA	AnycooperativeagreementbetweenthePHAandtheTANF agency	AnnualPlan:Community Service&Self -Sufficiency
NA	FSSActionPlan/sforpublichousingand/orSection8	AnnualPlan:Community Service&Self -Sufficiency
NA	Mostrecentself -sufficiency(ED/SS,TOPorROSSorother residentservicesgrant)grantprogr amreports	AnnualPlan:Community Service&Self -Sufficiency
X	ThemostrecentPublicHousingDrugEliminationProgram (PHEDEP)semi -annualperformancereportforanyopen grantandmostrecentlysubmittedPHDEPapplication (PHDEPPlan)	AnnualPlan:S afetyand CrimePrevention
X	ThemostrecentfiscalyearauditofthePHAconducted undersection5(h)(2)oftheU.S.HousingActof1937(42U. S.C.1437c(h)),theresultsofthatauditandthePHA's responsetoanyfindings	AnnualPlan:AnnualAudit
NA	TroubledPHAs:MOA/RecoveryPlan	TroubledPHAs
Х	Othersupportingdocuments(optional) PublicHousingLease	(specifyasneeded)

### 1.StatementofHousingNeeds

[24CFRPart903.79(a)]

### A.HousingNeedsofFamiliesintheJurisdiction/sServe dbythePHA

BasedupontheinformationcontainedintheConsolidatedPlan/sapplicabletothejurisdiction,and/or otherdataavailabletothePHA,provideastatementofthehousingneedsinthejurisdictionby completingthefollowingtable.Inthe"Ove rall"Needscolumn,providetheestimatednumberofrenter familiesthathavehousingneeds.Fortheremainingcharacteristics,ratetheimpactofthatfactoronthe housingneedsforeachfamilytype,from1to5,with1being"noimpact"and5being "severeimpact." UseN/AtoindicatethatnoinformationisavailableuponwhichthePHAcanmakethisassessment.

	Housing	NeedsofF	amiliesin	theJurisdi	ction		
	byFamilyType						
FamilyType	Overall	Afford- ability	Supply	Quality	Access- ibility	Size	Loca- tion
Income<=30% of AMI	866	5	3	3	1	2	2
Income>30%but <=50%ofAMI	370	4	3	3	1	2	2
Income>50%but <80%ofAMI	221	4	3	3	1	2	2
Elderly	161	3	1	1	1	1	1
Familieswith Disabilities	Not avail						
White	534	4	3	3	4	2	4
Black	317	4	3	3	1	2	3
Hispanic	0						
Other	206	4	3	3	3	2	3

What sources of information did the PHA use to conduct this analysis? (Check all that apply; all materials must be made available for public inspection.)

	ConsolidatedPlanoftheJurisdiction/s
	Indicateyear:
$\boxtimes$	U.S.Censusdata:theComprehensiveHousingAffordabilityStrategy
	("CHAS")dataset
	AmericanHousingSurveydata
	Indicateyear:
	Otherhousingmar ketstudy
	Indicateyear:
	Othersources:(listandindicateyearofinformation)

### B. HousingNeedsofFamiliesonthePublicHousingandSection8 Tenant-BasedAssistanceWaitingLists

Statethehousingneedsoft hefamiliesonthePHA'swaitinglist/s .Completeonetableforeachtype ofPHA -widewaitinglistadministeredbythePHA. PHAsmayprovideseparatetablesforsite - basedorsub -jurisdictionalpublichousingwaitinglistsattheiroption.

H	IousingNee dsofFan	niliesontheWaitingList	t
Waitinglisttype:(select	ctone)		
Section8tenant	-basedassistance		
PublicHousing			
	8andPublicHousing		
		urisdictionalwaitinglist(	optional)
	ywhichdevelopment/s		
	#offamilies	%oftotalfamilies	AnnualTurnover
Waitinglisttotal	119		117
Extremelylow	90	76	
income<=30%AMI			
Verylowinco me	25	21	
(>30%but<=50%			
AMI)			
Lowincome	4	3	
(>50%but<80%			
AMI)			
Familieswith	64	54	
children			
Elderlyfamilies	22	18	
Familieswith	4	3	
Disabilities			
AfricanAmerican	89	75	
White	30	25	
Race/ethnicity			
Race/ethnicity			
Characteristicsby			
BedroomSize			
(PublicHousing			
Only)			
1BR	61	51	59
2BR	38	32	38
3BR	18	15	18
4BR	2	3	3

H	lousingNee dsofFamili	esontheWaitingList		
5BR				
5+BR				
Isthewaitinglistclosed	Isthewaitinglistclosed(selectone)?			
Ifyes:				
Howlonghasit	beenclosed(#ofmonths)	?		
DoesthePHAexpecttoreopenthelistinthePHAPlanyear?				
DoesthePHApermitspecificcategoriesoffamiliesontothewaitinglist, even if				
generallyclose	ed? No Yes			

### C.StrategyforAddressingNeeds

ProvideabriefdescriptionofthePHA'sstrategyforaddressingthehousingneedsoffamiliesinthe jurisdictionandonthewaitinglist **INTHEUPCOMINGYEAR**, and the Agency's reasons for choosing this strategy.

### (1)Strategies

### Need:Shortageofaffordablehousingforalleligiblepopulations

# Strategy 1. Maximize the number of affordable units available to the PHA within its current resources by:

Selectallthatapply

$\boxtimes$	Employeffectivemai ntenanceandmanagementpoliciestominimizethe
	numberofpublichousingunitsoff -line
$\boxtimes$	Reduceturnovertimeforvacatedpublichousingunits
	Reducetimetorenovatepublichousingunits
	Seekreplacem entofpublichousingunitslosttotheinventorythroughmixed
	financedevelopment
	Seekreplacementofpublichousingunitslosttotheinventorythroughsection
	8replacementhousingresources
	Maintainorincreasesec tion8lease -upratesbyestablishingpaymentstandards
	thatwillenablefamiliestorentthroughoutthejurisdiction
$\bowtie$	Undertakemeasurestoensureaccesstoaffordablehousingamongfamilies
	assistedbythePHA, regardless of unitsizere quired
	Maintainorincreasesection8lease -upratesbymarketingtheprogramto
	owners, particularly those outside of a reasof minority and poverty
	concentration
	Maintainorincreasesection8lease -upratesbyeffectiv elyscreeningSection8
	applicantstoincreaseowneracceptanceofprogram
	ParticipateintheConsolidatedPlandevelopmentprocesstoensure
	coordinationwithbroadercommunitystrategies

### Other(listbelow)

### **Strategy2: Increase the number of affordable housing units by:** Selectall that apply

Applyforadditionalsection8unitsshouldtheybecomeavailable
 Leverageaffordablehousingresourcesinthecommunitythroughthecreation ofmixed -financehousing
 PursuehousingresourcesotherthanpublichousingorSection8tenant -based assistance.
 Other:(listbelow)

### Need:SpecificFamilyTypes:Familiesatorbelow30%ofmedian

### **Strategy1: Targetavailableassistancetofamiliesatorbelow30%ofAMI** Selectallthatapply

	Exceed HUD federal targeting requirements for families at or below 30% of
	AMIinpublichousing
	ExceedHUDfederaltargetingrequir ementsforfamiliesatorbelow30% of
	AMIintenant -basedsection8assistance
	Employadmissionspreferencesaimedatfamilieswitheconomichardships
$\boxtimes$	Adoptrentpoliciestosupportandencouragework
	Other:(listbelow)

### Need:SpecificFamilyTypes:Familiesatorbelow50%ofmedian

**Strategy1:Targetavailableassistanceto** familiesatorbelow50%ofAMI Selectallthatapply

$\boxtimes$	
$\boxtimes$	

Employadmissionspreferencesaimedatfamilieswho areworking Adoptrentpoliciestosupportandencouragework Other:(listbelow)

### Need:SpecificFamilyTypes:TheElderly

**Strategy1: Targetavailableassistancetotheelderly:** Selectallthatapply

Seekdesignationofpublichousingfortheelderly

Applyforspecial -purposevoucherstargetedtotheelderly,shouldtheybecome available

Other:(listbelow)

### Need:SpecificFamilyTypes:FamilieswithDisab ilities

**Strategy1: TargetavailableassistancetoFamilieswithDisabilities:** Selectallthatapply

Seekdesignationofpublichousingforfamilieswithdisabilities Carryoutthemodificationsneededinpublichous ingbasedonthesection504 NeedsAssessmentforPublicHousing

Applyforspecial -purposevoucherstargetedtofamilieswithdisabilities, shouldtheybecomeavailable

Affirmativelymarkettolocalnon -profitagenciest hatassistfamilieswith disabilities

Other:(listbelow)

Need:SpecificFamilyTypes:Racesorethnicitieswithdisproportionatehousing needs

# Strategy1:IncreaseawarenessofPHAresourcesamongfamiliesofracesand ethnicitiesw ithdisproportionateneeds:

Selectifapplicable

Affirmativelymarkettoraces/ethnicitiesshowntohavedisproportionate housingneeds

Other:(listbelow)

Strategy2:Conductactivitiestoaffirmativelyfurtherfair	housing
Selectallthatapply	

Counselsection 8 tenants as to location of units outside of a reasof poverty or
minorityconcentrationandassistthemtolocatethoseunits

Marketthesection8programtoownersoutside of areasof poverty/minority concentrations

Other:(listbelow)

### OtherHousingNeeds&Strategies:(listneedsandstrategiesbelow)

(2)ReasonsforSelectingStrategies	
Ofthefactorslistedbelow, selectall that influenced the PHA 'sselection of the	
strategiesitwillpursue:	

 $\overline{\boxtimes}$ 

Fundingconstraints

Staffingconstraints

- Limitedavailabilityofsitesforassistedhousing
- Extenttowhichparticularhousingneedsare metbyotherorganizationsinthe community

 $\label{eq:constraint} Evidence of housing needs as demonstrated in the Consolidated Plan and other information available to the PHA$ 

- InfluenceofthehousingmarketonPHAprograms
- Communityprioritiesregardinghousingassistance
- Resultsofconsultationwithlocalorstategovernment
- Results of consultation with residents and the Resident Advisory Board
- Resultsofconsultation withadvocacygroups

Other:(listbelow)

 $\label{eq:limitedavailability of financial resources for development$ 

### 2. StatementofFinancialResources

[24CFRPart903.79(b)]

ListthefinancialresourcesthatareanticipatedtobeavailabletotheP HAforthesupportofFederal publichousingandtenant -basedSection8assistanceprogramsadministeredbythePHAduringthePlan year.Note:thetableassumesthatFederalpublichousingortenantbasedSection8assistancegrant fundsareexpendedo neligiblepurposes;therefore,usesofthesefundsneednotbestated.Forother funds,indicatetheuseforthosefundsasoneofthefollowingcategories:publichousingoperations, publichousingcapitalimprovements,publichousingsafety/security,p ublichousingsupportiveservices, Section8tenant -basedassistance,Section8supportiveservicesorother.

FinancialResources: PlannedSourcesandUses			
Sources	Sources Planned\$ PlannedUses		
1. FederalGrants(FY2002grants)			
a) PublicHousingOperati ngFund	698,517		
b) PublicHousingCapitalFund	542,715		
c) HOPEVIRevitalization			
d) HOPEVIDemolition			
e) AnnualContributionsforSection			
8Tenant -BasedAssistance			
f) PublicHousingDrugElimination	0.00		
Program(includinganyTechnical			
Assistancefunds)			
g) ResidentOpportunityandSelf -			
SufficiencyGrants			

FinancialResources: PlannedSourcesandUses		
Sources	Planned\$	PlannedUses
h) CommunityDevelopmentBlock		
Grant		
i) HOME		
OtherFederalGrants(listbelow)		
2.PriorYearFederalGrants (unobligatedfundsonly)(list below)		
99COMP;00CFP;01CFP	734,394	Modernization
99;00;01PHDEP	118,944	Drugelimination
3.PublicHousingDwellingRental Income		
	598,395	
4.Otherincome (listbelow)		
interest	19,767	operations
Maintenancecharges	24,000	operations
Mgtfee	24,000	MgtofFarmerville
4.Non -federal sources (listbelow)		
Totalresources	\$1,519,500	

# **<u>3.PHAPoliciesGoverningEligibility,Selection,andAdmissions</u>** [24CFRPart903.79(c)]

### **A.PublicHousing**

Exemptions: PHAs that do not administer public housing are not 3A.

requiredtocompletesubcomponent

### (1)Eligibility

a.WhendoesthePHAverifyeligibilityforadmissiontopublichousing?(selectall	
thatapply)	
Whenfamiliesarewithinacertainnumberofbeingofferedaunit:(state number)	
Whenfamiliesarewithinacertaintimeofbeingofferedaunit:(statetime)Other:(describe)	
Whentheynearthetopofthewaitinglist	
<ul> <li>b.Whichnon -income(screening)factorsdoesthePHAusetoestablisheligibility admissiontopublichousing(selectallthatapply)?</li> <li>CriminalorDrug -relatedactivity</li> <li>Rentalhistory</li> <li>Housekeeping</li> <li>Other(describe)</li> </ul>	for
c. Xes No :DoesthePHArequestcriminalrecordsfromlocallaw enforcementagenciesforscreeningpurposes?	
d. Yes No:DoesthePHArequestcriminalrecordsfromStatelaw enforcementagenciesforscreeningpurposes?	
e. Yes No:DoesthePHAaccessFBIcriminalrecordsfromtheFBIfor screeningpurposes?(eitherdirectlyorthroughanNCIC authorizedsource)	

### (2)WaitingListOrganization

a.WhichmethodsdoesthePHAplantousetoo	rganizeitspublichousingwaitinglist
(selectallthatapply)	

- Community-widelist
- Sub-jurisdictionallists
- Site-basedwaitinglists
- Other(describe)

b.Wheremayinterestedpersons applyforadmissiontopublichousing?

- PHAmainadministrativeoffice
  - PHAdevelopmentsitemanagementoffice
    - Other(listbelow)

c.IfthePHAplanstooperateoneormoresite -basedwaitinglistsi nthecomingyear, answereachofthefollowingquestions;ifnot,skiptosubsection (3)Assignment

1. Howmanysite -basedwaitinglistswillthePHAoperateinthecoming year?

2. Yes	No:Areany	orallofthePHA'ssite	-basedwaitinglistsne	ewforthe
	upcom	ingyear(thatis,theyaren	otpartofapreviously	-HUD-
	approv	redsitebasedwaitinglistp	olan)?	
	Ifyes,h	owmanylists?		

- 3. Yes No: Mayfamiliesbeonmorethanonelistsimultaneously Ifyes, how many lists?
- 4. Where can interested persons obtain more information about and sign up to be on the site -based waiting lists (select all that apply)?



- PHAmainadministrativeoffice AllPHAdevelopmentmanagementoffices
- Managementofficesatdevelopmentswithsite -basedwaitinglists
- Atthedevelopmenttowhichtheywouldliketoapply
- Other(listbelow)

### (3)Assignment

a. How many vacant unit choices are applicants or dinarily given before they fall to the bottom of or are removed from the waiting list? (selectone)

- One
  - Two

ThreeorMore

b. Xes No:Isthispolicyconsistent acrossallwaiting list types?

c.Ifanswertobisno,listvariationsforanyotherthantheprimarypublichousing waitinglist/sforthePHA:

### (4)AdmissionsPrefere nces

a.Incometargeting:

Yes No:DoesthePHAplantoexceedthefederaltargetingrequirementsby targetingmorethan40% of all new admission stopublic housing tof amilies at or below 30% of median area income?

b.Transferpolicies:

Inwhatcircumstanceswilltransferstakeprecedenceovernewadmissions?(list below)

Emergencies
Overhoused
Underhoused
Medicaljustification
AdministrativereasonsdeterminedbythePHA(e.g.,topermitmodernization work)
Residentchoice:(statecircumstancesbelow)
Other:(listbelow)

c. Preferences

1. Xes No:Has thePHAestablishedpreferencesforadmissiontopublic housing(otherthandateandtimeofapplication)?(If"no"is selected, skiptosubsection (5)Occupancy)

2. WhichofthefollowingadmissionpreferencesdoesthePHAplantoemployinthe comingyear ?(selectallthatapplyfromeitherformerFederalpreferencesorother preferences)

FormerFederalpreferences:

- InvoluntaryDisplacement(Disaster,GovernmentAction,ActionofHousing Owner, Inaccessibility, Property Disposition)
- Victimsofdomesticviolence
- Substandardhousing
- Homelessness
  - Highrentburden(rentis>50percentofincome)

Otherpreferences:(selectbelow)

- Workingfamiliesand thoseunabletoworkbecauseofageordisability
- Veteransandveterans' families
- Residentswholiveand/orworkinthejurisdiction
  - Those enrolled currently ineducational, training, or upward mobil ityprograms
  - Householdsthatcontributetomeetingincomegoals(broadrangeofincomes)
  - Householdsthatcontributetomeetingincomerequirements(targeting)
  - Those previously enrolled ineducational, training, or upward mobility programs
  - Victimsofreprisalsorhatecrimes
  - Otherpreference(s)(listbelow)

3. If the PHA will employ admission spreferences, please prioritize by placing a "1" in thespacethatreprese ntsyourfirstpriority,a"2"intheboxrepresentingyoursecond priority, and soon. If you give equal weight to one or more of these choices (either

throughanabsolutehierarchyorthroughapointsystem), placethesamenumbernext toeach. Thatm eansyou can use "1" more than once, "2" more than once, etc.

DateandTime

FormerFederalpreferences:

InvoluntaryDisplacement(Disaster,GovernmentAction,ActionofHousing Owner,Inaccessibility,PropertyDisposition) Victimsofdomesticviolence Substandardhousing Homelessness Highrentburden

Otherpreferences(selectallthatapply)

Workingfamiliesandthoseunabletoworkbecauseofageordisability(1)

Veteransandve terans' families

- Residentswholiveand/orworkinthejurisdiction
- Thoseenrolledcurrentlyineducational,training,orupwardmobilityprograms
- Householdsthatcontributetomeetingincomegoals(br oadrangeofincomes)
- Householdsthatcontributetomeetingincomerequirements(targeting)
- ] Thosepreviouslyenrolledineducational,training,orupwardmobility programs
- Victimsofreprisalsorha tecrimes
- Otherpreference(s)(listbelow)

4.Relationshipofpreferencestoincometargetingrequirements:

- ThePHAappliespreferenceswithinincometiers
- Notapplicable:thepoolofappli cantfamiliesensuresthatthePHAwillmeet incometargetingrequirements

### (5)Occupancy

 $\overline{\square}$ 

a. What reference materials can applicants and resident sus eto obtain information

\_abouttherulesofoccupancyofpublichousing(selectallthatapply)

- ThePHA -residentlease
- ThePHA'sAdmissionsand(Continued)Occupancypolicy
- PHAbriefingseminarsorwrittenmaterials
- Othersource(list)

b. How of ten must resident snotify the PHA of chan

	(selectallthatapply)
	Atanannualreexaminationandleaserenewal
7	

Anytimefamilycompositionchanges

- Atfamilyrequestforrevision
- Other(list)

### (6)DeconcentrationandIncomeMixing

- a. Xes No:DidthePHA'sanalysisofitsfamily(generaloccupancy) developmentstodetermineconcentrationsofpovertyindicatethe needformeasurestopromotedeconcentrationof povertyor incomemixing?
- b. Yes No:DidthePHAadoptanychangestoits **admissionspolicies** based ontheresultsoftherequiredanalysisoftheneedtopromote deconcentrationofpovertyortoassureincomemixing ?

c.If the answer to bwasyes, what changes we read opted? (select all that apply)

### Adoptionofsite -basedwaitinglists Ifselected,listtargeteddevelopmentsbelow:

- Employingwaitinglist"skipping"toachievedeco ncentrationofpovertyor incomemixinggoalsattargeteddevelopments Ifselected,listtargeteddevelopmentsbelow:
- Employingnewadmissionpreferencesattargeteddevelopments Ifselected,listtargeteddevelopmentsbelow:
- Other(listpoliciesanddevelopmentstargetedbelow)
- d. Xes No:DidthePHAadoptanychangesto **other**policiesbasedonthe resultsoftherequiredanalysisoftheneedfordeconcentration ofpovertyand incomemixing?

e.If the answer to dwasyes, how would you describe these changes? (select all that apply)

	Ad
$\square$	Act

- Additionalaffirmativemarketing
- Actionstoimprovethemarketabilityofcertaindevelopments
- Adoptionoradjustmentofceilingrentsforcertaindevelopments
  - Adoptionofrentincentivestoencouragedeconcentrationofpovertyand income-mixing
- ] Other(listbelow)

f.Basedontheresultsoftherequiredana lysis,inwhichdevelopmentswillthePHA -incomefamilies?(selectallthatapply)

Notapplicable:resultsofanalysisdidnotindicateaneedforsuchefforts

List(any applicable)developmentsbelow:

### 54-3Eastwood

g.Basedontheresultsoftherequiredanalysis,inwhichdevelopmentswillthePHA makespecialeffortstoassureaccessforlower -incomefamilies?(selectallthatapply)

 $\square$ 

Notapplicable: resultsofanalysisdidnotindicateaneedforsuchefforts List(anyapplicable)developmentsbelow:

54-1Greenwood

### **B.Section8**

Exemptions: PHAsthatdonotadministersection8arenotrequiredtocompletesub	-component3B.					
Unlessotherwisespecified, all questions in this section apply only to the tenant	-basedsection8					
assistanceprogram(vouchers,anduntilcompletelymergedintothevoucherprogram,						
certificates).						

### (1)Eligibility

a.Wha	tisthee	exten	tofsci	reeningc	ond	u	ctedby	thePI	HA?(	sele	ctal	lthat	tapply)	
	$\alpha$ .	• •	1	1.	1 . •	• .	11			•	11	1		

regulation	

- Criminalanddrug -relatedactivity,moreextensivelythanrequiredbylawor regulation
- Moregeneralscreeningthancriminalanddrug -relatedactivity(listfactors below)
- Other(listbelow)

b. Yes No:DoesthePHArequestcriminalrecordsfromlocallawenforcement agenciesforscreeningpurposes?

c. Yes No:DoesthePHArequestcriminalrecordsfromStatelaw enforcementagenciesforscreeningpurposes?
d. Yes No:DoesthePHAaccessFBIcrimi nalrecordsfromtheFBIfor screeningpurposes?(eitherdirectlyorthroughanNCIC - authorizedsource)
<ul> <li>e.Indicatewhatkindsofinformationyousharewithprospectivelandlords?(selectall thatapply)</li> <li>Criminalordrug -relatedactivit y</li> <li>Other(describebelow)</li> </ul>
(2)WaitingListOrganization         a.Withwhichofthefollowingprogramwaitinglistsisthesection8tenant       -based         assistancewaitinglistmerged?(selectallthatapply)       -based         None       Federalpublichousing         Federalpublichousing       Federalmoderaterehabilitation         Federalproject -basedcertificateprogram       Otherfederalorlocalprogram(listbelow)
<ul> <li>b.Wheremayinterestedpersonsapplyforadmissiontosec tion8tenant- based assistance?(selectallthatapply)</li> <li>PHAmainadministrativeoffice</li> <li>Other(listbelow)</li> </ul>

### (3)SearchTime

a. Yes No:DoesthePHAgiveextensionsonstandard6 0-dayperiodto searchforaunit?

Ifyes, state circumstances below:

### (4)AdmissionsPreferences

a.Incometargeting

Yes No:DoesthePHAplantoexceedthefederaltargetingrequirementsby targetingmorethan 75% of all new admission stothesection8 programtof amilies at or below 30% of median area income?
b.Preferences
1. Yes No:HasthePHAestablishedpreferencesforadmissiontosection8 tenant-basedassistance?( otherthandateandtimeof application)(ifno,skiptosubcomponent (5)Specialpurpose section8assistanceprograms )
2.WhichofthefollowingadmissionpreferencesdoesthePHAplantoemployinthe comingyear?(selectallthatapplyfromeither preferences) formerFederalpreferencesorother
FormerFederalpreferences
InvoluntaryDisplacement(Disaster,GovernmentAction,ActionofHousing Owner,Inaccessibility,PropertyDisposition)
Victimsofdomesticvi olence
Substandardhousing
Homelessness
Highrentburden(rentis>50percentofincome)
Otherpreferences(selectallthatapply)
WorkingfamiliesandthoseunabletoworkbecauseofageordisabilityVeteransandveterans'families
Residentswholiveand/orworkinyourjurisdiction
Thoseenrolledcurrentlyineducational,training,orupwardmobilityprograms
Householdsthatcontributetomeetingincomegoals(broadrangeofincomes)
Householdsthatcontributetomeetingincomerequirements(targeting)
Thosepreviouslyenrolledineducational,training,orupwardmobility
programs
Victimsofreprisalsorhatecrimes
Otherpreference(s)(listbelow)
3.IfthePHAwillemployadmissionspreferences,pleaseprioritizebyplacinga"1"in thespacethatrepresentsyourfirstpriority, a"2"intheboxrepresentingyour

thespacethatrepresentsyourfirstpriority, a "2"intheboxrepresentingyour secondpriority,andsoon.Ifyougiveequalweighttooneormoreofthese choices(eitherthroughanabsolutehierarchyorthroughapointsystem),placethe samenumbernexttoeach.Thatmeansyoucanuse"1"m orethanonce,"2"more thanonce,etc.

DateandTime

FormerFederalpreferences

InvoluntaryDisplacement(Disaster,GovernmentAction,ActionofHousing Owner,Inaccessibility,PropertyDisposition)

Victimsofdomesticviolence

Substandardhousing

Homelessness

Highrentburden

Otherpreferences(selectallthatapply)

- Workingfamiliesandthoseunabletoworkbecauseofageordisability
- Veteransandveterans' families
- Residentswholiveand/orworkinyourjurisdiction
- Thoseenrolledcurrentlyineducational,training,orupwardmobilityprograms
- Householdsthatcontributetomeetingincomegoals(broadrangeofincom
- Householdsthatcontributetomeetingincomerequirements(targeting)
  - Thosepreviouslyenrolledineducational,training,orupwardmobility programs
- ] Victimsofreprisalsorhatecrimes
  - Otherpreference(s)(listbelow)

4. Among applicants on the waiting list with equal preference status, how are

applicantsselected?(selectone)

- Dateandtimeofapplication
  - Drawing(lottery)orotherrand omchoicetechnique
- 5. If the PHA planstoem ploy preferences for "residents who live and/or work in the jurisdiction" (selectone)

ThispreferencehaspreviouslybeenreviewedandapprovedbyHUD

ThePHArequestsa pprovalforthispreferencethroughthisPHAPlan

1	D - 1 -	4	-1-:-	<b>f</b>	f	encestoir		+ •				1 -	
6	Reia	t10n	ch11	notn	reter	encectoir	ncomet	aroetin	orea	illirer	nenteri	COLO	ectones
U.1	NUIA	uon	SILL	JUID	IUIUI	CHECSION	ICOMUCI	arecun	IZIUU	IUIICI	nonto.v	SUIC	
				· · ·					0				,

ThePHAappliespreferenceswithinincometiers

Notapplicable:thepoolofapplicant familiesensuresthatthePHAwillmeet incometargetingrequirements

### (5)SpecialPurposeSection8AssistancePrograms

es)

a.Inwhichdocumentsorotherreferencematerialsarethepoliciesgoverning eligibility,selection,andadmissionstoanyspecia l-purposesection8program administeredbythePHAcontained?(selectallthatapply)

- TheSection8AdministrativePlan
- Briefingsessionsandwrittenmaterials

Other(listbelow)

- b. HowdoesthePHAanno uncetheavailabilityofanyspecial -purposesection8 programstothepublic?
  - Throughpublishednotices
  - Other(listbelow)

### 4.PHARentDeterminationPolicies

[24CFRPart903.79(d)]

### A.PublicHousing

Exemptions:PHAsthatdonotadministerpublichousingarenotrequiredtocompletesub -component 4A.

### (1)IncomeBasedRentPolicies

DescribethePHA'sincomebasedrentsettingpolicy/iesforpublichousingusing,including discretionary(thatis,notrequire dbystatuteorregulation)incomedisregardsandexclusions,inthe appropriatespacesbelow.

a.Useofdiscretionarypolicies:(selectone)

ThePHAwillnotemployanydiscretionaryrent -settingpoliciesforincome basedrentinpubl ichousing.Income -basedrentsaresetatthehigherof30% ofadjustedmonthlyincome,10% of unadjusted monthlyincome, the welfare rent, orminimumrent (less HUD mandatory deductions and exclusions). (If selected, skiptosub -component (2))

---or---

ThePHAemploysdiscretionarypoliciesfordeterminingincomebasedrent(If selected,continuetoquestionb.)

b.MinimumRent

	\$0
	\$1-\$25
$\mathbf{X}$	\$26-\$50

2. Yes	No:HasthePHAadoptedanydiscretionaryminimumrenthardship
	exemptionpolicies?

3.Ifyestoquestio	n2.listthesep	oliciesbelow	:
Surgestoquestio	m_,moteneoep		•

- c. Rentssetatlessthan30%thanadjus tedincome
- 1. Yes No:DoesthePHAplantochargerentsatafixedamountor percentagelessthan30% of adjusted income?
- 2. If yesto above, list the amounts or percentages charged and the circumstances under which these will be used below:

d.Whichofthediscretionary(optional)deductionsand/orexclusionspoliciesdoesthe	e
PHAplantoemploy(selectallthatapply)	

1	1 2 1		11.0/		
Fortheea	rnedincon	neofapre	viouslyune	mployedhous	eholdmember

- Forincreasesinearnedincome
  - Fixedamount(otherthangeneralrent -settingpolicy) Ifyes,stateamount/sandcircumstancesbelow:
- Fixedpercentage(otherthangeneralrent -settingpolicy) Ifyes,st atepercentage/sandcircumstancesbelow:

Forhouseholdheads	

- Forotherfamilymembers
- \_\_\_\_\_Fortransportationexpenses
- Forthenon -reimbursedmedicalexpensesofnon -disabledornon -elderly families
- \_\_\_\_ Other(describebelow)

e.Ceilingrents

1. Doyouhaveceilingrents?(rentssetatalevellowerthan30%ofadjustedincome) (selectone)



Yesforalldevelopments Yesbutonlyfor somedevelopments No

2. Forwhichkindsofdevelopmentsareceilingrentsinplace?(selectallthatapply)

Foralldevelopments	
Forallgeneraloccupancydevelopments(notelderlyordisabledoreld	erly
only)	
Forspecifiedgeneraloccupancydevelopments	
Forcertainpartsofdevelopments; e.g., the high -riseportion	
Forcertainsizeunits; e.g., largerbedroomsizes	
Other(listbe low)	

- 3. Selectthespaceorspacesthatbestdescribehowyouarriveatceilingrents(select allthatapply)
- Marketcomparabilitystudy
   Fairmarketrents(FMR)
   95<sup>th</sup>percentilerents
   75percentofoperatingcosts
   100percentofoperatingcostsforgeneraloccupancy(family)developments
   Operatingcostsplusdebtservice
   The"rentalvalue"oftheunit
   Other(list below)

f.Rentre -determinations:

1.Betweenincomereexaminations, how often must ten ants report changes in income or family composition to the PHA such that the changes result in an adjustment to rent? (select all that apply)

	Never
	Atfamilyoption
$\ge$	Anytimethefamilyexperiencesanincomeincrease
	Anytimeafamilyexperiencesanincomeincreaseaboveathresholdamountor
	percentage:(ifselected,specifythreshold)
	Other(listbelow)

g. Yes No:DoesthePHAplantoimplementindividualsavingsaccountsfor residents(ISAs)asanalternativetotherequired12month disallowanceofearnedincomeandphasinginof rentincreases inthenextyear?

### (2)FlatRents

- 1. Insettingthemarket -basedflatrents,whatsourcesofinformationdidthePHAuse toestablishcomparability?(selectallthatapply.)
  - Thesection8rentreasonablenessstudyofc omparablehousing
  - Surveyofrentslistedinlocalnewspaper
  - Surveyofsimilarunassistedunitsintheneighborhood
  - Other(list/describebelow)

### **B.Section8Tenant** -BasedAssistance

Exemptions:PHA sthatdonotadministerSection8tenant -basedassistancearenotrequiredto completesub -component4B. Unlessotherwisespecified,allquestionsinthissectionapplyonlyto thetenant -basedsection8assistanceprogram(vouchers,anduntilcompletely mergedintothe voucherprogram,certificates).

### (1)PaymentStandards

Describethevoucherpaymentstandardsandpolicies

a. What is the PHA's payments tandard? (select the category that best describes your standard)

- Atorabove90% butbelow100% of FMR 100% of FMR Above100% but ator below110% of FMR
  - Above100% butatorbelow 110% of FMR
  - Above110% of FMR (if HUD approved; describe circumstances below)

b.IfthepaymentstandardislowerthanFMR,whyhasthePH Aselectedthis standard?(selectallthatapply)

- FMRsareadequatetoensuresuccessamongassistedfamiliesinthePHA's segmentoftheFMRarea
- ThePHAhaschosentoserveadditionalfamiliesbyloweringthepayment standard

	Reflectsmarketorsubmarket	
	Other(listbelow)	
	paymentstandardishigherthanFMR,why ectallthatapply)	hasthePHAchosenthislevel?
	FMRsarenotadequatetoensuresucce segmentoftheFMRarea	ssamongassistedfamiliesinthePHA's
	Reflectsmarketorsubmarket Toincreasehousingoptionsforfamilies Other(listbelow)	
d.How	oftenarepaymentstandardsreevaluate Annually Other(listbelow)	dforadequacy?(selectone)
	tfactorswillthePHAconsiderinitsassess dard?(selectallthatapply)	nentoftheadequacyofitspayment

- Successratesofass istedfamilies
- Rentburdensofassistedfamilies
- Other(listbelow)

### (2)MinimumRent

a.WhatamountbestreflectsthePHA'sminimumrent?(selectone)

\$0
\$1-\$25
\$26-\$50

b. Yes	No:HasthePHAadoptedanydiscretionaryminimumrenthardship
	exemptionpolicies?(ifyes,listbelow)

# **5.OperationsandManagementexempt** [24CFRPart903.79(e)]

 $Exemptions from Component \ 5: High performing and small PHAs are not required to complete this$ section.Section8onlyPHAsmustcompletepartsA,B,andC(2)

### A.PHAManagementStructure

Describe the PHA's management structure and organization.

### (selectone)

- AnorganizationchartshowingthePHA'smanagementstructureand organizationisattached.
  - AbriefdescriptionofthemanagementstructureandorganizationofthePHA follows:

### **B.HUDProgramsUnderPHAManagement**

ListFederalprogramsa dministeredbythePHA,numberoffamiliesservedatthebeginningofthe upcomingfiscalyear,andexpectedturnoverineach.(Use"NA"toindicatethatthePHAdoesnot operateanyoftheprogramslistedbelow.)

ProgramName	UnitsorFamilies	Expected
	Serveda tYear	Turnover
	Beginning	
PublicHousing		
Section8Vouchers		
Section8Certificates		
Section8ModRehab		
SpecialPurposeSection		
8Certificates/Vouchers		
(listindividually)		
PublicHousingDrug		
EliminationProgram		
(PHDEP)		
OtherFederal		
Programs(list		
individually)		

### C.ManagementandMaintenancePolicies

ListthePHA'spublichousingmanagementandmaintenancepolicydocuments,manualsandhandbooks thatcontaintheAgency'srules,standards,andpoliciesthatgo vernmaintenanceandmanagementof publichousing,includingadescriptionofanymeasuresnecessaryforthepreventionoreradicationof pestinfestation(whichincludescockroachinfestation)andthepoliciesgoverningSection8 management.

(1)Public HousingMaintenanceandManagement:(listbelow)

(2)Section8Management:(listbelow)

### 6. <u>PHAGrievanceProcedures(exempt)</u>

[24CFRPart903.79(f)]

Exemptionsfromcomponent6:HighperformingPHAsarenotrequiredtocompletecomponent6. Section8 -OnlyPHAsareexemptfromsub -component6A.

### A. PublicHousing

1. Yes No:HasthePHAestablishedanywrittengrievanceproceduresin additiontofederalrequirementsfoundat24CFRPart966, SubpartB,forresident sofpublichousing?

Ifyes, list additions to federal requirements below:

2. Which PHA offices hould residents or applicant stopublic housing contact to initiate the PHA grievance process? (select all that apply)

- PHAmainadministratveoffice
- PHAdevelopmentmanagementoffices
- Other(listbelow)

### B.Section8Tenant -BasedAssistance

1. Yes No:HasthePHAestablishedinformalreviewproceduresforapplicants totheSection8tenant -basedassistanceprogramandinformal hearingproceduresforfamiliesassistedbytheSection8tenant basedassistanceprograminadditiontofederalrequirements foundat24CFR982?

Ifyes,listadditionstofederalrequiremen tsbelow:

2. Which PHA offices hould applicants or assisted families contact to initiate the informal review and informal hearing processes? (select all that apply)

- PHAmainadministrativeoffice
- Other(listbelow)

### 7.CapitalImprovementNeeds

$$\label{eq:generation} \begin{split} & [24 CFRPart 903.79(g)] \\ & Exemptions from Component 7: Section 8 only PHAs are not required to complete this component and may skip to Component 8. \end{split}$$

### A.CapitalFundActivities

Exemptions from sub -component 7A: PHAs that will not participate in the Capital Fund Programmay skip to component 7B. All other PHAs must complete 7A as instructed.

### (1)CapitalFundProgramAnnualStatement

UsingpartsI,II,andIIIoftheAnnualStatementfortheCapitalFundProgr am(CFP),identifycapital activitiesthePHAisproposingfortheupcomingyeartoensurelong -termphysicalandsocialviability ofitspublichousingdevelopments.ThisstatementcanbecompletedbyusingtheCFPAnnual Statementtablesprovidedinthe tablelibraryattheendofthePHAPlantemplate **OR**,atthePHA's option,bycompletingandattachingaproperlyupdatedHUD -52837.

### Selectone:

TheCapitalFun	${ m dProgram} Annual Statement is provided as an attachment to$
thePHAPlana	tAttachment(statename)la054b03

-or-

 $\boxtimes$ 

TheCapitalFundProgramAnnualStatementisprovidedbelow:(ifselected, copytheCFPAnnualStatementfromtheTableLibraryandinserthere)

### (2)Optional5 -YearActionPlan

Agenciesaree ncouragedtoincludea5 -YearActionPlancoveringcapitalworkitems.Thisstatement canbecompletedbyusingthe5YearActionPlantableprovidedinthetablelibraryattheendofthe PHAPlantemplate **OR**bycompletingandattachingaproperlyupdated HUD -52834.

a. Xes No:IsthePHAprovidinganoptional5 -YearActionPlanforthe CapitalFund?(ifno,skiptosub -component7B)

b.Ifyestoquestiona, selectone:

TheCapitalFundProgram5 -YearActionPlanisprovidedasanattachmentto thePHAPlanatAttachment(statenamela054b03

-or-
------

TheCapitalFundProgram5 -YearActionPlanisprovidedbelow:(ifselected, copytheCFPoptional5YearActionPlanfromtheTable Libraryandinsert here)

### **B.HOPEVIandPublicHousingDevelopmentandReplacement** Activities(Non -CapitalFund)

Applicabilityofsub -component7B:AllPHAsadministeringpublichousing.Identifyanyapproved HOPEVIand/orpublichousingdevelopmen torreplacementactivitiesnotdescribedintheCapitalFund ProgramAnnualStatement.

Yes	No:a)HasthePHAreceivedaHOPEVIrevitalizationgrant?(ifno, skiptoquestionc;ifyes,provideresponsestoque stionbfor eachgrant,copyingandcompletingasmanytimesasnecessary) b)StatusofHOPEVIrevitalizationgrant(completeonesetof questionsforeachgrant)
	<ul> <li>1.Developmentname:</li> <li>2.Development(project)number:</li> <li>3.Statusofgrant:(selectthestate mentthatbestdescribesthecurrent status) <ul> <li>RevitalizationPlanunderdevelopment</li> <li>RevitalizationPlansubmitted,pendingapproval</li> <li>RevitalizationPlanapproved</li> <li>Activitiespursuantto anapprovedRevitalizationPlan underway</li> </ul> </li> </ul>
Yes	No:c)DoesthePHAplantoapplyforaHOPEVIRevitalizationgrant inthePlanyear? Ifyes,listdevelopmentname/sbelow:
Yes	No:d)WillthePHAbeengaginginanymixed -financedevelopment activitiesforpublichousinginthePlanyear? Ifyes,listdevelopmentsoractivitiesbelow:
Yes	No:e)WillthePHAbeconductinganyot herpublichousing developmentorreplacementactivitiesnotdiscussedinthe CapitalFundProgramAnnualStatement? Ifyes,listdevelopmentsoractivitiesbelow:

### 8. DemolitionandDisposition

[24CFRPart903.79(h)] Applicabilityofcomponent8:Sect ion8onlyPHAsarenotrequiredtocompletethissection.

1. Yes No: DoesthePHAplantoconductanydemolitionordisposition activities(pursuanttosection18oftheU.S.HousingActof 1937(42U.S.C.1437p)) intheplanFiscalYear?(If"No", skiptocomponent9;if"yes",completeoneactivitydescription foreachdevelopment.)

2. Activity Description

Yes No: HasthePHAprovidedtheactivitiesdescriptioninformat ionin the **optional**PublicHousingAssetManagementTable?(If "yes",skiptocomponent9.If"No",completetheActivity Descriptiontablebelow.)

Demolition/DispositionActivityDescription				
1a.Developmentname:				
1b.Development(project)number:				
2.A ctivitytype:Demolition				
Disposition				
3.Applicationstatus(selectone)				
Approved				
Submitted, pending approval				
Plannedapplication				
4.Dateapplicationapproved, submitted, or planned for submission: (DD/MM/YY)				
5.Numberofunitsaffected:				
6.Coverageofaction(selectone)				
Partofthedevelopment				
Totaldevelopment				
7.Timelineforactivity:				
a.Actualorprojectedstartdateofactivity:				
b.Projectedenddateofactivity:				

### 9. DesignationofPub licHousingforOccupancybyElderlyFamilies orFamilieswithDisabilitiesorElderlyFamiliesandFamilieswith Disabilities

[24CFRPart903.79(i)]

Exemptions from Component9; Section 8 only PHAs are not required to complete this section.

1. $\Box$ Yes $\boxtimes$ No:	HasthePHAdesignatedorappliedforapprovaltodesignateor				
	does the PHA planto apply to design at easy public housing for				
	occupancyonlybytheelderlyfamiliesoronlybyfamilieswith				
	disabilities, orbyel derly families and families with disabilities				
	orwillapplyfordesignationforoccupancybyonlyelderly				
	familiesoronly families with disabilities, or by elderly families				
	and families with disabilities as provided by section 7 of the				
	U.S.HousingActof 1937(42U.S.C.1437e)intheupcoming				
	fiscalyear? (If "No", skiptocomponent 10. If "yes", complete				
	oneactivitydescriptionforeachdevelopment, unless the PHA is				
	eligibletocompleteastreamlinedsubmission;PHAs				
	completingstreamlinedsubmissio nsmayskiptocomponent				
	10.)				

2.ActivityDescription

No:

Yes
-----

HasthePHAprovidedallrequiredactivitydescription informationforthiscomponentinthe **optional**PublicHousing AssetManagementTable?If"yes",s kiptocomponent10.If "No",completetheActivityDescriptiontablebelow .

DesignationofPublicHousingActivityDescription
1a.Developmentname:
1b.Development(project)number:
2.Designationtype:
Occupancybyonlytheelderly
Occupancybyfamilieswithdisabilities
Occupancybyonlyelderlyfamiliesandfamilieswithdisabilities
3.Applicationstatus(selectone)
Approved;includedinthePHA'sDesignationPlan
Submitted, pending approval
Plannedapplication
4.Datethisdesignationapproved, submitted, or planned for submission: (DD/MM/YY)
5.Ifapproved, will this designation constitute a (selectone)
NewDesignationPlan
Revisionofapreviously -approvedDesignationPlan?
6. Numberofunitsaffected:
7.Coverageofaction(selectone)
Partofthedevelopment
Totaldevelopmen t

### **10. ConversionofPublicHousingtoTenant** -BasedAssistance

[24CFRPart903.79(j)]

Exemptions from Component 10; Section 8 only PHAs are not required to complete this section.

#### A.AssessmentsofReasonableRevitalizationPursuanttosection2020f theHUD FY1996HUDAppropriationsAct

1. Yes No: HaveanyofthePHA'sdevelopmentsorportionsof developmentsbeenidentifiedbyHUDorthePHAascovered undersection2020ftheHUDFY1996HUDAppropriations Act?(If"No",skiptocomponent11;if"yes",completeone activitydescriptionforeachidentifieddevelopment,unless eligibletocompleteastreamlinedsubmission.PHAs completingstreamlinedsubmissionsmayskiptocomponent 11.)

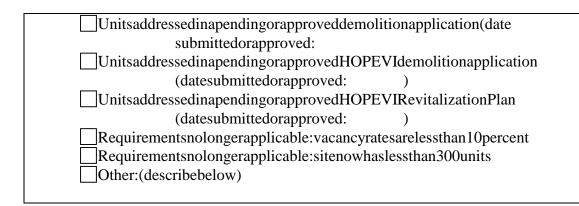
2.ActivityDescript ion

Yes No: Ha

HasthePHAprovidedallrequiredactivitydescription informationforthiscomponentinthe **optional**PublicHousing AssetManagementTable?If"yes",skiptocomponent11.If "No",completetheActivity Descriptiontablebelow.

ConversionofPublicHousingActivityDescription
1a.Developmentname:
1b.Development(project)number:
2. Whatisthestatusoftherequired assessment?
Assessmentunderway
Assessmentre sultssubmittedtoHUD
AssessmentresultsapprovedbyHUD(ifmarked,proceedtonext
question)
Other(explainbelow)
3. Yes No:IsaConversionPlanrequired?(Ifyes,gotobl ock4;ifno,goto
block5.)
4. Status of Conversion Plan (select the statement that best describes the current the statement of the st
status)
ConversionPlansubmittedtoHUDon:(DD/MM/YYYY)
ConversionPlanapprovedbyHUDon:(DD/MM/YYYY)
ActivitiespursuanttoHUD -approvedConversionPlanunderway
5. Description of how requirements of Section 202 are being satisfied by means other
thanconversion(selectone)

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B.ReservedforConversionspursuanttoSection22oftheU.S.HousingActof 1937

C.ReservedforConversionspursuanttoSec tion33oftheU.S.HousingActof 1937

### 11.HomeownershipProgramsAdministeredbythePHA

[24CFRPart903.79(k)]

### A.PublicHousing

ExemptionsfromComponent11A:Section8onlyPHAsarenotrequiredtocomplete11A.

1. □Y es ⊠No: DoesthePHAadministeranyhomeownershipprograms administeredbythePHAunderanapprovedsection5(h) homeownershipprogram(42U.S.C.1437c(h)),oranapproved HOPE Iprogram(42U.S.C.1437aaa)orhasthePHAappliedor plantoapplytoadministeranyhomeownershipprogramsunder section5(h),theHOPEIprogram,orsection32oftheU.S. HousingActof1937(42U.S.C.1437z -4).(If"No",skipto component11B;if"yes",completeoneactivitydescriptionfor eachapplicab leprogram/plan,unlesseligibletocompletea streamlinedsubmissiondueto **smallPHA** or **highperforming PHA**status.PHAscompletingstreamlinedsubmissionsmay skiptocomponent11B.) 2.ActivityDescription

YesN o:HasthePHAprovidedallrequiredactivitydescription<br/>informationforthiscomponentinthe **optional**PublicHousing<br/>AssetManagementTable?(If"yes",skiptocomponent12.If<br/>"No",completetheActivityDescriptiontablebelow.)

PublicHousingHome ownershipActivityDescription (Completeoneforeachdevelopmentaffected)				
1a.Developmentname:				
1b.Development(project)number:				
2.FederalProgramauthority:				
HOPEI				
5(h)				
TurnkeyIII				
Section32oftheUSHAof1937(effective10/1/99)				
3.Applicationstatus:(selectone)				
Approved; included in the PHA's Homeownership Plan/Program				
Submitted, pending approval				
Planneda pplication				
4.DateHomeownershipPlan/Programapproved, submitted, orplanned for submission:				
(DD/MM/YYYY)				
5. Numberofunitsaffected:				
6.Coverageofaction:(selectone)				
Partofthedevelopment				
Totaldevelopment				

### **B.Section8TenantBasedAssistance**

1. Yes No:

DoesthePHAplantoadministeraSection8Homeownership programpursuanttoSection8(y)oftheU.S.H.A.of1937,as implementedby24CFRp art982?(If"No",skiptocomponent 12;if"yes",describeeachprogramusingthetablebelow(copy andcompletequestionsforeachprogramidentified),unlessthe PHAiseligibletocompleteastreamlinedsubmissiondueto highperformerstatus. **HighperformingPHAs** mayskipto component12.)

2.ProgramDescription:

a.SizeofProgram

YesNo:WillthePHAlimitthenumberoffamiliesparticipatinginthe section8homeownershipoption?
If the answer to the question above wasyes, which statement best describes the number of participants ?(selectone) 25 or fewer participants 26 - 50 participants 51 to 100 participants more than 100 participants
<ul> <li>b.PHA -establishedeligibilitycriteria</li> <li>Yes No:WillthePHA'sprogramhaveeligibilitycriteriaforparticipationin itsSection8HomeownershipOptionprograminadditiontoHUD criteria?</li> <li>Ifyes,listcrit eriabelow:</li> </ul>
<b><u>12. PHACommunityServiceandSelf</u></b> -sufficiencyProgramsexempt [24CFRPart903.79(1)]
ExemptionsfromComponent12:HighperformingandsmallPHAsarenotrequiredtocompletethis component.Section8 -OnlyPHAsarenotrequiredtocomple tesub componentC.
A.PHACoordinationwiththeWelfare(TANF)Agency
1.Cooperativeagreements:
Yes No:HasthePHAhasenteredintoacooperativeagreementwiththe
TANFAgency,toshareinformationand/ortarge tsupportive

services(ascontemplatedbysection12(d)(7)oftheHousingAct of1937)?

If yes, what was the date that agreement was signed? <u>DD/MM/YY</u>

2. Other coordination efforts between the PHA and TANF agency (select all that

app	ly)
	Clientreferrals
	Informationsharingregardingmutualclients(forrentdeterminationsand
	otherwise)
	Coordinate the provision of specific social and self -sufficiency services and
	programstoeligiblefamilies
	Jointlyadministerprograms
	PartnertoadministeraHUDWelfare -to-Workvoucherprogram
	Jointadministrationofotherdemonstrationprogram

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#### Other(describe)

#### B. Servicesandprogramsoffere dtoresidentsandparticipants

#### (1)General

a.Self -SufficiencyPolicies

Which, if any of the following discretionary policies will the PHA employ to enhance the economic and social self -sufficiency of assisted families in the following areas? (select all that apply)

- Publichousingrentdeterminationpolicies
- Publichousingadmissionspolicies
- Section8admissionspolicies
- Preferenceinadmissiontosection8forcertainpublicho usingfamilies
- Preferencesforfamiliesworkingorengagingintrainingoreducation programsfornon -housingprogramsoperatedorcoordinatedbythe PHA
- Preference/eligibilityforpublichousinghomeownershipoption participation
  - Preference/eligibilityforsection8homeownershipoptionparticipation
- Otherpolicies(listbelow)

b.EconomicandSocialself -sufficiencyprograms

Yes No:

Doesthe PHAcoordinate,promoteorprovideany programstoenhancetheeconomicandsocialself sufficiencyofresidents?(If"yes",completethefollowing table;if"no"skiptosub -component2,FamilySelf SufficiencyPrograms.Thepositionofthetablemaybe alteredtofacilitateitsuse.)

ServicesandPrograms				
ProgramName&Description (includinglocation,ifappropriate)	Estimated Size	Allocation Method (waiting list/random selection/specific criteria/other)	Access (developmentoffice/ PHAmainoffi ce/ otherprovidername)	Eligibility (publichousingor section8 participantsor both)

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#### (2)FamilySelfSufficiencyprogram/s

a.ParticipationDescription

FamilySelfSufficiency(FSS)Par ticipation					
Program	RequiredNumberofParticipants	ActualNumberofParticipants			
	(startofFY2000Estimate)	(Asof:DD/MM/YY)			
PublicHousing					
Section8					

b. Yes No: If the PHA is not maintaining the minimum programs ize required by HUD, does the most recent FSS Action Planad dress the steps the PHA plans to take to achieve at least the minimum programs ize? If no, list steps the PHA will take below:

#### C.WelfareBenefitReductions

1. The PHA is complying with the statutory requirements of section 12(d) of the U.S.					
HousingActof1937(relatingtothetreatmentofincomechangesresultingfrom					
welfareprog	ramrequirements)by:(selectallt	thatapply)			
Adopti	ngappropriatechangestothePH	A'spublichousingrent	determination		
policies	sandtrainstafftocarryoutthosepo	olicies			
Inform	ingresidentsofnewpolicyonadm	nissionandreexamination	l		
Activel	ynotifyingresidentsofnewpolic	cyattimesinaddition	toadmissionand		
reexam	ination.				
Establi	shingorpursuingacooperativeag	greementwithallappropri	ateTANF		
agencie	esregardingtheexchangeofinfor	mationandcoordinationo	ofservices		
Establi	shingaprotocolforexchange o	ofinformationwithallappr	opriateTANF		
agencie	es				

D. Reserved for Community Service Requirement pursuant to section 12 (c) of the section 12 (c) and the section 1
theU.S.HousingActof1937

### 13.PHASafetyandCrimePreventionMeasures

[24CFRP art903.79(m)]	
ExemptionsfromComponent13:HighperformingandsmallPHAs	notparticipatinginPHDEPand
Section8OnlyPHAsmayskiptocomponent15.HighPerformingan	dsmallPHAsthatare
participatinginPHDEPandaresubmittingaPHDEPPlanwith	thisPHAPlanmayskiptosub
componentD.	

### ${\bf A. Need for measures to ensure the safety of public housing residents}$

1.Desc	cribetheneedformeasurestoensurethesa	fetyofpublichousingresidents
(sel	ectallthatapply)	
	Highincid enceofviolentand/ordrug	-relatedcrimeinsomeorallofthePHA's
	developments	
	Highincidenceofviolentand/ordrug	-relatedcrimeintheareassurroundingor
	adjacenttothePHA'sdevelopments	
$\boxtimes$	Residentsfearfulfor theirsafetyand/	orthesafetyoftheirchildren
$\boxtimes$	Observedlower -levelcrime, vandalist	mand/orgraffiti
	Peopleonwaitinglistunwillingtomove	eintooneormoredevelopmentsdueto
	perceivedand/oractuallevelsofviole	ntand/ordrug -relatedcrime
	Other(describebelow)	-

2. What information or data did the PHA used to determine the need for PHA actions to improve safety of residents (select all that apply).

	Safetyandsecuritysurve yofresidents
	Analysisofcrimestatisticsovertimeforcrimescommitted"inandaround"
	publichousingauthority
	Analysisofcosttrendsovertimeforrepairofvandalismandremovalofgraffiti
$\ge$	Residentreports
$\ge$	PHAemployeereports
$\ge$	Policereports
	Demonstrable, quantifiable success with previous orongoing anticrime/anti
	drugprograms
	Other(describebelow)

3.Whichdevelopment saremostaffected?(listbelow) Eastwood

# $\label{eq:B.CrimeandDrugPreventionactivities the PHA has under taken or plans to under take in the next PHA fiscal year$

1.ListthecrimepreventionactivitiesthePHAhasundertakenorplanstoundertake: (selecta llthatapply)

- Contracting without side and/or resident or ganizations for the provision of crime-and/ordrug prevention activities
- CrimePreventionThroughEnvironmentalDesign
  - Activitiestargetedtoa t-riskyouth,adults,orseniors
  - VolunteerResidentPatrol/BlockWatchersProgram

Other(describebelow)

2.Whichdevelopmentsaremostaffected?(listbelow) Eastwood

### C.CoordinationbetweenPHAandthepolice

1. Describe the coordination between the PHA and the appropriate police precincts for carrying outcrime prevention measures and activities: (select all that apply)

$\boxtimes$	Policeinvolvementindevelopment, implementation, and/orongoing evaluation of drug -elimination plan
	Policeprovidecrimedatatohousingauthoritystaffforanalysisandaction
	Policehaveestablishedaphysicalpresenceonhousingauthorityproperty(e.g.,
	communitypolicingoffice,offic erinresidence)
$\boxtimes$	Policeregularlytestifyinandotherwisesupportevictioncases
	PoliceregularlymeetwiththePHAmanagementandresidents
$\boxtimes$	AgreementbetweenPHA and local lawenforcement agency for provision of
	above-baselinelawenforcementservices
	Otheractivities(listbelow)
2.Whic	hdevelopmentsaremostaffected?(listbelow)

Eastwood

### D.AdditionalinformationasrequiredbyPHDEP/PHDEPPlan

PHAseligibleforFY2000PH DEPfundsmustprovideaPHDEPPlanmeetingspecifiedrequirements priortoreceiptofPHDEPfunds.

Yes	No:IsthePHAeligibletoparticipateinthePHDEPinthefiscalyear
	coveredbythisPHAPlan?
Yes	No:HasthePHAincludedthePHDEPPlanforFY2001inthisPHA
	Plan?
Yes	No:ThisPHDEPPlanisanAttachment.(AttachmentFilename:
	1a054c03)

### **14.RESERVEDFORPETPOLICY**

[24CFRPart90 3.79(n)]

### 15.CivilRightsCertifications

[24CFRPart903.79(o)]

Civil rights certifications are included in the PHAP lanCertifications of Compliance with the PHAP lans and Related Regulations.

### 16.FiscalAudit

[24CFRPart903.79(p)]

1. Xes	No:Isth	ePHArequiredtohaveanauditconductedundersed	ction
	5	(h)(2)oftheU.S.HousingActof1937(42US.C.143	7c(h))?
		(Ifno,skiptocomponent17.)	
2. Xes	No:W	asthemostrecentfiscalauditsubmittedtoHUD?	
$3. \boxtimes Yes$	No:We	rethereanyfindingsastheresultofthataudit?	
4. Yes	No:	If there were any findings, do any remain unres	olved?
		Ifyes, how many unresolved findings remain?	
5. Yes	No:	Haveresponsestoanyunresolvedfindingsbeensu	ubmittedto
		HUD?	
		Ifnot,whenaretheydue(statebelow)?NA	

### 17.PHAAssetManagementexem pt

[24CFRPart903.79(q)]

 $\label{eq:component} Exemptions from component 17: Section 8 Only PHAs are not required to complete this component. \\ High performing and small PHAs are not required to complete this component. \\$ 

1. Yes	No:Is	thePHAengaginginanyactivitiesthatwillcontributetothe	
		long-termassetmanagementofitspublichou	singstock,
		includinghowtheAgencywillplanforlong	-termoperating,
		capitalinvestment, rehabilitation, modernization	ation, disposition, and

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otherne edsthathave **not**beenaddressedelsewhereinthisPHA Plan?

- 2. WhattypesofassetmanagementactivitieswillthePHAundertake?(selectallthat apply)
  - Notapplicable
  - Privatemanagement
    - Development-basedaccounting
  - Comprehensivestockassessment
  - Other:(listbelow)

3. Yes No:HasthePHAincludeddescriptionsofassetmanagementactivities inthoptional PublicHousingAssetMana gementTable?

### 18.OtherInformation

[24CFRPart903.79(r)]

### A.ResidentAdvisoryBoardRecommendations

1. Yes No:DidthePHAreceiveanycommentsonthePHAPlanfromthe ResidentAdvisoryBoard/s?

2.Ifye	s,thecommentsare:(ifcommentswerereceived,thePHA	MUST selectone)
	AttachedatAttachment(Filename)	
	Providedbelow:	

3.InwhatmannerdidthePHAaddressthosecomments?(selectallthat apply)

- Considered comments, but determined that no changes to the PHAP lanwere necessary.
- ThePHAchangedportionsofthePHAPlaninresponsetocomments Listchangesbelow:
- Other:(listbelow)

### B. Description of Election process for Resident son the PHAB oard

1. Yes No: DoesthePHAmeettheexemptioncriteriaprovidedsection 2(b)(2)oftheU.S.HousingActof1937?(Ifno,continueto question2;ifyes ,skiptosub -componentC.)

2. $\Box$ Yes $\boxtimes$ No:	WastheresidentwhoservesonthePHABoardelectedbythe
	residents?(Ifyes,continuetoquestion3;ifno,skiptosub
	componentC.)

3.DescriptionofResidentElectionP roce
---------------------------------------

a.Nominationofcandidatesforplaceontheballot:(selectallthatapply)

- Candidateswerenominatedbyresidentandassistedfamilyorganizations
- CandidatescouldbenominatedbyanyadultrecipientofPHAass istance
- Self-nomination:CandidatesregisteredwiththePHAandrequestedaplaceon ballot
- Other:(describe)

b.Eligiblecandidates:(selectone)

- AnyrecipientofPHAassistance
- AnyheadofhouseholdreceivingPHAassistance
- AnyadultrecipientofPHAassistance
- Anyadultmemberofaresidentorassistedfamilyorganization
  - Other(list)

c.Eligiblevoters:(selectallthatapp ly)

- AlladultrecipientsofPHAassistance(publichousingandsection8tenant basedassistance)
- RepresentativesofallPHAresidentandassistedfamilyorganizations Other(list)

### C.StatementofC onsistencywiththeConsolidatedPlan

For each applicable Consolidated Plan, make the following statement (copy questions as many times as necessary).

- 1. ConsolidatedPlanjurisdiction:StateofLouisiana
- 2. The PHA has taken the following steps to ensure consistency of this PHA Plan with the Consolidated Plan for the jurisdiction: (select all that apply)
- ThePHAhasbaseditsstatementofneedsoffamiliesinthejurisdictiononthe needsexpressedintheConsolidatedPlan/s.
- ThePHAhasparticipatedinanyconsultationprocessorganizedandofferedby theConsolidatedPlanagencyinthedevelopmentoftheConsolidatedPlan.
- ThePHAhasconsulted with the Consolidated Planagency during the development of this PHAP lan.

$\label{eq:constraint} Activities to be under taken by the PHA in the coming year are consistent with$
theinitiativescontained in the Consolidated Plan. (list below)

Other:(listbelow)

4.TheConsolidatedPlanoftheju risdictionsupportsthePHAPlanwiththefollowing actionsandcommitments:(describebelow)

WithoutprovidinganyspecificresourcesfortheRustonHousingAuthority,the StateConsolidatedPlanreaffirmstheimportantresourceallhousingauthorities provide.Inaddition,itcallsforadditionalhousingresources,especially transitionalhousing,permanenthousing,andsingleroomoccupancy.Ruston's limitedfinancialresourcesdemandthatthehousingauthoritybeespecially wiseintheirallocation. Therefore,thehousingauthorityisplanningtoconduct afeasibilitystudytodeterminethebestwaytoapproachthehousingneeds issue.

#### D.OtherInformationRequiredbyHUD

Use this section to provide any additional information requested by HUD.

### **Attachments**

Use this section to provide any additional attachments referenced in the Plans.

The(ACOP)	la054a03
2002CFPAnnualandFiveYearCapitalFundPlan	la054j03
DefinitionofSubstantialChange	la054d03
Performance&EvaluationReport19 98	la054e03
Performance&EvaluationReport1999	la054f03
Performance&EvaluationReport2000	la054g03
Performance&EvaluationReport2001	la054b03
DeconcentrationandIncomeMixiing	la054h03-Decon
ResidentAdvisoryBoard	la054i03-RAB

Ann	ualStatement/PerformanceandEvalua	ationReport			
Cap	italFundProgramandCapitalFundPro	gramReplacement	tHousingFactor(CF	P/CFPRHF)PartI:S	ummary
	ame:RUSTONHOUSINGAUTHORITY	GrantTypeandNumber	ttNo:LA48P054707 99	,	FederalFYofGrant: 1999
Or	ginalAnnualStatement ReserveforDisasters/Eme		ualStatement(revisionno:	)	
Per	formanceandEvaluationReportforPeriodEnding:12/	30/01	rformanceandEvaluationR	eport	
Line	SummarybyDevelopmentAccount	TotalE	stimatedCost	Tota	<b>ActualCost</b>
No.					
		Original	Revised	Obligated	Expended
1	Totalnon -CFPFunds				
2	1406Operations				
3	1408ManagementImprovements	50,000.00	23,720.33	23,720.33	17,998.21
4	1410Administration	34,000.00	34,000.00	34,000.00	31,056.65
5	1411Audit	1,000.00	1,000.00	1,000.00	500.00
6	1415LiquidatedDamages				
7	1430FeesandCosts	1,000.00	1,000.00	1,000.00	0.00
8	1440SiteAcquisition				
9	1450SiteImprovement	40,000.00	45,757.44	45,757.44	39,809.53
10	1460DwellingStructures	229,799.00	269,863.25	269,863.25	245,591.67
11	1465.1DwellingEquipment —Nonexpendable	13,000.00	8,297.58	8,297.58	8,297.58
12	1470NondwellingStructures	20,000.00	5,160.40	5,160.40	5,160.40
13	1475NondwellingEquipment	24,000.00	24,000.00	24,000.00	24,000.00
14	1485Demolitio n				
15	1490ReplacementReserve				
16	1492MovingtoWorkDemonstration				
17	1495.1RelocationCosts				
18	1499DevelopmentActivities				
19	1501CollaterizationorDebtService				
20	1502Contingency				
21	AmountofAnnualGrant:(sumof lines2 –20)	412,799.00	412,799.00	412,799	326,555.98
22	Amountofline21RelatedtoLBPActivities				
23	Amountofline21RelatedtoSection504compliance				
24	Amountofline21RelatedtoSecurity –SoftCosts				

	AnnualStatement/PerformanceandEvaluationReport CapitalFundProgramandCapitalFundProgramReplacementHousingFactor(CFP/CFPRHF)PartI:Summary									
PHAName:RUSTONHOUSINGAUTHORITY     GrantTypeandNumber     FederalFYofGra										
		CapitalFundProgramGrantNo ReplacementHousingFactorG			1999					
	zinal Annual Statemant Dagamatan Digastan / Emana		Statement(revisionno: )							
	ginalAnnualStatement <b>ReserveforDisasters/Emerg</b> formanceandEvaluationReportforPeriodEnding:12/30			4						
			rmanceandEvaluationRepor							
Line	SummarybyDevelopmentAccount	TotalEsti	matedCost	TotalAc	tualCost					
No.										
		Original	Revised	Obligated	Expended					
25	AmountofLine21Related toSecurity – HardCosts									
26	Amountofline21RelatedtoEnergyConservationMeasures									

### AnnualStatement/PerformanceandEvaluationReport CapitalFundProgramandCapitalFundProgramReplacementHousingFactor(CFP/CFPRHF) PartII:Supportin gPages

PHAName:RUSTO	NHOUSINGAUTHORITY		umber ramGrantNo:LA48 ingFactorGrantNo:	FederalFYofGrant: 1999				
Development Number Name/HA-Wide Activities	GeneralDescriptionofMajorWork Categories	Dev.AcctNo.	Quantity	TotalEstimatedCost		TotalActualCost		Statusof Work
				Original	Revised	Funds Obligated	Funds Expended	
HA-WIDE	ManagementDeficiencies	1408		12,000.00	11,162.93	11,162.93	5,440.81	
HA-WIDE	ComputerSoftware&Training	1408		3,000.00	533.20	533.20	533.20	
HA-WIDE	ModernizationCoordinator	1408		24,000.00	12,024.20	12,024.20	12,024.20	
`	ResidentInitiatives	1408		11,000.00	0.00	0.00	0.00	
HA-WIDE	ContractAdministration	1410		34,000.00	34,000.00	34,000.00	31,056.65	
HA-WIDE	Audit	1411		1,000.00	1,000.00	1,000.00	500.00	
HA-WIDE	FeesandCosts	1430		1,000.00	1,000.00	1,000.00	0.00	
LA-54-ALL	DwellingUnits:ForceAcct.Lab or& Materials	1460		137,287.05	205,764.90	205,764.90	135,636.06	
LA-54-ALL	Appliances	1465		13,000.00	8,297.58	8,297.58	8,297.58	
LA-54-ALL	SiteWideFacilities	1470		20,000.00	5,160.40	5,160.40	5,160.40	
LA-54-ALL	NondwellingEquipment	1475		24,000.00	24,000.00	24,000.00	24,000.00	
LA-54-1	Site:Landscaping	1450		40,000.00	45,757.44	45,757.44	39,809.53	
LA-54-1	Mechanical&Electrical	1460		5,000.00	5,000.00	5,000.00	5,000.00	
LA-54-1	DwellingUnits:ReplaceSewerLines/ SecurityScreenDoors	1460		25,000.00	2,114.40	2,114.40	2,114.40	
LA-54-2	DwellingUnits:RepairCeramic Tile/RepairCeilings/RefinishKit.Cabs	1460		27,927.00	19,500.00	19,500.00	19,500.00	
LA-54-3	DwellingUnits:Modernize	1460		38,000.00	37,483.95	37,483.95	37,483.95	

### AnnualStatement/PerformanceandEvaluationReport CapitalFundProgramandCapitalFundProgramReplacementHousingFactor(CFP/CFPRHF) PartII:Supportin gPages

PHAName:RUSTO	NHOUSINGAUTHORITY		<b>umber</b> ramGrantNo:LA48P singFactorGrantNo:	FederalFYofGrant: 1999				
Development Number Name/HA-Wide Activities	GeneralDescriptionofMajorWork Categories	Dev.AcctNo.	Quantity	TotalEstimatedCost		TotalAct	Statusof Work	
				Original	Revised	Funds Obligated	Funds Expended	

### AnnualStatement/PerformanceandEvaluationReport CapitalFundProgramandCapitalFundProgramReplacementHousingFactor(CFP/CFPRHF) PartIII:ImplementationSchedule

PHAName:RUSTONHOU	SING		Гур eandNuml				FederalFYofGrant:1999
AUTHORITY				No:LA48P0547079	19		
	-	Replace	ementHousingI	factorNo:			
DevelopmentNumber	AllFundObligated			A	llFundsExpended		ReasonsforRevisedTargetDates
Name/HA-Wide	(QuarterEndingDate)			(Q	uarterEndingDate)		
Activities	· · · · · · · · · · · · · · · · · · ·						
		Revised	Actual	Original	Revised	Actual	
ManagementDef.	06/01/01		06/30/01	03/01/02		12/31/01	
ComputerSoft.&Train	06/01/01		06/30/01	03/01/02		12/31/01	
Mod.Coordinator	06/01/01		06/30/01	03/01/02		12/31/01	
Res.Initiatives	06/01/01		06/30/01	03/01/02		12/31/01	
ContractAdm.	06/01/01		06/30/01	03/01/02		12/31/01	
Fees&Cost	06/01/01		06/30/01	03/01/02		12/31/01	

### AnnualStatement/PerformanceandEvaluationReport CapitalFundProgramandCapitalFundProgramReplacementHousingFactor(CFP/CFPRHF) PartIII:ImplementationSchedule

i ui tiittimpiemen							
PHAName:RUSTONHOU	SING		Typ eandNumb				FederalFYofGrant:1999
AUTHORITY				No:LA48P0547079	9		
		Replac	ementHousingF	FactorNo:			
DevelopmentNumber	AllF	undObligate	d	Al	lFundsExpended		ReasonsforRevisedTargetDates
Name/HA-Wide	(Quar	terEndingDa	te)	(Qu	arterEndingDate)	)	
Activities	(2						
		Revised	Actual	Original	Revised	Actual	
LA-54-ALLDwelling	06/01/01		06/30/01	03/01/02		12/31/01	
Units:ForceAcct.Labor							
&Material							
Site-WideFacilities	06/01/01		06/30/01	03/01/02		12/31/01	
NondwellingEquipment	06/01/01		06/30/01	03/01/02		12/31/01	
DwellingEquipment	06/01/01		06/30/01	03/01/02		12/31/01	
LA-54-1Site:	06/01/01		06/30/01	03/01/02		12/31/01	
Landscaping							
DwellingUnits	06/01/01		06/30/01	03/01/02		12/31/01	
LA-54-2DwellingUnits:	06/01/01		06/30/01	03/01/02		12/31/01	
NondwellingEquipment	06/01/01		06/30/01	03/01/02		12/31/01	
LA-54-3Dwelli ngUnits	06/01/01		06/30/01	03/01/02		12/31/01	

CapitalFundProgramTablesPage 7

## **CAPITALFUNDPROGRAMTABLESSTARTHERE**

Ann	AnnualStatement/PerformanceandEvaluationReport										
Cap	italFundProgramandCapitalFundProg	ramReplacementH	ousingFactor(CF	P/CFPRHF)PartI:S	ummary						
	ame:RUSTONHOUSINGAUTHORITY	GrantTypeandNumber CapitalFundProgramGrantNo		· · ·	FederalFYofGrant:						
		2001									
		ReplacementHousingFactorGr									
	ginalAnnualStatement ReserveforDisasters/Emerg		Statement(revisionno:	)							
-	PerformanceandEvaluationReportforPeriodEnding:12/31/01       FinalPerformanceandEvaluationReport         Line       SummarybyDevelopmentAccount       TotalEstimated Cost										
No.	SummarybyDevelopmentAccount	TotalEstin	liated Cost	Iotai	ActualCost						
110.		Original	Revised	Obligated	Expended						
1	Totalnon -CFPFunds										
2	1406Operations										
3	1408ManagementImprovements	50,000.00		0.00	0.00						
4	1410Administration	34,000.00		0.00	0.00						
5	1411Audit	1,000.00		0.00	0.00						
6	1415L iquidatedDamages										
7	1430FeesandCosts	1,000.00		0.00	0.00						
8	1440SiteAcquisition										
9	1450SiteImprovement	15,000.00		0.00	0.00						
10	1460DwellingStructures	403,715.00		0.00	0.00						
11	1465.1DwellingEquipment —Nonexpendable	13,000.00		0.00	0.00						
12	1470NondwellingStructures	10,000.00		0.00	0.00						
13	1475NondwellingEquipment	15,000.00		0.00	0.00						
14	1485Demolition										
15	1490ReplacementReserve										
16	1492MovingtoWorkDemonstration										
17	1495.1RelocationCosts										
18	1499Development Activities										
19	1501CollaterizationorDebtService										
20	1502Contingency										

Ann	AnnualStatement/PerformanceandEvaluationReport									
Capi	CapitalFundProgramandCapitalFundProgramReplacementHousingFactor(CFP/CFPRHF)PartI:Summary									
PHANa	ame:RUSTONHOUSINGAUTHORITY	GrantTypeandNumber CapitalFundProgramGrantNo ReplacementHousingFactorG			FederalFYofGrant: 2001					
	OriginalAnnualStatement ReserveforDisasters/Emergencies RevisedAnnualStatement(revisionno: )									
	formanceandEvaluationReportforPeriodEnding:12/31	/01 FinalPerforma	nceandEvaluationReport							
Line	SummarybyDevelopmentAccount	TotalEsti	mated Cost	TotalActualCost						
No.										
		Original	Revised	Obligated	Expended					
21	AmountofAnnualGrant:(sumoflines2 –20)	542,715.00		0.00	0.00					
22	Amountofline21RelatedtoLBPActivities									
23	Amountofline21RelatedtoSection504 compliance									
24	Amountofline21RelatedtoSecurity –SoftCosts									
25	AmountofLine21RelatedtoSecurity – HardCosts									
26	Amount of line 21 Related to Energy Conservation Measures									

### AnnualStatement/PerformanceandEvaluationReport CapitalFundProgramandCapitalFundProgramReplacementHousingFactor(CFP/CFPRHF) PartII:SupportingPages

PHAName:RUSTO	NHOUSINGAUTHORITY		amGrantNo:LA481		CapitalFundProgramGrantNo:LA48P05450101 Rep lacementHousingFactorGrantNo:				
Development Number Name/HA-Wide Activities	GeneralDescriptionofMajorWork Categories	Dev.AcctNo.	Quantity	TotalEstimatedCost		TotalActualCost		Statusof Work	
				Original	Revised	Funds Obligated	Funds Expended		
HA-WIDE	ManagementDeficiencies	1408		12,000.00	12,000.00	0.00	0.00		
HA-WIDE	ComputerSoftware&Training	1408		3,000.00	3,000.00	0.00	0.00		
HA-WIDE	ModernizationCoordinator	1408		24,000.00	24,000.00	0.00	0.00		
HA-WIDE	ResidentInitiatives	1408		11,000.00	11,000.00	0.00	0.00		
HA-WIDE	ContractAdministration	1410		34,000.00	34,000.00	0.00	0.00		
HA-WIDE	Audit	1411		1,000.00	1,000.00	0.00	0.00		
HA-WIDE	FeesandCosts	1430		1,000.00	1,000.00	0.00	0.00		
LA-54-ALL	DwellingUnits:ForceAcct.Labor& Materials	1460		147,997.00	0.00	0.00	0.00		
LA-54-ALL	Appliances	1465		13,000.00	13,000.00	0.00	0.00		
LA-54-ALL	SiteWideFacilities	1470		10,000.00	10,000.00	0.00	0.00		
LA-54-ALL	NondwellingEquipment	1475		15,000.00	15,000.00	0.00	0.00		
LA-54-1	Site:Landscaping	1450		15,000.00	15,000.00	0.00	0.00		
LA-54-1	Mechanical&Electrical	1460		127,343.00	0.00	0.00	0.00		
LA-54-1	DwellingUnits:	1460		25,000.00	0.00	0.00	0.00		
LA-54-2	DwellingUnits:	1460		27,000.00	0.00	0.00	0.00		
LA-54-2	Mechanical&Electrical:HVAC	1460		25,000.00	0.00	0.00	0.00		
LA-54-3	DwellingUnits:Modernize	1460		51,375.00	0.00	0.00	0.00		
LA-54-ALL	HVAC	1460		0.00	403,715.00	246,000.00			

### AnnualStatement/PerformanceandEvaluationReport CapitalFundProgramandCapitalFundProgramReplacementHousingFactor(CFP/CFPRHF) PartII:SupportingPages

PHAName:RUSTO	NHOUSINGAUTHORITY	<b>GrantTypeandN</b> CapitalFundProg	umber ramGrantNo:LA48P	05450101		FederalFYofGr	ant: 2001	
		Rep lacementHou	singFactorGrantNo:	00100101		2001		
Development Number Name/HA-Wide Activities	GeneralDescriptionofMajorWork Categories	Dev.AcctNo.	Quantity	TotalEstin	natedCost	TotalAct	Statusof Work	
				Original	Revised	Funds Obligated	Funds Expended	

### AnnualStatement/PerformanceandEvaluationReport CapitalFundProgramandCapitalFundProgramReplacementHousingFactor(CFP/CFPRHF) PartIII :ImplementationSchedule

PHAName:RUSTONHOU AUTHORITY	SING	Capita	GrantTypeandNumber CapitalFundProgramNo:LA48P05450101 ReplacementHousingFactorNo:				FederalFYofGrant:2001
Development Number Name/HA-Wide Activities		FundObligated rterEndingDat		AllFundsExpended (QuarterEndingDate)			ReasonsforRevisedTargetDates
		Revised	Actual	Original	Revised	Actual	
ManagementDef.	03/01/03			06/30/04			

### AnnualStatement/PerformanceandEvaluationReport CapitalFundProgramandCapitalFundProgramReplacementHousingFactor(CFP/CFPRHF) PartIII :ImplementationSchedule

PHAName:RUSTONHOU AUTHORITY	Capita	Y <b>peandNumb</b> IFundProgram mentHousingF	No:LA48P0545010	1	FederalFYofGrant:2001		
Development Number Name/HA-Wide Activities	me/HA-Wide (QuarterE				lFundsExpended arterEndingDate)		ReasonsforRevisedTargetDates
		Revised	Actual	Original	Revised	Actual	
ComputerSoft.&Train	03/01/03			06/30/04			
Mod.Coordinator	03/01/03			06/30/04			
Res.Initiatives	03/01/03			06/30/04			
ContractAdm.	03/01/03			06/30/04			
Fees&Cost	03/01/03			06/30/04			
LA-54-ALLDwelling Units:ForceAcct.Labor &Material	03/01/03			06/30/04			
Site-WideFacilities	03/01/03			06/30/04			
NondwellingEquipment	03/01/03			06/30/04			
DwellingEquipment	03/01/03			06/30/04			
LA-54-1Site: Landscaping	03/01/03			06/30/04			
DwellingUnits	03/01/03			06/30/04			
LA-54-2DwellingUnits:	03/01/03			06/30/04			
NondwellingEquipment	03/01/03			06/30/04			
LA-54-3DwellingUnits	03/01/03			06/30/04			

CapitalFundProgramTablesPage 7

### PublicHousingDrugEliminationProgramPlan

Note:THISPHDEPPlantemplate(HUD50075 -PHDEPPlan)istobecompletedinaccordancewithInstructions locatedinapplicablePIHNotices.

#### AnnualPHDEPPlanTableofContents:

- 1. GeneralInformation/History
- 2. PHDEPPlanGoals/Budget
- 3. Milestones
- 4. Certifications

#### Section1:GeneralInformation/History

A.AmountofPHDEPGrant\$\_73,707\_\_

B.Eligibilitytype(Indicatewithanìxî)

C.FFYinwhichfundingis requested FY2001

### D.ExecutiveSummaryofAnnualPHDEPPlan

In the space below, provide a brief overview of the PHDEPPlan, including highlights of majorinitiatives or activities under taken. It may include a description of the expected outcom es. The summary must not be more than five (5) sentences long

ThePDEHPgrantpermitsadditionalpolicepatrols, including footand bicyclepatrols, asecurity guard service. It also provides preventions ervices in conjunction with the Boys and Girls Clu bs.

N1\_\_\_\_\_

N2

R \_\_x\_\_\_

#### **E.TargetAreas**

Complete the following table by indicating each PHDEPT arget Area (developmentors itew here activities will be conducted), the total number of units in each PHDEPT arget Area, and the total number of individuals expected to participation activities in each Target Area.

PHDEPTargetAreas (Nameofdevelopment(s)orsite)	Total#ofUnitswithin thePHDEPTarget Area(s)	TotalPopulationto beServedwithin thePHDEPTarget Area(s)
PHA wide(patrolsandsecurity)	300	925
PHA wide(BoysandGirlsclubs)	208	100

#### **F.DurationofProgram**

 $\label{eq:linear} Indicate the duration (number of months funds will be required) of the PHDEPP rogram proposed under this Plan (place an ``x" to indicate the length of program by # of months. Fo r"Other", identify the # of months).$ 

6Months\_\_\_\_\_12Months\_\_\_\_18Months\_\_\_24Months\_\_X\_\_\_Other\_\_\_\_\_

#### G. PHDEPProgramHistory

IndicateeachFYthatfundinghasbeenreceivedunderthePHDEPProgram(placean"x"byeachapplicableYear)andprovideamountoffundingreceived.Ifpreviouslyfundedprogramshavenot beenclosedoutatthetimeofthissubmission,indicatethefundbalanceandanticipatedcompletiondate.Forgrantextensionsreceived,place"GE"incolumnor"W"forwaivers.

FiscalYearof Funding	PHDEP Funding Received	Grant#	FundBalance asofDateof thisSubmission	Grant Extensions orWaivers	Anticipated Completion Date
FY1995	150,000	LA48DEP0540195	0	None	NA
FY1997	116,308	LA48DEP0540197	17,784.44	ONE	12-20-01
FY1998	90,000	LA48DEP0540198	10,746.11	One	12-20-01
FY1999	65,982	LA48DEP0540199	65,982	NONE	04-01-02
FY2000	68,767	LA48DEP0540100	68,767	None	10-31-02

#### Section2:PHDEPPlanGoalsandBudget

#### A.PHDEPPlanSummary

Inthespacebelow, summarizethePHDEPstrategytoaddresstheneedsofthetargetpopulation/targetarea(s). Yoursummaryshould brieflyidentify:thebroadgoalsandobjectives,theroleofplanpartners, andyoursystemorprocessformonitoringandevaluating PHDEP-fundedactivities .Thissummaryshouldnotexceed5 -10sentences.

Thegoalsofthesecurityprogramaswellasthepreventioncomponentistomaintainthelevelofdrug relatedcrimetoonethatisbelowtheaverageforotherpartsofthecity.Theplanpar tners,i.e.,the police,thesecurityfirm,andtheBoysandGirlsClubsarecentraltothisendeavorbecauseoftheir particularexpertise.TheHousingAuthorityseeksspecificinformationfromthepoliceregarding criminalactivitysothatitcanbetter enforcetheleaseandprovideasafeenvironmentforitsresidents. Inaddition,thehousingauthorityactivelypromotesparticipationintheBoysandGirlsClub,e.g.,flyers, announcements,etc.

#### **B.PHDEPBudgetSummary**

EnterthetotalamountofPHDE Pfundingallocatedtoeachlineitem.

FY_2001PHDEPBudgetSummary							
BudgetLineItem	TotalFunding						
9110 -ReimbursementofLawEnforcement	14,118						
9120 -SecurityPersonnel	19,864						
9130 - EmploymentofInvestigators	0						
9140 - Voluntary Tenant Pa trol	0						
9150 - Physical Improvements	0						
9160 -DrugPrevention	0						
9170 -DrugIntervention	39,725						
9180 -DrugTreatment	0						
9190 -OtherProgramCosts	0						
TOTALPHDEPFUNDING	73,707						

### C. PHDEPPlanGoalsandActivities

Inthetablesbelow, provide inform ation on the PHDEPstrategy summarized above by budget lineitem. Each goal and objective should be numbered sequentially for each budget lineitem (where applicable). Use as many rows as necessary to list proposed activities (additional rows may be inserved to the tables). PHAs are not required to provide information in shaded boxes. Information provided must be concise — not to exceed two sentences in any column. Tables for lineitems in which the PHA has no planned goals or activities may be deleted.

9110 -ReimbursementofLawEnforcement					TotalPHD	EPFunding:\$	14,118		
Goal(s)	1.maintai	1.maintaincrimebelowthecityaverage							
Objectives:		1,todecreasedrugtrafficinpublichousingandincreasepolicepresence,thusincreasingresident satisfaction.							
ProposedActivities	#of Persons Served	Target Population	Start Date	Expected Complete Date	PHEDEP Funding	Other Funding (Amount/ Source)	PerformanceIndicators		
1.Policepatrols			7-1-01	6-30-02	14,118	0	Ongoingreviewof timesheets.6month meetingwithpoliceto ensurethatprotection isabovenormallevels.		
2.									
3.									

9120 -SecurityPersonnel					TotalPHD	EPFunding	;:\$19,864		
Goal(s) Objectives		1.Toincreasetheperceptionofsafetybytheresidents           1.Toincreasesecurityand         reducecrimeinpublichousingdevelopments							
ProposedActivities	#of Persons Served	Target Population	Start Date	Expected Complete Date	PHEDEP Funding	Other Funding (Amount /Source)	PerformanceIndicators		
1.PrivateSecurity Company			7-1-01	6-30-02	19,864	0	Ongoingreviewofdaily timeandactivityreports. Promptmanagement follow-upofincident reports.		
2. 3.									

9160 -DrugPrevention						EPFunding	;:\$32,000
Goal(s)         1.Topromoteandstrengthenoveralleffectivenessinpre         ventingdrugabuseamongtheyouthresiding           inpublichousingthatareaexposedandsubjectedtothisactivity.         ventingdrugabuseamongtheyouthresiding							
Objectives	1.Seeanincreaseinparticipationofatleast10%, or10 persons.						
ProposedActivities	#of Persons Served	Target Population	Start Date	Expected Complete Date	PHEDEP Funding	Other Funding (Amount /Source)	PerformanceIndicators
1.BoysandGirlsClub			7-1-01	6-30-02	39,725	0	Reviewmembership

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				roleseverysixmonths.
2.				
3.				

### Section3:Expenditure/Obligatio nMilestones

BudgetLine Item#	25%Expenditure ofTotalGrant FundsByActivity #	TotalPHDEP Funding Expended(sumof theactivities)	50%Obligation ofTotalGrant FundsbyActivity #	TotalPHDEP Funding Obligated(sumof theactivities)
e.gBudgetLine Item#9120	Activities1,3		Activity2	
9110	10-01-01	3,529.50	100% obligated on 7-1-01	14,118
9120	10-01-01	4,966	100%obligatedon 7-1-01	19,864
9130				
9140				
9150				
9160	10-01-01	9,931	100%obligatedon 7-1-01	39,725
9170				
9180				
9190				
TOTAL		\$18,426.50		\$73,707

#### Section4:Certifications

 $\label{eq:comprehensive} A comprehensive certification of compliance with respect to the PHDEPP lansubmission is included in the "PHAC ertifications of Compliance with the PHAP lanand Related Regulations."$ 

### Definition of Substantial Changeto the Plan

Attachment:la054d02

ASubstantialChangetotheAgencyPlanisanyfundamentalalterationtotheRuston HousingAuthority'smissionstatementorgoalsandobjectives,asdefinedbytheBoard ofCommissioner s.Anysuchchangewillbesubmittedtothesamereviewandapproval requirementsasthisAgencyPlanasperHUDregulation.

Ann	AnnualStatement/PerformanceandEvaluationReport						
Cap	CapitalFundProgramandCapitalFundProgramReplacementHousingFactor(CFP/CFPRHF)PartI:Summary						
(	ame:RUSTONHOUSINGAUTHORITY	GrantTypeandNumber CapitalFundProgramGrantNo: ReplacementHousingFactorGra	LA48P054706 98	,	FederalFYofGrant: 1998		
	ginalAnnualStatement ReserveforDisasters/Emer			)			
Line	formanceandEvaluationReportforPeriodEnding:12 SummarybyDevelopmentAccount	-30-01 FinalPerfor	manceandEvaluationR		ActualCost		
No.	SummarybyDevelopmentAccount	TotalEstill		1000	ActualCost		
1100		Original	Revised	Obligated	Expended		
1	Totalnon -CFPFunds	0		0	· ·		
2	1406Operations						
3	1408ManagementImprovements	29,950.31		29,950.31	29,950.31		
4	1410Administration	29,787.78		29,844.57	29,844.57		
5	1411Audit	1,000.00		1,000.00	1,000.00		
6	1415LiquidatedDamages						
7	1430FeesandCosts						
8	1440SiteAcquisition						
9	1450SiteImprovement	36,000.00		36,000.00	36,000.00		
10	1460DwellingStructures	220,590.63		219,563.27	219,563.27		
11	1465.1DwellingEquipment —Nonexpendable	3,532.00		3,532.00	3,532.00		
12	1470NondwellingStructures	16,990.85		16,990.85	16,990.85		
13	1475NondwellingEquipment	24,002.43		24,973.00	24,973.00		
14	1485Demolition						
15	1490ReplacementReserve						
16	1492MovingtoWorkDemonstration						
17	1495.1Rel ocationCosts						
18	1499DevelopmentActivities						
19	1501CollaterizationorDebtService						
20	1502Contingency						
21	AmountofAnnualGrant:(sumoflines2 –20)	361,854.00		361,854	361,854		
22	Amountofline21RelatedtoLBPActivities						
23	Amountofline21RelatedtoSection504compliance						
24	Amountofline21RelatedtoSecurity –SoftCosts						

AnnualStatement/PerformanceandEvaluationReport CapitalFundProgramandCapitalFundProgramReplacementHousingFactor(CFP/CFPRHF)PartI:Summary						
PHAName:RUSTONHOUSINGAUTHORITY	PHAName:RUSTONHOUSINGAUTHORITYGrantTypeandNumber CapitalFundProgramGrantNo:LA48P054706FederalFYofGrant: 19981998					
	Rep	placementHousingFactorG	rantNo:			
OriginalAnnualStatement Reservefo	orDisasters/Emergencie	es 🗌 Revised Annual	Statement(revisionno: )			
<b>PerformanceandEvaluationReportforPe</b>	eriodEnding:12 -30-0	01 FinalPerfo	rmanceandEvaluationRepor	t		
Line SummarybyDevelopmentAccount		TotalEsti	matedCost	TotalAc	tualCost	
No.	No.					
Original Revised Obligated Expended						
25 AmountofLine21RelatedtoSecurity – HardCosts						
26 Amountofline21RelatedtoEnergyConserv	ationMeasures					

### AnnualSt atement/PerformanceandEvaluationReport CapitalFundProgramandCapitalFundProgramReplacementHousingFactor(CFP/CFPRHF) PartII:SupportingPages

PHAName:RUSTO	NHOUSINGAUTHORITY		<b>umber</b> amGr antNo:LA4 ingFactorGrantNo:	FederalFYofGrant: 1998				
Development GeneralDescriptionofMajorWork Number Categories Name/HA-Wide Activities		Dev.AcctNo.	Quantity	TotalEstimatedCost		TotalActualCost		Statusof Work
				Original	Revised	Funds Obligated	Funds Expended	
HA-WIDE	ManagementDeficiencies	1408		12,000.00	4,379.00	4,379.00	4,379.00	
HA-WIDE	ComputerSoftware&Training	1408		2,000.00	2,000.00	2,000.00	2,000.00	
HA-WIDE	ModernizationCoordinator	1408		16,000.00	19,803.79	19.803.79	19,803.79	
HA-WIDE	ResidentInitiatives	1408		15,000.00	3,767.52	3,767.52	3,767.52	
HA-WIDE	ContractAdministration	1410		29,500.00	29,844.57	29,844.57	29,844.57	
HA-WIDE	Audit	1411		1,000.00	1,000.00	1,000.00	1,000.00	
HA-WIDE	FeesandCosts	1430		3,000.00	0.00	0.00	0.00	
LA-54-ALL	DwellingUnits:ForceAcct.Labor& Materials	1460		110,052.00	123,386.22	123,152.54	123,386.22	
LA-54-ALL	Appliances	1465		13,000.00	3.532.00	3,532.00	3,532.00	
LA-54-ALL	SiteWideFacilities	1470		20,000.00	16,990.85	16,990.85	16,990.85	
LA-54-ALL	NondwellingEquipment	1475		9,500.00	22,524.00	22,524.00	22,524.00	
LA-54-1	Site:Landscaping	1450		20,000.00	36,000.00	36,000.00	36,000.00	
LA-54-1	Mechanical&Electrical	1460		15,000.00	273.15	273.15	273.15	
LA-54-1	DwellingUnits:ReplaceSewerLines/ SecurityScreenDoors	1460		25,000.00	15,416.90	15,416.90	15,416.90	
LA-54-2	DwellingUnits:RepairCeramic Tile/RepairCei lings/RefinishKit.Cabs	1460		27,927.00	32,630.00	32,630.00	32,630.00	
LA-54-2	NondwellingEquipment:Laundry	1475		1,500.00	2,449.00	2,449.00	2,449.00	
LA-54-3	DwellingUnits:Modernize	1460		41,375.00	47,857.00	47,857.00	47,857.00	

### AnnualSt atement/PerformanceandEvaluationReport CapitalFundProgramandCapitalFundProgramReplacementHousingFactor(CFP/CFPRHF) PartII:SupportingPages

PHAName:RUSTO	NHOUSINGAUTHORITY		<b>umber</b> ramGr antNo:LA48 singFactorGrantNo:	FederalFYofGrant: 1998				
Development Number Name/HA-Wide Activities	GeneralDescriptionofMajorWork Categories	Dev.AcctNo.	Quantity	TotalEstimatedCost		TotalActualCost		Statusof Work
				Original	Revised	Funds Obligated	Funds Expended	

### AnnualStatement/PerformanceandEvaluationReport CapitalFundProgramandCapitalFundProgramReplacementHousingFactor(CFP/CFPRHF) PartIII:ImplementationSchedule

PHAName:RUSTONHOUSING			[ypeandNumb]			FederalFYofGrant:1998	
AUTHORITY	AUTHORITY			nNo:LA48P054706	98		
		Replace	ementHousingI	FactorNo:			
DevelopmentNumber	All	FundObligated	l	А	llFundsExpended		ReasonsforRevisedTargetDates
Name/HA-Wide	(Qua	rterEndingDat	e)	(Q	uarterEndingDate)		
Activities							
		Revised	Actual	Original	Revised	Actual	
ManagementDef.	03/01/00	09/01/00	06/30/00	06/01/00	12/01/00	12/01/00	
ComputerSoft.&Train	03/01/00	09/01/00	06/30/00	06/01/00	12/01/00	12/01/00	
Mod.Coordinat or	03/01/00	09/01/00	06/30/00	06/01/00	12/01/00	12/01/00	
Res.Initiatives	03/01/00	09/01/00	06/30/00	06/01/00	12/01/00	12/01/00	
ContractAdm.	03/01/00	09/01/00	06/30/00	06/01/00	12/01/00	12/01/00	
Fees&Cost	03/01/00	09/01/00	06/30/00	06/01/00	12/01/00	12/01/00	

### AnnualStatement/PerformanceandEvaluationReport CapitalFundProgramandCapitalFundProgramReplacementHousingFactor(CFP/CFPRHF) PartIII:ImplementationSchedule

i ui viiiinpiemen							
PHAName:RUSTONHOUSING AUTHORITY			GrantTypeandNumber CapitalFund ProgramNo:LA48P05470698 ReplacementHousingFactorNo:				FederalFYofGrant:1998
DevelopmentNumber Name/HA-Wide Activities	Name/HA-Wide (QuarterEndingDa			AllFundsExpended (QuarterEndingDate)			ReasonsforRevisedTargetDates
		Revised	Actual	Original	Revised	Actual	
LA-54-ALLDwelling Units:ForceAcct.Labor &Material	03/01/00	09/01/00	06/30/00	06/01/00	12/01/00	12/01/00	
Site-WideFacilities	03/01/00	09/01/00	06/30/00	06/01/00	12/01/00	12/01/00	
NondwellingEquipment	03/01/00	09/01/00	06/30/00	06/01/00	12/01/00	12/01/00	
DwellingEquipment	03/01/00	09/01/00	06/30/00	06/01/00	12/01/00	12/01/00	
LA-54-1Site: Landscaping	03/01/00	09/01/00	06/30/00	06/01/00	12/01/00	12/01/00	
DwellingUnits	03/01/00	09/01/00	06/30/00	06/01/00	12/01/00	12/01/00	
LA-54-2DwellingUnits:	03/01/00	09/01/00	06/30/00	06/01/00	12/01/00	12/01/00	
NondwellingEquipment	03/01/00	09/01/00	06/30/00	06/01/00	12/01/00	12/01/00	
LA-54-3DwellingUnits	03/01/00	09/01/00	06/30/00	06/01/00	12/01/00	12/01/00	

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# ADMISSIONSANDCONTI NUEDOCCUPANCYPOLIC Y

This Admissions and Continued Occupancy Policy defines the Ruston Hou sing Authority's policies for the operation for the Public Housing Program, incorporating Federal, State and local law. If there is any conflict between this policy and laws or regulations, the laws and regulationswillprevail.

### **1.0 FAIRHOUSING**

Itisth epolicyof the Ruston Housing Authority to fully comply with all Federal, State and local nondiscrimination laws; the Americans with Disabilities Act; and the U.S. Department of Housing and Urban Development regulations governing Fair Housing and EqualO pportunity.

No person shall, on the grounds of race, color, sex, religion, national or ethnic origin, familial status, or disability be excluded from participation in, be denied the benefits of, or be otherwise subjected to discrimination under the Ruston Housing Authority's programs.

To further its commitment to full compliance with applicable Civil Rights laws, the Ruston Housing Authority will provide Federal/State/local information to applicants/tenants of the Public Housing Program regarding discrimi nation and any recourse available to themif they believe they may be victims of discrimination. Such information will be made available with the application, and all applicable Fair Housing Information and Discrimination Complaint Forms will be made avail able at the Ruston Housing Authority office. In addition, all written information and advertisements will contain the appropriate Equal Opportunity language and logo.

The Ruston Housing Authority will assist any family that believes they have suffered illegal discrimination by providing them copies of the appropriate housing discrimination forms. The Ruston Housing Authority will also assist them in completing the forms if requested, and will provide them with the address of the nearest HUD office of Fair Housing and Equal Opportunity.

### 2.0 REASONABLEACCOM MODATION

Sometimes people with disabilities may need a reasonable accommodation in order to take full advantage of the Ruston Housing Authority housing programs and related services. When such accommodat ions are granted, they do not conferspecial treatment or advantage for the person with a disability; rather, they make the program accessible to them in a way that would otherwise not be possible due to their disability. This policy clarifies how peoplec an request accommodations and the guidelines the Ruston Housing Authority will follow in determining whether it is reasonable to provide a requested accommodation. Because disabilities are not always apparent, the Ruston

HousingAuthoritywillensurethat allapplicants/tenantsareawareoftheopportunityto requestreasonableaccommodations.

#### 2.1 COMMUNICATION

Anyone requesting an application will also receive a Request for Reasonable Accommodationform.

Notifications of reexamination, inspection, appointment, or eviction will include informationaboutrequesting areasonable accommodation. Any notification requesting action by the tenant will include information about requesting a reasonable accommodation.

All decisions granting or denying requests for reasonable accommodations will be in writing.

### 2.2 QUESTIONSTOASK INGRANTINGTHEACC OMMODATION

A. Is the requestor a person with disabilities? For this purpose the definition of person with disabilities is different than the definition used for admiss ion. The FairHousingdefinitionused for this purpose is:

Aperson with aphysical ormental impairment that substantially limits one or more major life activities, has a record of such an impairment, or is regarded as having such an impairment. (The disability may not be apparent to others, i.e., a heart condition).

If the disability is apparent or already documented, the answer to this question is yes. It is possible that the disability for which the accommodation is being requested is a disability of the apparent disability. If the disability is not apparent or documented, the Ruston Housing Authority will obtain verification that the person is a person with a disability.

- B. Is the requested accommodation related to the disability? If it is ap parent that therequestisrelated to the apparent or documented disability, the answer to this question is yes. If it is not apparent, the Ruston Housing Authority will obtain documentation that the requested accommodation is needed due to the disability. The Ruston Housing Authority will not inquire ast othen at the disability.
- C. Is the requested accommodation reasonable? In order to be determined reasonable,theaccommodationmustmeettwocriteria:
  - 1. Would the accommodation constitute a funda mental alteration? The Ruston Housing Authority's business is housing. If the request would alter the fundamental business that the Ruston Housing Authority

conducts, that would not be reasonable. For instance, the Ruston Housing Authority would deny a req uest to have the Ruston Housing Authoritydogroceryshoppingforapersonwithdisabilities.

- 2. Would the requested accommodation create an undue financial hardship or administrative burden? Frequently the requested accommodation costs little or nothing . If the cost would be an undue burden, the Ruston Housing Authority may request a meeting with the individual to investigate and consider equally effective alternatives.
- D. Generally the individual knows best what it is they need; however, the Ruston Housing Authority retains the right to be shown how the requested accommodation enables the individual to access or use the Ruston Housing Authority's programs or services.

If more than one accommodation is equally effective in providing access to the Ruston Housing Authority's programs and services, the Ruston Housing Authority retains the right to select the most efficient or economic choice.

The cost necessary to carry out approved requests, including requests for physical modifications, will be borne by the Ruston Housing Authority if there is no one else willing to pay for the modifications. If another party pays for the modification, the Ruston Housing Authority will seek to have the same entity payfor any restoration costs.

If the tenant requests as a reasonable accommodation that they be permitted to make physical modifications at their own expense, the Ruston Housing Authority will generally approve such request if it does not violate codes or affect the structural integrity of the unit.

Any reque st for an accommodation that would enable a tenant to materially violate essential lease terms will not be approved, i.e. allowing nonpayment of rent, destruction of property, disturbing the peaceful enjoyment of others, etc.

### 3.0 SERVICESFORNON -ENGLISH SPEAKING APPLICANTSANDRESID ENTS

The Ruston Housing Authority will endeavor access to people who speak languages other than Englishin order to assist non -English speaking families.

### 4.0 FAMILYOUTREACH

The Ruston Housing Authority will publicize the eavailability and nature of the Public Housing Program for extremely low -income, very low and low -income families in a newspaperof general circulation, minority media, and by other suitable means.

To reach people who cannot or do not read the newspapers , the Ruston Housing Authority will distribute fact sheets to the broadcasting media and initiate personal contacts with members of the news media and community service personnel. The RustonHousingAuthoritywillalsotrytoutilizepublicserviceannounc ements.

The Ruston Housing Authority will communicate the status of housing availability to otherservice providers in the community and inform the mofhousing eligibility factors and guideliness othey can make proper referrals for the Public Housing Program.

### 5.0 RIGHTTOPRIVACY

All adult members of both applicant and tenant households are required to sign HUD Form 9886, Authorization for Release of Information and Privacy Act Notice. The Authorization for Release of Information and Privacy Act Notice states how family informationwillbereleased and includes the Federal Privacy Act Statement.

Any request for applicant or tenant information will not be released unless there is a signed release of information request from the applicant or tenant.

### 6.0 REQUIREDPOSTINGS

In each of its offices, the Ruston Housing Authority will post, in a conspicuous place and at a height easily read by all persons including persons with mobility disabilities, the following information:

- A. Statement of Policies and Proc edures governing Admission and Continued Occupancy
- B. Noticeofthestatusofthewaitinglist(openedorclosed)
- C. A listing of all the developments by name, address, number of units, units designed with special accommodations, address of all project o ffices, office hours, telephonenumbers, TDDnumbers, and Resident Facilities and operation hours
- D. IncomeLimitsforAdmission
- E. ExcessUtilityCharges
- F. UtilityAllowanceSchedule
- G. CurrentScheduleofRoutineMaintenanceCharges
- H. DwellingLea se

- I. GrievanceProcedure
- J. FairHousingPoster
- K. EqualOpportunityinEmploymentPoster
- L. AnycurrentRustonHousingAuthorityNotices

### 7.0 TAKINGAPPLICATI ONS

Families wishing to apply for the Public Housing Program will be required to complete an application for housing assistance. Applications will be accepted during regular businesshours at:

# 615 N. Farmerville Street, Ruston, LA on Monday through Friday, 9:00 a.m. to 11:00a.m.and1:30p.m.until3:00p.m.

Applications are taken to compile a waiting list. Due to the demand for housing in the Ruston Housing Authority jurisdiction, the Ruston Housing Authority may take applications on an open enrollment basis, depending on the length of the waiting list.

Completed applications will be accepted for all applicants and the Ruston Housing Authority will verify the information.

The completed application will note the date and time that it was received its return to the Ruston Housing Authority.

Persons with disabilities who require a reaso nable accommodation in completing an applicationmaycalltheRustonHousingAuthoritytomakespecialarrangements.

Upon receipt of the family's application, the Ruston Housing Authority will make a preliminary determination of eligibility. The Ruston nHousing Authority will ensure that verification of all preferences, eligibility, suitability and selection factors are current in order to determine the family's final eligibility for admission into the Public Housing Program. The Ruston Housing Authorit ywill notify any family that is not approved for the waiting list. If the Ruston Housing Authority determines the family to be ineligible, the notice will state the reasons therefore and will offer the family the opportunity of an informal review of the materia.

The applicant must report changes in their applicant status including changes in family composition, income, or preference factors, if any. The Ruston Housing Authority will annotate the applicant's file and will update their place on the waiting list. Confirmation of the changes will be confirmed with the family inwriting.

### 8.0 ELIGIBILITYFOR ADMISSION

#### 8.1 INTRODUCTION

There are five eligibility requirements for admission to public housing: qualifies as a family, has an income with in the income limits, meets citizenship/eligible immigrant criteria, provides documentation of Social Security numbers, and signs consent authorization documents. In addition to the eligibility criteria, families must also meet the Ruston Housing Authority screening criteria in order to be admitted to public housing.

### 8.2 ELIGIBILITYCRIT ERIA

- A. Familystatus.
  - 1. A **familywithorwithoutchildren** .Suchafamilyisdefinedasagroup ofpeoplerelatedbyblood,marriage,oradoption.
    - a. Children tempo rarily absent from the home due to placement in fostercareareconsidered family members.
    - b. Unbornchildrenandchildrenintheprocessofbeingadoptedare considered family members for the purpose of determining bedroom size but are not considered fa mily members for determiningincomelimit.
  - 2. An **elderlyfamily** ,which is:
    - a. Afamilywhosehead,spouse,orsolememberisapersonwhois atleast62yearsofage;
    - b. Two or more persons who are at least 62 years of age living together;or
    - c. Oneor morepersonswhoareatleast62yearsofagelivingwith oneormorelive -inaides.
  - 3. A near elderlyfamily ,which is:
    - a. Afamilywhosehead,spouse,orsolememberisapersonwhois atleast50yearsofagebutbelowtheageof62;
    - b. Twoormore persons, who are at least 50 years of a gebut below the age of 62, living together; or

c. Oneormorepersons, who are at least 50 years of a gebut below the age of 62, living with one ormore live -in aides.

#### 4. A **disabledfamily** ,which is:

- a. A family w hose head, spouse, or sole member is a person with disabilities;
- b. Twoormorepersonswithdisabilitieslivingtogether;or
- c. One or more persons with disabilities living with one or more live-inaides.
- 5. A **displacedfamily**, which is a family in which is a family fa

### 6. A remainingmemberofatenantfamily

- 7. A **singleperson** whoisnotanelderlyordisplacedperson,apersonwith disabilities,ortheremainingmemberofatenantfamily.
- B. Incomeeligibility
  - 1. Income limits apply only at admission and are not app licable for continuedoccupancy.
  - 2. A family may not be admitted to the public housing program from anotherassisted housing program (e.g., tenant -based Section 8) or from apublic housing program operated by another housing authority without meeting the income requirements of the Ruston Housing Authority.
  - 3. If the Ruston Housing Authority acquires a property for federal public housingpurposes, the families living theremus thave incomes within the low-income limit in order to be eligible to remain as p ublic housing tenants.
  - 4. Incomelimitrestrictionsdonotapplytofamiliestransferringwithinour PublicHousingProgram.
  - 5. (Forhousingauthoritieswithfewerthan250publichousingunits) If there are no eligible families on the waiting list and the Ruston Housing Authority has published a 30 - day notice of available units in at least one

newspaper of general circulation, families above the applicable income limit may be housed. They must vacate the unit if an eligible family applies.

- C. Citizenship/EligibilityStatus
  - 1. Tobeeligibleeachmemberofthefamilymustbeacitizen, national, or a noncitizen who has eligible immigration status under one of the categories set forth in Section 214 of the Housing and Community DevelopmentActof1980(see 42U.S.C.1436a(a)).
  - 2. Familyeligibilityforassistance.
    - a. Afamilyshallnotbeeligibleforassistanceunlesseverymember of the family residing in the unit is determined to have eligible status, with the exception noted below.
    - b. Despite the ineligibility of one or more family members, a mixed family may be eligible for one of three types of assistance. (See Section 13.6 for calculating rents under the noncitizen rule)
    - c. A family without any eligible members and receiving assistance on June 19, 19 95 may be eligible for temporary deferral of termination of assistance.
- D. SocialSecurityNumberDocumentation

To be eligible, all family members 6 years of age and older must provide a SocialSecuritynumberorcertifythattheydonothaveone.

- E. SigningConsentForms
  - 1. In order to be eligible, each member of the family who is at least 18 years of age, and each family head and spouse regardless of age, shall signoneormoreconsentforms.
  - 2. The consent form must contain, at a minimum, the followin g:
    - a. A provision authorizing HUD or the Ruston Housing Authority to obtain from State Wage Information Collection Agencies (SWICAs)anyinformationormaterialsnecessarytocompleteor verify the application for participation or for eligibility for continuedoccupancy;and

- b. A provision authorizing HUD or the Ruston Housing Authority toverify with previous or current employers income information pertinent to the family's eligibility for or level of assistance;
- c. A provision authorizing HUD to reques t income information from the IRS and the SSA for the sole purpose of verifying incomeinformationpertinenttothefamily'seligibilityorlevelof benefits;and
- d. A statement that the authorization to release the information requested by the consent form expires 15 months after the date the consent form is signed.

### 8.3 SUITABILITY

- A. Applicantfamilies will be evaluated to determine whether, based on their recent behavior, such behavior could reasonably be expected to result in noncompliance with the public housing lease. The Ruston Housing Authority will look at past conduct as an indicator of future conduct. Emphasis will be placed on whether a family's admission could reasonably be expected to have a detrimental effect on the development environme nt, other tenants, Ruston Housing Authority employees, or other people residing in the immediate vicinity of the property. Otherwise eligible families with be denied admission if they fail to meet the suitability criteria.
- B. TheRustonHousingAuthority willconsiderobjectiveandreasonableaspectsof thefamily'sbackground,includingthefollowing:
  - 1. Historyofmeetingfinancialobligations,especiallyrent;
  - 2. Ability to maintain (or with assistance would have the ability to maintain)theirhousi nginadecentandsafeconditionbasedonlivingor housekeepinghabits and whether such habits could adversely affect the health, safety, or welfare of other tenants;
  - 3. History of criminal activity by any household member involving crimes of physical v iolence against persons or property and any other criminal activity including drug -related criminal activity that would adversely affect the health, safety, or well being of other tenants or staff or cause damage to the property;
  - 3. Historyofdisturbing neighborsordestructionofproperty;
  - 4. Having committed fraud in connection with any Federal housing assistance program, including the intentional misrepresentation of informationrelated to their housing application or benefits derived there

from;and

- 5. History of abusing alcohol in a way that may interfere with the health, safety, orrighttopeacefulenjoymentby others.
- C. The Ruston Housing Authority will ask applicants to provide information demonstrating their ability to comply with the essential elements of the lease. The Ruston Housing Authority will verify the information provided. Such verificationmayincludebutmaynotbelimited to the following:
  - 1. Acreditcheckofthehead, spouse and co -head;
  - 2. Arentalhistorycheckofalladult familymembers;
  - 3. Acriminalbackgroundcheckonalladulthouseholdmembers, including live-in aides. This check will be made through State or local law enforcement or court records in those cases where the household memberhaslivedinthelocaljuris dictionforthelastthreeyears. Where the individual has lived outside the local area, the Ruston Housing Authority may contact law enforcement agencies where the individual had lived or request a check through the FBI's National Crime InformationCenter (NCIC);
  - 4. Ahome visit. The home visit provides the opportunity for the family to demonstrate their ability to maintain their home in a safe and sanitary manner. This inspection considers cleanliness and care of rooms, appliances, and appurtenances. The inspection may also consider any evidence of criminal activity; and
  - 5. AcheckoftheState'slifetimesexoffenderregistrationprogramforeach adult household member, including live -in aides. No individual registeredwiththisprogramwillbeadmitt edtopublichousing.

### 8.4 GROUNDSFORDENI AL

The Ruston Housing Authority is not required or obligated to assist applicants who:

- A. Donotmeetanyoneormoreoftheeligibilitycriteria;
- B. Do not supply information or documentation required by the application process;
- C. Have failed to respond to a written request for information or a request to declare their continued interest in the program;
- D. Haveahistoryofnotmeetingfinancialobligations, especially rent;

- E. Do not have the ability to m aintain (with assistance) their housing in a decent and safe condition where such habits could adversely affect the health, safety, or welfare of other tenants;
- F. Have a history of criminal activity by any household member involving crimes of physical vi olence against persons or property and any other criminal activity including drug -related criminal activity that would adversely affect the health, safety, or well being of other tenants or staffor caused amage to the property;
- G. Haveahistoryofdistu rbingneighborsordestructionofproperty;
- H. Currently owes rent or other amounts to any housing authority in connection with their public housing or Section 8 programs;
- I. Have committed fraud, bribery or any other corruption in connection with any Federal housing assistance program, including the intentional misrepresentation of information related to their housing application or benefits derived there from;
- J. Were evicted from assisted housing within three years of the projected date of admission b ecause of drug -related criminal activity involving the personal use orpossession for personal use;
- K. Were evicted from assisted housing within five years of the projected date of admission because of drug -related criminal activity involving the illegal manufacture, sale, distribution, or possession with the intent to manufacture, sell, distribute a controlled substance as defined in Section 102 of the Controlled Substances Act, 21U.S.C.802;
- L. Are illegally using a controlled substance or are abusing alcohol in a way that may interfere with the health, safety, or right to peaceful enjoyment of the premises by other residents. The Ruston Housing Authority may waive this requirementif:
  - 1. The person demonstrates to the Ruston Housing Authority's satisf action that the person is no longerengaging indrug -related criminal activity or abuse of alcohol;
  - 2. Has successfully completed a supervised drug or alcohol rehabilitation program;
  - 3. Hasotherwisebeenrehabilitatedsuccessfully;or
  - 4. Isparticipati nginasuperviseddrugoralcoholrehabilitationprogram.

- M. Have engaged in orthreatened abusive or violent behavior towards any Ruston Housing Authority stafforresidents;
- N. Haveahouseholdmemberwhohaseverbeenevictedfrompublichousing;
- O. Haveafamilyhouseholdmemberwhohasbeenterminatedunderthecertificate orvoucherprogram;
- P. **DeniedforLife:** If any family member has been convicted of manufacturing or producing methamphetamine (speed) in a public housing development or in a Section 8 assisted property;
- Q. **Denied for Life:** Has a lifetime registration under a State sex offender registrationprogram.

### 8.5 INFORMALREVIEW

A. If the Ruston Housing Authority determines that an applicant does not meet the criteria for receiving public chousing assistance, the Ruston Housing Authority will promptly provide the applicant with written notice of the determination. The notice must contain a brief statement of the reason(s) for the decision and state that the applicant may request an informal review of the decision within 10 business days of the denial. The Ruston Housing Authority will describe how to obtain the informal review.

The informal review may be conducted by any persondesignated by the Ruston Housing Authority, other than a perso n who made or approved the decision under review or subordinate of this person. The applicant must be given the opportunity to present written or oral objections to the Ruston Housing Authority's decision. The Ruston Housing Authority must notify the appli cant of the final decision within 14 calendard ays after the informal review, including abriefs tatement of the reasons for the final decision.

B. The participant family may request that the Ruston Housing Authority provide for an Informal Hearing after the family has notification of an INS decision on their citizenship status on appeal, or inlieu of request of appeal to the INS. This request must be made by the participant family within 30 days of receipt of the Notice of Denial or Termination of Assist ance, or within 30 days of receipt of the INS appeal decision.

Fortheparticipantfamilies,theInformalHearingProcessabovewillbeutilized withtheexceptionthattheparticipantfamilywillhaveupto30daysofreceipt of the Notice of Denial or T ermination of Assistance, or of the INS appeal decision.

### 9.0 MANAGINGTHEWAI TINGLIST

### 9.1 OPENINGANDCLOS INGTHEWAITINGLIST

Opening of the waiting list will be announced with a public notice stating that applications for public housing will again be accepted. The public notice will state where, when, and how to apply. The notice will be published in a local newspaper of general circulation and also by any available minority media. The public notice will state anylimitationstowhomayapply.

Theno ticewillstatethatapplicantsalreadyonwaitinglistsforotherhousingprograms mustapplyseparatelyforthisprogram and such applicants will not lose their place on otherwaiting lists when they apply for public housing. The notice will include the Housing logo and slogan and will be incompliance with Fair Housing requirements.

Closing of the waiting list will also be announced with a public notice. The public noticewillstatethedatethewaitinglistwillbeclosedandforwhatbedroomsize s. The public notice will be published in a local newspaper of general circulation and also by any available minority media, if any.

### 9.2 ORGANIZATIONOFTHEWAITINGLIST

Thewaitinglistwillbemaintainedinaccordancewiththefollowingguidelines:

- A. Theapplicationwillbeapermanentfile;
- B. Allapplications will be maintained in order of bedroom size, preference, if any and then in order of date and time of application; and
- C. AnycontactsbetweentheRustonHousingAuthorityandtheapplicantw illbe documentedintheapplicantfile.

### 9.3 FAMILIESNEARING THETOPOFTHEWAIT INGLIST

When a family appears to be nearing the top of the waiting list, the family will be invited to an interview and the verification process will be gin. It is at this point in time that the family's waiting list preference, if any, will be verified. If the family no longer qualifies to be near the top of the list, the family's name will be returned to the appropriate spot on the waiting list. The Ruston Housing Authority must notify the family in writing of this determination and give the family the opportunity for an informal review.

Once the preference, if any, has been verified, the family will complete a full application, present Social Security number information, citizenship/eligible immigrant information, and sign the Consent for Release of Information forms.

#### 9.4 PURGINGTHEWAIT INGLIST

TheRustonHousingAuthoritywillupdateandpurgeitswaitinglistatleastannuallyto ensure that the pool of applicants r easonably represents the interested families for whom the Ruston Housing Authority has current information, i.e. applicant's address, familycomposition, income category, and preferences.

### 9.5 REMOVALOFAPPLI CANTSFROMTHEWAITI NGLIST

The Ruston Housin gAuthority will not remove an applicant's name from the waiting listunless:

- A. Theapplicantrequestsinwritingthatthenameberemoved;
- B. Theapplicantfailstorespondtoawrittenrequestforinformationorarequestto declaretheircontinuedin terestintheprogram;or
- C. The applicant does not meet either the eligibility or suitability criteria for the program.

#### 9.6 MISSEDAPPOINTME NTS

All applicants who fail to keep a scheduled appointment with the Ruston Housing Authority willbesentanoti ceofterminationoftheprocessforeligibility.

The Ruston Housing Authority will allow the family to reschedule for good cause. Generally, no more than one opportunity will be given to reschedule without good cause, and no more than two opportunities w ill be given for good cause. When good cause exists for missing an appointment, the Ruston Housing Authority will work closelywiththefamilytofindamoresuitabletime. Applicants will be offered the right toaninformal review before being removed from the waiting list.

#### 9.7 NOTIFICATIONOF NEGATIVEACTIONS

Any applicant whose name is being removed from the waiting list will be notified by the Ruston Housing Authority, in writing, that they have ten (10) calendar days from the date of the written correspondence to present mitigating circumstances or requestan informal review. The letter will also indicate that their name will be removed from the waiting list if they fail to respond within the time frame specified. The Ruston Housing Authority system of removing applicant names from the waiting list will not violate the rights of persons with disabilities. If an applicant claims that their fail ure to respond to a request for information or updates was caused by a disability, the Ruston Housing Authority will verify that there is infact a disability and the disability caused the fail ure to respond, and provide a reasonable accommodation. An example of a reasonable accommodation would be to reinstate the applicant on the waiting list based on the date and time of the original application.

### 10.0 TENANTSELECTIO NANDASSIGNMENTPLA N

#### 10.1 PREFERENCES

The Ruston Housing Authority will select families based on the following preferences within each bedroom size category:

A. Amemberofthehouseholdhasear nedincomefromemploymentofatleast30 hoursperweek

Based on the above. all families with a preference will be offered housing before families without a preference.

The date and time of application will be noted and utilized to determine the seque nce within the above prescribed preferences.

Not withstanding the above, families who are elderly, disabled, or displaced will be offeredhousingbeforeothersinglepersons.

**BuildingsDesignedfortheElderlyandDisabled:** Preferencewillbegiventoel derly and disabled families. If there are no elderly or disabled families on the list, preference will then be given to near -elderly families. If there are no near -elderly families on the waiting list, units will be offered to families who qualify for the appropriate bedroom size using these priorities. All such families will be selected from the waiting list using the preferences as outlined above.

Accessible Units: Accessible units will be first offered to families who may benefit from the accessible features. Applicants for these units will be selected utilizing the same preference system as outlined above. If there are no applicants who would benefit from the accessible features, the units will be offered to other applicants in the order that their name scome to the top of the waiting list. Such applicants, however, must sign a release form stating they will accept a transfer (at their own expense) if, at a future time, a family requiring an accessible feature applies. Any family required to transfer will be given a 30 - daynotice.

#### 10.2 ASSIGNMENTOFB EDROOMSIZES

The following guidelines will determine each family's unit size without overcrowding orover -housing:

NumberofBedrooms	NumberofPersons			
	Minimum	Maximum		
0	1	1		

1	1	2
2	2	4
3	3	6
4	4	8

These standards are based on the assumption that each bedroom will accommodate no more than two (2) persons. Zero bedroom units will only be assigned to one -person families. Two adults will share a bedroom unless related by blood.

In determining bedroom size, the Ruston Housing Authority will include the presence of children to be born to a pregnant woman, children who are in the process of being adopted, children whose custody is being obtained, children who are temporarily away atschool, orchildren who are temporarily infoster -care.

Inaddition, the following considerations may be taken indetermining bedroom size:

- A. Childrensixyearsandolderwillnotshareabedroom.
- B. Adultsandchildrenwillnotberequiredtoshareabedroom.
- C. Foster adults and/or foster children will not be required to share a bedroom with family members.
- D. Live-inaideswillgetaseparatebedroom.

Exceptionstonormalbedroomsizestandardsincludethefollowing:

- A. Units smaller than assigned through th e above guidelines A family may request a smaller unit size than the guidelines allow. The Ruston Housing Authoritywillallowthesmallersizeunitsolongasgenerallynomorethantwo (2) people per bedroom are assigned. In such situations, the family will sign a certification stating they understand they will be ineligible for a larger size unit three years or until the family size changes, which ever may occur first.
- B. Unitslargerthanassignedthroughtheaboveguidelines –Afamilymayrequest a largerunitsizethantheguidelinesallow.TheRustonHousingAuthoritywill allow the larger size unit if the family provides a verified medical need that the family behoused in a larger unit.
- C. If there are no families on the waiting list for a large rsize, smaller families may be housed if they sign a release form stating they will transfer (at the family's own expense) to the appropriate size unit when an eligible family needing the

largerunitapplies. The family transferring will be given a 30 -day notice before being required to move.

D. Largerunitsmaybeofferedinordertoimprovethemarketingofadevelopment sufferingahighvacancyrate.

### 10.3 SELECTIONFROM THEWAITINGLIST

The Ruston Housing Authority shall follow the statutory requirem entthat at least 40% of newly admitted families in any fiscal year be families whose annual income is at or below 30% of the area median income. To insure this requirement is met we shall quarterly monitor the incomes of newly admitted families and the in comes of the families on the waiting list. If it appears that the requirement to house extremely low income families will not be met, we will skiphigher income families on the waiting list to reachextremely low -income families.

If there are not enough e xtremely low -income families on the waiting list we will conduct outreach on a non -discriminatory basis to attract extremely low -income familiestoreachthestatutoryrequirement.

### 10.4 DECONCENTRATIONPOLICY

It is Ruston Housing Authority's policy to provide for deconcentration of poverty and encourage income mixing by bringing higher income families into lower income developments and lower income families into higher income developments. Toward thisend, we will skipf amilies on the waiting list to reachother families with a lower or higher income. We will accomplish this in a uniform and non -discriminating manner.

The Ruston Housing Authority will affirmatively market our housing to all eligible income groups. Lower income residents will not be s teered toward lower income developments and higher income people will not be steered toward higher income developments.

Prior to the beginning of each fiscal year, we will analyze the income levels of families residing in each of our developments, Based on this analysis, we will determine the levelof marketing strategies and deconcentration incentive stoim plement.

#### 10.5 DECONCENTRATIONINCENTIVES

The Ruston Housing Authority may offer one or more incentives to encourage applicant families whose income classification would help to meet the deconcentration goals of a particular development.

Various incentives may be used at different times, or under different conditions, but willalwaysbeprovidedinaconsistentandnondiscriminatorymanner.

#### 10.6 OFFEROFAUNIT

When the Ruston Housing Authority discovers that a unit will become available, we will contact the first family on the waiting list who has the high est priority for this type of unit or development and whose income category would help to mee the deconcentration goal and/or the income targeting goal.

The Ruston Housing Authority will contact the family first by telephone to make the unitoffer. If the family cannot be reached by telephone, the family will be notified of a unit offer via first transmail. The family will be given five (5) business days from the date the letter was mailed to contact the Ruston Housing Authority regarding the offer.

The family will be offered the opportunity to view the unit. After the opportunity to view the unit, the family will have two (2) business days to accept or reject the unit. This verbal offer and the family's decision must be documented in the tenant file. If the family rejects the offer of the unit, the Ruston Housing Authority will send the family letter documenting the offer and the rejection.

#### 10.7 REJECTIONOFUN IT

If in making the offer to the family the Ruston Housing Authority skipped over other families on the waiting list in order to meet their deconcentration goal or offered the family any other deconcentration incentive and the family rejects the unit, the family willnotlose their place on the waiting list and will not be otherwise penalized.

If the Ruston Housing Authority did not skip over other families on the waiting list to reach this family, did not offer any other deconcentration incentive, and the family rejects the unit without good cause, the family will forfeit their application's date and time. The family will keep their preferences, but the date and time of application will changed to the date and time the unit was rejected.

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If the family rejects two offers without good cause, they will be purged from the waitinglistandmustreapplytobeconsidered again.

If the family rejects with good cause any unit offered, the y will not lose their place on the waiting list. Good cause includes reasons related to health, proximity to work, school, and child care (for those working or going to school). The family will be offered the right to an informal review of the decision to a liter the irapplication status.

#### 10.8 ACCEPTANCEOFU NIT

Thefamilywillberequiredtosignaleasethatwillbecomeeffectivenolaterthanthree (3)businessdays,unlessforgoodcausealongertimeisgranted,afterofacceptanceor thebusinessdaya fterthedaytheunitbecomesavailable,whicheverislater.

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Prior to signing the lease all families (head of household) and other adult family memberswillberequiredtoattendtheLeaseandOccupancyOrientationwhentheyare initially accepted for oc cupancy. The family will not be housed if they have not attended the orientation. Applicants who provide prior notice of an inability to attend the orientation will be rescheduled. Failure of an applicant to attend the orientation, withoutgoodcause,may resultinthecancellationoftheoccupancyprocess.

The applicant will be provided a copy of the lease, the grievance procedure, utility allowances, utility charges, the current schedule of routine maintenance charges, and a request for reasonable accomm odation form. These documents will be explained in detail. The applicant will sign a certification that they have received these documents and that they have reviewed them with Housing Authority personnel. The certification will be filed in the tenant's fi le.

The signing of the lease and the review of financial information are to be privately handled. The head of household and all adult family members will be required to execute the lease prior to admission. One executed copy of the lease will be furnished to the head of household and the Ruston Housing Authority will retain the original executed lease in the tenant's file. Acopyof the grievance procedure will be attached to the resident's copyof the lease.

The family will pay a security depositat the time of lease signing. The security deposit will be equal to \$125

In exceptional situations, the Ruston Housing Authority reserves the right to allow a newresidenttopaytheirsecuritydepositinstallments.

In the event of a transfer, and there are costs attributable to the family for bringing the first unit into condition for renting, the family shall be billed for these charges.

### 11.0 INCOME, EXCLUSI ONSFROMINCOME, AND DEDUCTIONSFROMINCO ME

To determine annual income, the Ruston Housing Auth ority counts the income of all family members, excluding the types and sources of income that are specifically excluded. Once the annual income is determined, the Ruston Housing Authority subtractsallallowabledeductions(allowances)todeterminetheTot alTenantPayment.

#### 11.1 INCOME

Annualincomemeansallamounts, monetary ornot, that:

A. Goto(oronbehalfof)thefamilyheadorspouse(eveniftemporarilyabsent)or toanyotherfamilymember;or

- B. Are anticipated to be received from as ource outside the family during the 12 month period following admission or annual reexamination effective date; and
- C. Arenotspecificallyexcludedfromannualincome.

Annualincomeincludes, but is not limited to:

- A. Thefullamount, before any payro lldeductions, of wages and salaries, overtime pay, commissions, fees, tips and bonuses, and other compensation for personal services.
- B. Thenetincomefrom the operation of abusiness or profession. Expenditures for business expansion or amortization of capital indebtedness are not used as deductions in determining net income. An allowance for depreciation of assets used in a business or profession may be deducted, based on straight -line depreciation, as provided in Internal Revenue Service regulations. Any withdrawal of cash or assets from the operation of a business or profession is included in income, except to the extent the withdrawal is a reimbursement of cashor assets invested in the operation by the family.
- C. Interest, dividends, and other net income of any kind from real or personal property. Expenditures for amortization of capital indebtedness are not used as deductions in determining net income. An allowance for depreciation of assets used in a business or profession may be deducted, based on straight -line depreciation, as provided in Internal Revenue Service regulations. Any withdrawal of cash or assets from an investment is included in income, except to the extent the withdrawal is reimbursement of cash or assets invested by the family. Where the family has net family assets in excess of \$5,000, annual income includes the greater of the actual income derived from all net family assets or apercentage of the value of such assets based on the current passbook savingsrate, asdetermined by HU D.
- D. The full amount of periodic amounts received from Social Security, annuities, insurance policies, retirement funds, pensions, disability or death benefits, and other similar types of periodic receipts, including a lump -sum amount or prospective mon thly amounts for the delayed start of a periodic amount. (However, deferred periodic amounts from supplemental security income and Social Security benefits that are received in a lump sum amount or in prospectivemonthlyamountsareexcluded.)
- E. Payments in lieu of earnings, such as unemployment and disability compensation, worker's compensation, and severance pay. (However, lumpsum additions such as insurance payments from worker's compensation are excluded.)
- F. Welfareassistance.

- 1. If the welfar e assistance payment includes an amount specifically designated for shelter and utilities that is subject to adjustment by the welfare assistance agency in accordance with the actual cost of shelter and utilities, the amount of welfare assistance income to be included as income consists of:
  - a. The amount of the allowance or grant exclusive of the amount specifically designated for shelter or utilities; plus
  - b. The maximum amount that the welfare assistance agency could in fact allow the family for shel ter and utilities. If the family's welfare assistance is ratably reduced from the standard of need by applying a percentage, the amount calculated under this requirement is the amount resulting from one application of the percentage.
- 2. If the amount of welfare is reduced due to an act of fraud by a family member or because of any family member's failure to comply with requirements to participate in an economic self -sufficiency program or work activity, the amount of rent required to be paid by the family will notbedecreased. Insuch cases, the amount of income attributable to the family will include what the family would have received had they complied with the welfare requirements and/or had not committed an act off raud.
- 3. If the amount of welfare assistance is reduced as a result of a lifetime time limit, the reduced amount is the amount that shall be counted as income.
- G. Periodicanddeterminableallowances, such as a limony, child support payments, and regular contributions or gifts received f rom organizations or from persons not residing in the dwelling.
- H. Allregularpay, special pay, and allowances of a member of the Armed Forces. (Special pay to a member exposed to hostile fire is excluded.)

### 11.2 ANNUALINCOME

Annualincomedoesnot includethefollowing:

A. Income from employment of children (including foster children) under the age of 18 years;

- B. Payments received for the care of foster children or foster adults (usually persons with disabilities, unrelated to the tenant family, who are unable to live alone);
- C. Lump-sum additions to family assets, such as inheritances, insurance payments (including payments under health and accident insurance and worker's compensation), capital gains, and settlement for personal or property los ses;
- D. Amounts received by the family that are specifically for, or in reimbursement of, the cost of medical expenses for any family member;
- E. Incomeofalive -inaide;
- F. Thefullamountofstudentfinancialassistancepaiddirectlytothestudentor to theeducationalinstitution;
- G. The special pay to a family member serving in the Armed Forces who is exposed to hostile fire;
- H. Theamountsreceivedfromthefollowingprograms:
  - 1. AmountsreceivedundertrainingprogramsfundedbyHUD;
  - 2. Amountsreceivedbyapersonwithadisabilitythataredisregardedfora limited time for purposes of Supplemental Security Income eligibility and benefits because they are set aside for use under a Plan to Attain Self-Sufficiency(PASS);
  - 3. Amounts received by a participant in other publicly assisted programs that are specifically for or in reimbursement of out -of-pocket expenses incurred (special equipment, clothing, transportation, child care, etc.) andthataremadesolelytoallowparticipationinaspecif icprogram;
  - 4. Amounts received under a resident service stipend. A resident service stipend is a modest amount (not to exceed \$200 per month) received by a resident for performing a service for the Housing Authority or owner, on apart -time basis, that nhances the quality of life in the development. Such services may include, but are not limited to, fire patrol, hall monitoring, lawn maintenance, and resident initiatives coordination. No resident may receive more than one such stipend during the same per iod of time;
  - 5. Incremental earnings and benefits resulting to any family member from participation in qualifying State or local employment training programs (including training programs not affiliated with a local government) and training of a family mem ber as resident management staff. Amounts

excluded by this provision must be received under employment training programs with clearly defined goals and objectives and are excluded only for the period during which the family member participates in the employment training program;

- 6. Temporary, nonrecurringorsporadicincome(includinggifts);
- 7. Reparation payments paid by a foreign government pursuant to claims filed under the laws of that government by persons who we repersecuted during the Naziera;
- 8. Earnings in excess of \$480 for each full -time student 18 years old or older(excludingtheheadofhouseholdandspouse);
- 9. Adoptionassistancepaymentsinexcessof\$480peradoptedchild;
- 10. For family members who enrolled in certain training progr ams prior to 10/1/99, the earnings and benefits resulting from the participation if the program provides employment training and supportive services in accordance with the Family Support Act of 1988, Section 22 of the 1937 Act (42 U.S.C. 1437t), or any com parable Federal, State, or local law during the exclusion period. For purposes of this exclusion the following definitions apply:
  - a. Comparable Federal, State or local law means a program providingemploymenttrainingandsupportiveservicesthat:
    - i. IsauthorizedbyaFederal,Stateorlocallaw;
    - ii. IsfundedbytheFederal,Stateorlocalgovernment;
    - iii. Isoperatedoradministeredbyapublicagency;and
    - iv. Has as its objective to assist participants in acquiring employmentskills.
  - b. Exclusion period means the period during which the family member participates in a program described in this section, plus 18 months from the date the family member begins the first job acquired by the family member after completion of such program that is not funded by public housing assistance under the 1937 Act. If the family member is terminated from employment with goodcause, the exclusion period shallend.
  - c. Earnings and benefits means the incremental earnings and benefits resulting from a qualifying empl oyment training programorsubsequentjob.
- 11. The incremental earnings due to employment during the 12 -month

period following date of hire shall be excluded. This exclusion (paragraph11)willnotapplyforanyfamilywhoconcurrentlyiseligible for exc lusion #10. Additionally, this exclusion is only available to the followingfamilies:

- a. Families whose income increases as a result of employment of a family member who was previously unemployed for one or more years.
- b. Families whose income increases during the participation of a familymemberinanyfamilyself -sufficiencyprogram.
- c. Familieswhoareorwere,within6months,assistedunderaState TANFprogram.

(While HUD regulations allow for the housing authority to offer an escrow account in li eu of having a portion of their income excluded underthisparagraph, it is the policy of this housing authority to provide the exclusion in all cases.)

- 12. Deferred periodic amounts from supplemental security income and Social Security benefits that are prospectivemonthlyamounts;
- 13. Amounts received by the family in the form of refunds or rebates under Stateor local law for property taxes paid on the dwelling unit;
- 14. Amounts paid by a State agency to a family with a member who has a developmental disability and is living at home to offset the cost of services and equipment needed to keep the developmentally disabled familymemberathome; or
- 15. Amounts specifically excluded by any other Federal statute from consideration as income for purposes of determining eligibility or benefits. These exclusions include:
  - a. Thevalueoftheallotmentoffoodstamps
  - b. Payments to volunteers under the Domestic Volunteer Services Actof1973
  - c. Payments received under the Alaska Native Claims Settlement Act
  - d. Income from submarginal land of the U.S. that is held intrust for certain Indiantribes

- e. Payments made under HHS's Low -Income Energy Assistance Program
- f. PaymentsreceivedundertheJobTrainingPartnershipA ct
- g. Income from the disposition of funds of the Grand River Band of Ottawa Indians
- h. The first \$2000 per capita received from judgment funds awardedforcertainIndianclaims
- i. Amount of scholarships awarded under Title IV including Work Study
- j. PaymentsreceivedundertheOlderAmericansActof1965
- k. PaymentsfromAgentOrangeSettlement
- 1. PaymentsreceivedundertheMaineIndianClaimsAct
- m. The value of child care under the Child Care and Development BlockGrantActof1990
- n. Earnedincometaxcreditrefundpayments
- o. PaymentsforlivingexpensesundertheAmeriCorpsProgram
- p. Additional income exclusions provided by and funded by the RustonHousingAuthority

The Ruston Housing Authority will not provide exclusions from income in addition to those already provided for by HUD.

#### 11.3 DEDUCTIONSFROM ANNUALINCOME

The following deductions will be made from annual income:

- A. \$480foreachdependent;
- B. \$400foranyelderlyfamilyordisabledfamily;
- C. For any family that is n ot an elderly or disabled family but has a member (other than the head or spouse) who is a person with a disability, disability assistance expenses in excess of 3% of annual income. This allowance may not exceed the employment income received by family mem bers who are 18 years of age or

older as a result of the assistance to the person with disabilities.

- D. Foranyelderlyordisabledfamily:
  - 1. That has no disability assistance expenses, an allowance for medical expensesequaltotheamountbywhichthemed icalexpensesexceed3% of annual income;
  - 2. That has disability expenses greater than or equal to 3% of annual income, an allowance for disability assistance expenses computed in accordance with paragraph C, plus an allowance for medical expenses that equal the family's medical expenses;
  - 3. That has disability assistance expenses that are less than 3% of annual income, an allowance for combined disability assistance expenses and medical expenses that is equal to the total of these expenses less 3% of annualin come.
- E. Childcareexpenses.

# **12.0 VERIFICATION**

The Ruston Housing Authority will verify information related to waiting list preferences, eligibility, admission, and level of benefits prior to admission. Periodically during occupancy, items related to e ligibility and rent determination shall also be reviewed and verified. Income, assets, and expenses will be verified, as well as disability status, needforalive -inaide and other reasonable accommodations; full time student status of family members 18 y ears of age and older; Social Security numbers; and citizenship/eligible noncitizen status. Age and relationship will only be verified in those instances where needed to make a determination of level of assistance.

## 12.1 ACCEPTABLEMETH ODSOFVERIFICATION

Age, relationship, U.S. citizenship, and Social Security numbers will generally be verified with documentation provided by the family. For citizenship, the family's certification will be accepted. (Or for citizenship documentation such as listed below wll be required.) Verification of these items will include photocopies of the Social Security cards and other documents presented by the family, the INS SAVE approval code, and forms signed by the family.

O ther information will be verified by third partyv erification. This type of verification includes written documentation with forms sent directly to and received directly by a source, not passed through the hands of the family. This verification may also be direct contact with the source, in person or by elephone. It may also be are port generated by a request from the Ruston Housing Authority or automatically by another government agency, i.e. the Social Security Administration. Verification forms and reports received

will be contained in the applicant/te nant file. Oral third party documentation will include the same information as if the documentation had been written, i.e. name date of contact, amount received, etc.

When third party verification cannot be obtained, the Ruston Housing Authority will accept documentation received from the applicant/tenant. Hand -carried documentation will be accepted if the Ruston Housing Authority has been unable to obtain third party verification in a 4 -week period of time. Photocopies of the documents provided by the family will be maintained in the file.

When neither third party verification norhand -carried verification can be obtained, the Ruston Housing Authority will accept anotarized statement signed by the head, spouse or co-head. Such documents will be maintain ned in the file.

## 12.2 TYPESOFVERIFI CATION

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The chart below outlines the factors that may be verified and gives common examples of the verification that will be sought. To obtain written third party verification, the Ruston Housing Authority will send a request form to the source along with a release form signed by the applicant/tenantvia first classmail.

VerificationRequirementsforIndividualItems				
ItemtoBeVerified	3 <sup>rd</sup> partyverification	Hand-carriedverification		
GeneralEligibilityItem s				
SocialSecurityNumber	LetterfromSocialSecurity, electronicreports	SocialSecuritycard		
Citizenship	N/A	Signedcertification,voter's registrationcard,birth certificate,etc.		
Eligibleimmigrationstatus	INSSAVEconfirmation#	INScard		
Disability	Letterfrommedicalprofessional, SSI,etc	ProofofSSIorSocialSecurity disabilitypayments		
Fulltimestudentstatus(if >18)	Letterfromschool	Forhighschoolstudents,any documentevidencing enrollment		
Needforalive -inaide	Letterfromdoctororother professionalknowledgeableof condition	N/A		

VerificationRequirementsforIndividualItems				
ItemtoBeVerified	3 <sup>rd</sup> partyverification	Hand-carriedverification		
Childcarecosts	Letterfromcareprovider	Billsandreceipts		
Disabilityassistance expenses	Lettersfromsuppliers, caregivers, etc.	Billsandrecordsofpayment		
Medicalexpenses	Lettersfromproviders, prescriptionrecordfrompharmacy, medicalprofessional'sletterstating assistanceoracompanionanimalis needed	Bills,receipts,recordsof payment,datesoftrips, mileagelog,receiptsforfares andtolls		
ValueofandIncomefromA	Assets			
Savings, checking accounts	Letterfrominstitution	Passbook,mostcurrent statements		
CDS,bonds,etc	Letterfrominstitution	Taxreturn, information brochure from institution, the CD, the bond		
Stocks	Letterfrombroker orholding company	Stockormostcurrent statement,priceinnewspaper orthroughInternet		
Realproperty	Letterfromtaxoffice,assessment, etc.	Propertytaxstatement(for currentvalue),assessment, recordsorincomeand expenses,taxreturn		
Personalproperty	Assessment,bluebook,etc	Receiptforpurchase,other evidenceofworth		
Cashvalueoflife insurancepolicies	Letterfrominsurancecompany	Currentstatement		
Assetsdisposedofforless thanfairmarketvalue	N/A	Originalreceipt andreceiptat disposition,otherevidenceof worth		
Income				
Earnedincome	Letterfromemployer	Multiplepaystubs		
Self-employed	N/A	Taxreturnfromprioryear,		

VerificationRequirementsforIndividualItems			
ItemtoBeVerified	3 <sup>rd</sup> partyverification	Hand-carriedverification	
		booksofaccounts	
Regulargiftsand contributions	Letterfromsource,letterfrom organizationreceivinggift(i.e.,if grandmotherpaysdaycareprovider, thedaycareprovidercouldsostate)	Bankdeposits,othersimilar evidence	
Alimony/childsupport	Courtorder, letterfromsource, letter fromHumanServices	Recordofdeposit s,divorce decree	
Periodicpayments(i.e., socialsecurity,welfare, pensions,workers compensation, unemployment)	Letterorelectronicreportsfromthe source	Awardletter,letterannouncing changeinamountoffuture payments	
Trainingprogram participation	Letterfromprogramprovider indicating -whetherenrolledorcompleted -whethertrainingisHUD -funded -whetherFederal,State,localgovt., orlocalprogram -whetheritisemploymenttraining -whetherithasclearlydefinedgoals andobje ctives -whetherprogramhassupportive services -whetherpaymentsareforout -of- pocketexpensesincurredinorderto participateinaprogram -dateoffirstjobafterprogram completion	N/A Evidenceofjobstart	

# 12.3 VERIFICATIONOF CITI ZENSHIPORELIGIBLE NONCITIZENSTATUS

The citizen ship/eligible noncitizen status of each family member regardless of a gemust be determined.

Prior to being admitted, or at the first reexamination, all citizens and nationals will be required to sign a dec laration under penalty of perjury. They will be required to show proof of their status by such means as a birth certificate, military ID, or military DD 214Form.

Priortobeing admitted or at the first reexamination, all eligible noncitizens who are 62 years of age or older will be required to sign a declaration under penalty of perjury. They will also be required to show proof of age.

Priortobeing admitted or at the first reexamination, all eligible noncitizens must sign a declaration of the irst aux and averification consent form and provide the iroriginal INS documentation. The Ruston Housing Authority will make a copy of the individual's INS documentation and place the copy in the file. The Ruston Housing Authority will also verify the irst at us thr ough the INSSAVE system. If the INSSAVE system cannot confirm eligibility, the Ruston Housing Authority will mail information to the INS in order that amanual check can be made of INS records.

Familymemberswhodonotclaimtobecitizens, nationals, oreligible noncitizens must belisted on a statement of noneligible members and the list must be signed by the head of the household.

Noncitizen students on student visas, though in the country legally, are not eligible to beadmitted topublichousing.

Any family member who does not choose to declare their status must be listed on the statement of noneligible members.

If no family member is determined to be eligible under this section, the family's eligibility will be denied.

The family's assistance will not be denied, delayed, reduced, or terminated because of a delay in the process of determining eligible status under this section, except to the extent that the delay is caused by the family.

If the Ruston Housing Authority determines that a family member has knowingly permitted an ineligible noncitizen (other than any ineligible noncitizens listed on the lease) to permanently reside in their public housing unit, the family will be evicted. Such family will not be eligible to be readmitted to publich ousing for a period of 24 monthsfrom the date of eviction or termination.

#### 12.4 VERIFICATIONOF SOCIALSECURITYNUM BERS

Priortoadmission, each family member who has a Social Security number and who is at least 6 years of age must provide verification of their Social Security number. New family members at least 6 years of age must provide this verification prior to being added to the lease. Children in assisted households must provide this verification at the first regular reexamination after turning si x.

The best verification of the Social Security number is the original Social Security card. If the card is not available, the Ruston Housing Authority will accept letters from the Social Security Agency that establishes and states the number. Documentati on from other governmental agencies will also be accepted that establishes and states the number. Driver's licenses, military IDs, passports, or other official documents that establishandstatethenumberarealsoacceptable.

If an individual states that they do not have a Social Security number, they will be required to sign a statement to this effect. The Ruston Housing Authority will not require any individual who does not have a Social Security number to obtain a Social Security number.

If a member of an applicant family indicates they have a Social Security number, but cannot readily verify it, the family cannot behoused until verification is provided.

If a member of a tenant family indicates they have a Social Security number, but cannot readily verify it, they shall be asked to certify to this fact and shall have up to sixty (60) days to provide the verification. If the individual is at least 62 years of age, they will be given one hundred and twenty (120) days to provide the verification. If the individual fails to provide the verification within the time allowed, the family will be evicted.

#### 12.5 TIMINGOFVERIF ICATION

Verification information must be dated within ninety (90) days of certification or reexamination. If the verification is older t han this, the source will be contacted and askedtoprovide information regarding any changes.

When an interim reexamination is conducted, the Housing Authority will verify and update all information related to family circumstances and level of assistance .(Or, the Housing Authority will only verify and update those elements reported to have changed.)

#### 12.6 FREQUENCYOFOB TAININGVERIFICATION

For each family member, citizenship/eligible noncitizen status will be verified only once. This verification will be obtained prior to admission. If the status of any family member was not determined prior to admission, verification of their status will be obtained at the next regular reexamination. Prior to a new member joining the family, their citizenship/eligible noncitizen status will be verified.

For each family member age 6 and above, verification of Social Security number will beobtained only once. This verification will be accomplished prior to admission. When a family member who did not have a Social Securi ty number at admission receives a Social Security number, that number will be verified at the next regular reexamination. Likewise, when a child turns six, their verification will be obtained at the next regular reexamination.

# 13.0 DETERMINATIONO FTOTAL TENANTPAYMENTAND TENANTRENT

# 13.1 FAMILYCHOICE

At admission and each year in preparation for their annual reexamination, each family is given the choice of having their rent determined under the formula method or having their rent set at the flat rent amount.

- A. Families who opt for the flat rent will be required to go through the income reexamination process every three years, rather than the annual review they wouldotherwiseundergo.
- B. Families who opt for the flat rent may request to have a reex amination and returntotheformulabasedmethodatanytimeforanyofthefollowingreasons:
  - 1. Thefamily'sincomehasdecreased.
  - 2. The family's circumstances have changed increasing their expenses for childcare, medical care, etc.
  - 3. Other circums tances creating a hardship on the family such that the formulamethodwouldbemorefinanciallyfeasibleforthefamily.

## 13.2 THEFORMULAMET HOD

Thetotaltenantpaymentisequaltothehighestof:

- A. 10%ofmonthlyincome;or
- B. 30% of adjusted monthly income.

The family will pay the greater of the total tenant payment or the minimum rent of \$50.

In the case of a family who has qualified for the income exclusion at Section 11.2(H)(11), upon the expiration of the 12 -month period described in that section, an additional rent benefit accrues to the family. If the family member's employment continues, then for the 12 -month period following the 12 -month period of disallowance, the resulting rent increase will be capped at 50 percent of the rent increase ethe family would have otherwise received.

## 13.3 MINIMUMRENT

The Ruston Housing Authority has set the minimum rent at \$50 However if the family requests a hardship exemption, the Ruston Housing Authority will immediately suspended to the set of t

the minimum rent for the efamily until the Housing Authority can determine whether the hardship exists and whether the hardship is of a term nature.

- A. Ahardshipexistsinthefollowingcircumstances:
  - 1. When the family has lost eligibility for or is waiting an eligibility determinationforaFederal,State,orlocalassistanceprogram;
  - 2. When the family would be evicted as a result of the imposition of the minimum rentrequirement;
  - 3. When the income of the family has decreased because of changed circumstances, includingloss of employment;
  - 4. When the family has an increase in expenses because of changed circumstances, formedical costs, childcare, transportation, education, or similaritems;
  - 5. Whenadeathhasoccurredinthefamily.
- B. No hardship. If the Housing Authority determines there is no qualifying hardship, the minimum rent will be reinstated, including requiring back paymentofminimumrentforthetimeofsuspension.
- C. Temporary hardship. If the Housing Authority reasonably determinest hat there is a qualifying hardship but that it is of a temporary nature, the minimum rent will be not be imposed for a period of 90 days from the date of the family's request. At the end of the 90 -day period, the minimum rent will be imposed retroactively to the time of suspension. The Housing Authority will offer a repayment agreement in accordance with the Section 19 of this policy for any rentnot paid during the period of suspension. During the suspension period the Housing Authority will not evict the family for nonpayment of the amount of tenantrentowed for the suspension period.
- D. Long-term hardship. If the Housing Authority determines there is a long -term hardship, the family will be exempt from the minimum rent requirement until thehardshipno longerexists.
- E. Appeals. The family may use the grievance procedure to appeal the Housing Authority's determination regarding the hardship. No escrow deposit will be required in order to access the grievance procedure.

## 13.4 THEFLATRENT

TheRustonH ousingAuthorityhassetaflatrentforeachpublichousingunit.Indoing so, it considered the size and type of the unit, as well as its condition, amenities,

services, and neighborhood. The Ruston Housing Authority determined the market valueoftheun itandsettherentatthemarketvalue. The amount of the flatrent will be reevaluated annually and adjustments applied. Affected families will be given a 30 - day notice of any rent change. Adjustments are applied on the anniversary date for each affected family (formore information on flatrents, see Section 15.3).

The Ruston Housing Authority will post the flat rents at each of the developments and at the central office and are incorporated in this policy upon approval by the Board of Commissioners.

#### 13.5 CEILINGRENT

The Ruston Housing Authority does not employ aceiling rent.

#### 13.6 RENTFORFAMILI ESUNDERTHENONCITI ZENRULE

A mixed family will receive full continuation of assistance if all of the following conditions are met:

- A. Thefamilywasr eceivingassistanceonJune19,1995;
- B. ThefamilywasgrantedcontinuationofassistancebeforeNovember29,1996;
- C. Thefamily'sheadorspousehaseligibleimmigrationstatus;and
- D. The family does not include any person who does not have eligible status other than the head of household, the spouse of the head of household, any parent of the head or spouse, or any child (under the age of 18) of the head or spouse.

If a mixed family qualifies for prorated assistance but decides not to accept it, or if the family has no eligible members, the family may be eligible for temporary deferral of termination of assistance to permit the family additional time for the orderly transition of some or all of its members to locate other affordable housing. Undert his provision, the family receives full assistance. If assistance is granted under this provision prior to November 29, 1996, it may last no longer than three (3) years. If granted after that date, the maximum period of time for assistance under the provise ion is eighteen (18) months. The Ruston Housing Authority will granteach family aperiod of six (6) monthstofind suitable affordable housing, the Ruston Housing Authority will provide additional sea rch periods up to the maximum time allowable.

Suitable housing means housing that is not substandard and is of appropriate size for the family. Affordable housing means that it can be rented for an amount not exceeding the amount the family pays for rent, plusuilities, plus 25%.

Thefamily'sassistanceisprorated in the following manner:

- A. Determine the 95<sup>th</sup> percentile of gross rents (tenant rent plus utility allowance) for the Ruston Housing Authority. The 95<sup>th</sup> percentile is called the maximum rent.
- B. Subtractthefamily'stotaltenantpaymentfromthemaximumrent. The resulting number is called the maximum subsidy.
- C. Divide the maximum subsidy by the number of family members and multiply theresulttimes the number of eligible family members. T his yields the prorated subsidy.
- D. Subtract the prorated subsidy from the maximum rent to find the prorated total tenant payment. From this amount subtract the full utility allowance to obtain the prorated tenant rent.

#### 13.7 UTILITYALLOWAN CE

The Rusto n Housing Authority shallestablish autility allowance for all check -metered utilities and for all tenant -paid utilities. The allowance will be based on a reasonable consumption of utilities by an energy -conservative household of modest circumstances consistent with the requirements of a safe, sanitary, and healthful environment. In setting the allowance, the Ruston Housing Authority will review the actual consumption of tenant families as well as changes made or anticipated due to modernization (weatheriz ation efforts, installation of energy -efficient appliances, etc). Allowances will be evaluated at least annually as well as any time utility rate changes by 10% ormore since the last revision to the allowances.

The utility allowance will be subtracted fr om the family's formula or flat rent to determine the amount of the Tenant Rent. The Tenant Rent is the amount the family oweseachmonthtotheRustonHousingAuthority. The amount of their utility allowance is then still available to the family to pay the cost of their utilities. Any utility cost above the allowance is the responsibility of the tenant. Any savings resulting from utilitycostsbelowtheamountoftheallowancebelongstothetenant.

For Ruston Housing Authority paid utilities, the Ruston Housing Authority will monitor the utility consumption of each household. Any consumption in excess of the allowance established by the Ruston Housing Authority will be billed to the tenant monthly.

Utilityallowancerevisions based on rate changes shall be effective retroactively to the first day of the month following the month in which the last rate change took place. Revisions based on changes in consumption or other reasons shall be come effective at each family's next annual reexamination. Families with high utility costs are encouraged to contact the utility company for an energy analysis. The analysis may identify problems with the dwelling unit that once corrected will reduce energy costs. The analysis can also assist the family inidentifying ways they can reduce their costs.

Requests for relief from surcharges for excess consumption of Ruston Housing Authority purchased utilities or from payment of utility supplier billings in excess of theutilityallowancefortenant -paidutilitycostsmaybegr antedbytheRustonHousing Authority on reasonable grounds. Requests shall be granted to families that include an elderly member or a member with disabilities. Requests by the family shall be submitted under the Reasonable Accommodation Policy. Families s hall be advised of their right to individual relief at admission to public housing and at time of utility allowancechanges.

#### 13.8 PAYINGRENT

Rent and other charges are due and payable on the first day of the month. All rents should be paid at 615 N. F armerville Street or 901 Martin Luther King, Jr.Drive. Reasonable accommodations for this requirement will be made for persons with disabilities.Asasafetymeasure,nocashshallbeacceptedasarentpayment

If the rent is not paid by the tenth of the month, a Notice to Vacate will be issued to the tenant. In addition, a \$10 late charge plus \$1 per day after the tenth of the month will be assessed to the tenant. If the rent is not paid by the fifteenth of the month the housing authority will file fore viction. At that time an administration fee equal to court costs assessed to the housing authority will be assessed to the tenant.

If rentispaid by a personal check and the check is returned for insufficient funds, this shall be considered a non -payment of rent and will incur the late charge plus an additional charge of \$15 for processing costs.

# 14.0 CONTINUEDOCCUP ANCYANDCOMMUNITY SERVICE <u>COMMUNITYSERVICERE QUIREMENTSHAVEBEEN ELIMINATED</u> 14.1 GENERAL

In order to be eligible for continued occu pancy, each adult family member must either (1) contribute eight hours per month of community service (not including political activities) within the community in which the public housing development is located, or (2) participate in an economic self -sufficiency program unless they are exempt from this requirement

#### 14.2 EXEMPTIONS

The following adult family members of tenant families are exempt from this

requirement.

- A. Familymemberswhoare62orolder
- B. Familymemberswhoareblindordisabled
- C. Family members who are the primary care giver for someone who is blind or disabled
- D. Familymembersengagedinworkactivity
- E. FamilymemberswhoareexemptfromworkactivityunderpartAtitleIVofthe Social Security Act or under any other State wel fare program, including the welfare-to-workprogram
- F. Family members receiving assistance under a State program funded under part A title IV of the Social Security Actor under any other State welf are program, including welfare -to-work and who are incompliance with that program

#### 14.3 NOTIFICATIONOF THEREQUIREMENT

The Ruston Housing Authority shall identify all adult family members who are apparentlynotexemptfromthecommunityservicerequirement.

The Ruston Housing Authority shall notify all such family members of the community service requirement and of the categories of individuals who are exempt from the requirement. The notification will provide the opportunity for family members to claim and explain an exempt status. The Ruston Housing Author ity shall verify such claims.

The notification will advise families that their community service obligation will begin upon the effective date of their first annual reexamination on or after 10/1/99. For family's paying a flatrent, the obligation begins on the date their annual reexamination would have been effective had an annual reexamination taken place. It will also advise them that failure to comply with the community service requirement will result in ineligibility for continued occupancy at the tim e of any subsequent annual reexamination.

## 14.4 VOLUNTEEROPPOR TUNITIES

Communityservice includes performing work or duties in the public benefit that serve to improve the quality of life and/or enhance resident self -sufficiency, and/or increase thesel f-responsibility of the resident within the community.

Aneconomicselfsufficiencyprogramisonethatisdesignedtoencourage, assist, train orfacilitate the economic independence of participants and their families or to provide work for participant s. These programs may include programs for job training, work

placement, basic skills training, education, English proficiency, work fare, financial or household management, apprenticeship, and any program necessary to ready a participanttowork(suchas substanceabuseormentalhealthtreatment).

The Ruston Housing Authority will coordinate with social service agencies, local schools, and the Human Resources Office in identifying a list of volunteer community service positions.

Together with the resid entadvisory councils, the Ruston Housing Authority may create volunteer positions such as hall monitoring, litter patrols, and supervising and record keeping for volunteers.

#### 14.5 THEPROCESS

At the first annual reexamination on or after October 1, 1999 , and each annual reexaminationthereafter, the Ruston Housing Authority will do the following:

- A. Providealistofvolunteeropportunitiestothefamilymembers.
- B. Provideinformationaboutobtainingsuitablevolunteerpositions.
- C. Provide a volunte er time sheet to the family member. Instructions for the time sheet require the individual to complete the form and have a supervisor date and sign for each period of work.
- D. Assign family members to a volunteer coordinator who will assist the family members in identifying appropriate volunteer positions and in meeting their responsibilities. The volunteer coordinator will track the family member's progress monthly and will meet with the family member as needed to best encouragecompliance.
- E. Thirty (30) days before the family's next lease anniversary date, the volunteer coordinator will advise the Ruston Housing Authority whether each applicable adultfamilymemberisincompliance with the community service requirement.

#### 14.6 NOTIFICATION OF NON-COMPLIANCE WITH COMMUNITY SERVICE REQUIREMENT

The Ruston Housing Authority will not if yany family found to be innoncompliance of the following:

- A. Thefamilymember(s)hasbeendeterminedtobeinnoncompliance;
- B. Thatthedeterminationissubjecttothe grievanceprocedure;and

C. That, unless the family member(s) enterinto an agreement to comply, the lease will not be renewed or will be terminated;

#### 14.7 OPPORTUNITYFOR CURE

The Ruston Housing Authority will offer the family member (s) the opport unit yto enter into an agreement prior to the anniversary of the lease. The agreement shall state that the family member (s) agrees to enter into an economic self -sufficiency program or agrees to contribute to community service for as many hours as needed to co mply with the requirement over the past 12 -month period. The cure shall occur over the 12 -month period beginning with the date of the agreement and the resident shall at the same time stay current with that year's community service requirement. The firsth ours are sident earns goes to ward the current commitment until the current year's commitment is made.

The volunteer coordinator will assist the family member in identifying volunteer opportunities and will track compliance on a monthly basis.

If any appl icable family member does not accept the terms of the agreement, does not fulfill their obligation to participate in an economic self -sufficiency program, or falls behind in their obligation under the agreement to perform community service by more than thr ee (3) hours after three (3) months, the Ruston Housing Authority shall take action to terminate the lease.

# **15.0 RECERTIFICATIONS**

 $\label{eq:linear} At least annually, the Ruston Housing Authority will conduct are examination of family income and circumstances. The results of the reexamination determine (1) the rent the family will pay, and (2) whether the family is housed in the correct unit size.$ 

## 15.1 GENERAL

The Ruston Housing Authority will send anotification letter to the family letting them know that it is time for their annual reexamination, giving them the option of selecting either the flat rent or formula method, and scheduling an appointment if they are currently paying a formularent. If the family thinks they may want to switch from a flat rent to a formula rent, they should request an appointment. At the appointment, the family can make their final decision regarding which rent method they will choose. The letter also includes, for those families paying the formula method, forms for the family to complete in preparation for the interview. The letter tells families who may need to make alternate arrangements due to a disability that they may contact staff to request an accommodation of the interview.

During the appointment, the Ruston Housing Authority will determine whether family composition may require a transfer to a different bedroom size unit, and if so, the family'snamewillplacedonthetransferlist.

#### 15.2 MISSEDAPPOINTMENTS

If the family fails to respond to the letter and fails to attend the interview, a second letter will be mailed. The second letter will advise of a new time and date for the interview, allowing for the same considerations for reschedul ing and accommodation as above. The letter will also advise that failure by the family to attend the second scheduled interview will result in the Ruston Housing Authority taking eviction actions against the family.

#### 15.3 FLATRENTS

The annual letter to flat rent payers regarding the reexamination process will state the following:

- A. Each year at the time of the annual reexamination, the family has the option of selecting a flat rent amount in lieu of completing there examination process and having their rent based on the formula amount.
- B. Theamountoftheflatrent
- C. A fact sheet about formularents that explains the types of income counted, the most common types of income excluded, and the categories allowances that can be deducted from income.
- D. Families who opt for the flat rent will be required to go through the income reexamination process every three years, rather than the annual review they otherwisewouldundergo.
- E. Families who opt for the flat rent may request to have a reexamination an d returntotheformula -basedmethodatanytimeforanyofthefollowingreasons:
  - 1. Thefamily'sincomehasdecreased.
  - 2. The family's circumstances have changed increasing their expenses for childcare, medical care, etc.
  - 3. Other circumstances crea ting a hardship on the family such that the formulamethodwouldbemorefinanciallyfeasibleforthefamily.
- F. The dates upon which the Ruston Housing Authority expects to review the amount of the flat rent, the approximate rent increase the family coul dexpect, and the approximate date upon which a future rent increase could become effective.
- G. The name and phone number of an individual to call to get additional

informationorcounselingconcerningflatrents.

H. Acertificationforthefamilytosig nacceptingordecliningtheflatrent.

Each year prior to their anniversary date, Ruston Housing Authority will send a reexamination letter to the family offering the choice between a flator a formularent. The opportunity to select the flat rentisava ilable only at this time. At the appointment, the Ruston Housing Authority may assist the family inidentifying the rent method that would be most advantageous for the family. If the family wishes to select the flat rent method without meeting with the Rus ton Housing Authority representative, they may make the selection on the form and return the form to the Ruston Housing Authority. In such case, the Ruston Housing Authority will cancel the appointment.

## 15.4 THEFORMULAMET HOD

During the interview, the f amily will provide all information regarding income, assets, expenses, and other information necessary to determine the family's share of rent. The family will sign the HUD consent form and other consent forms that later will be mailed to the sources that will verify the family circumstances.

Upon receipt of verification, the Ruston Housing Authority will determine the family's annual income and will calculate their rent as follows.

Thetotaltenantpaymentisequaltothehighestof:

- A. 10% of monthly income; or
- B. 30% of adjusted monthly income.

The family will pay the greater of the total tenant payment or the minimum rent of \$50, but never more than the ceiling rent.

#### 15.5 EFFECTIVEDATE OFRENTCHANGESFOR ANNUALREEXAMINATION S

Thenewrentwi llgenerallybeeffectiveupontheanniversarydatewiththirty(30)days noticeofanyrentincreasetothefamily.

If the rent determination is delayed due to a reason beyond the control of the family, then any rent increase will be effective the first of the month after the month in which the family receives a 30 - day notice of the amount. If the new rent is a reduction and the delay is beyond the control of the family, the reduction will be effective as scheduled on the anniversary date.

If the family caused the delay, then any increase will be effective on the anniversary date. Any reduction will be effective the first of the month after the rent amount is

determined.

#### 15.6 INTERIMREEXAMI NATIONS

During an interim reexamination, only the information affected by the changes being reported will be reviewed and verified.

Families are required to report any increase in income or decreases in allowable expenses between annual reexaminations.

Families are required to report the following changes to the Ruston Housing Authority between regular reexaminations. If the family's rent is being determined under the formula method, these changes will trigger an interim reexamination. The family shall report the sechanges withinten (10) days of their occurrence.

- A. A member has been added to the family through birth or adoption or court awardedcustody.
- B. Ahouseholdmemberisleavingorhasleftthefamilyunit.

In order to add a household member other than through birth or adoption (including a live-inaid e),thefamilymustrequestthatthenewmemberbeaddedtothelease.Before adding the new member to the lease, the individual must complete an application form stating their income, assets, and all other information required of an applicant. The individual must provide their Social Security number if they have one and must verify their citizenship/eligible immigrant status. (Their housing will not be delayed due to delays in verifying eligible immigrant status other than delays caused by the family.) The new family member will go through the screening process similar to the process for applicants. The Ruston Housing Authority will determine the eligibility of the individual before adding them to the lease. If the individual is found to be in eligible or does not pass the screening criteria, they will be advised in writing and given the opportunity for an informal review. If they are found to be eligible and do pass the screening criteria, their name will be added to the lease. At the same time, if the family'srentisbeingdeterminedundertheformulamethod,thefamily'sannualincome will be recalculated taking into account the circumstances of the new family member. The effective date of the new rent will be in accordance with paragraph below 15.8.

Families are not required to, but may at any time, request an interim reexamination based on a decrease in income, an increase in allowable expenses, or other changes in family circumstances. Upon such request, the Ruston Housing Authority will take timelyact iontoprocess the interimree xamination and recalculate the tenant's rent.

#### 15.7 SPECIALREEXAMI NATIONS

If a family's income is too unstable to project for twelve (12) months, including families that temporarily have no income (0 renters) or have a tempo rary decrease in

income, the Ruston Housing Authority may schedule special reexaminations every sixty(60)daysuntiltheincomestabilizes and an annual income can be determined.

#### 15.8 EFFECTIVE DATE OF RENT CHANGES DUE TO INTERIM OR SPECIA L REEXAMINATIONS

Unless there is a delay in reexamination processing caused by the family, any rent increase will be effective the first of the second month after the month in which the family receives notice of the new rent amount. If the family causes a delay, then t rent increase will be effective on the date it would have been effective had the process notbeen delayed (even if this means are troactive increase).

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If the new rent is a reduction and any delay is beyond the control of the family, the reduction will beeffective the first of the month after the interimree xamination should have been completed.

If the new rent is a reduction and the family caused the delay or did not report the change in a timely manner, the change will be effective the first of the month after the rentamount is determined.

# **16.0 UNITTRANSFERS**

## 16.1 OBJECTIVESOFT HETRANSFERPOLICY

The objectives of the Transfer Policy include the following:

- A. Toaddressemergencysituations.
- B. To fully utilize available housing resources whi le avoiding overcrowding by insuringthateachfamilyoccupiestheappropriatesizeunit.
- C. Tofacilitatearelocationwhenrequiredformodernizationorothermanagement purposes.
- D. Tofacilitaterelocationoffamilieswithinadequatehousingaccommod ations.
- E. To provide an incentive for families to assist in meeting the Ruston Housing Authority's deconcentration goal.
- F. Toeliminatevacancylossandotherexpenseduetounnecessarytransfers.

# 16.2 CATEGORIESOFT RANSFERS

Category 1: Emergency tr ansfers. These transfers are necessary when conditions pose animmediate threat to the life, health, or safety of a family or one of its members. Such situations may involve defects of the unit or the building in which it is located, the

healthconditiono fafamilymember, a hatecrime, thesafety of witnesses to a crime, or alawenforcementmatterparticulartotheneighborhood.

Category 2: Immediate administrative transfers. These transfers are necessary in order topermitafamilyneedingaccessiblef eatures to move to a unit with such a feature or toenablemodernizationworktoproceed.

Category 3: Regular administrative transfers. These transfers are made to offer incentivestofamilies willing to help meet certain Ruston Housing Authority occupanc У goals, to correct occupancy standards where the unit size is inappropriate for the size and composition of the family, to allow for non -emergency but medically advisable transfers, and other transfers approved by the Ruston Housing Authority when a transferistheonlyorbestwayofsolvingaseriousproblem.

#### 16.3 DOCUMENTATION

When the transfer is at the request of the family, the family may be required to provide thirdpartyverificationoftheneedforthetransfer.

#### 16.4 **INCENTIVETRANS FERS**

Transfer requests will be encouraged and approved for families who live in a development where their income category predominates and wish to move to a developmentwheretheirincomecategorydoesnotpredominate.

#### 16.5 **PROCESSINGTRAN SFERS**

Transfers on the waiting list will be sorted by the above categories and within each categorybydateandtime.

Transfers in category 1 and 2 will be housed ahead of any other families, including those on the applicant waiting list. Transfers in category 1 will be house d ahead of transfersincategory2.

Transfersincategory3willbehousedalongwithapplicantsforadmissionataratioof onetransferforeverysevenadmissions.

Uponofferandacceptanceofaunit, the family will execute all lease updocuments and pay any rent and/or security deposit within two (2) days of being informed the unit is ready to rent. The family will be allowed seven (7) days to complete a transfer. The familywillberesponsibleforpayingrentattheoldunitaswellasthenewunit forany period of time they have possession of both. The prorated rent and other charges (key deposit and any additional security deposit owing) must be paid at the time of lease

#### execution.

Thefollowingisthepolicyfortherejectionofanoffertotran sfer:

- A. If the family rejects with good cause any unit offered, they will not lose their placeonthetransferwaitinglist.
- B. If the transferisbeing made at the request of the Ruston Housing Authority and the family rejects two offers without good cause, the Ruston Housing Authority will take action to terminate their tenancy. If the reason for the transfer is that the current unit is too small to meet the Ruston Housing Authority's optimum occupancy standards, the family may request in writing to stay in the unit without being transferred solong as the iroc cupancy will not exceed two people perliving/sleeping room.
- C. If the transfer is being made at the family's request and the rejected offer provides deconcentration incentives, the family will maintain their place on the transfer listand will not otherwise be penalized.
- D. If the transfer is being made at the family's request, the family may, without good cause and without penalty, turn down one offer that does not include deconcentration incen tives. After turning down a second such offer without goodcause, the family's name will be removed from the transfer list.

#### 16.6 COSTOFTHEFAM ILY'SMOVE

The cost of the transfer generally will be borne by the family in the following circumstances:

- A. When the transferis made at the request of the family or by others on behalf of the family (i.e. by the police);
- B. When the transfer is needed to move the family to an appropriately sized unit, either largerors maller;
- C. When the transfer is necessit ated because a family with disabilities needs the accessible unit into which the transferring family moved (The family without disabilities signed a statement to this effect prior to accepting the accessible unit);or
- D. Whenthetransferisneededbecaus eactionorinactionbythefamilycausedthe unittobeunsafeoruninhabitable.

The cost of the transfer will be borne by the Ruston Housing Authority in the following circumstances:

- A. Whenthetransferisneededinordertocarryoutrehabilitationa ctivities;or
- B. WhenactionorinactionbytheRustonHousingAuthorityhascausedtheunitto beunsafeorinhabitable.

Theresponsibilityformovingcosts in other circumstances will be determined on a case by case basis.

#### 16.7 TENANTSINGOOD STANDING

When the transfer is at the request of the family, it will not be approved unless the family is in good standing with the Ruston Housing Authority. This means the family must be in compliance with their lease, current in all payments to the Housing Authority, and must passahouse keeping inspection.

#### 16.8 TRANSFERREQUES TS

A tenant may request a transfer at any time. In considering the request, the Ruston Housing Authority may request a meeting with the tenant to be tter understand the need for transf er and to explore possible alternatives. The Ruston Housing Authority will review the request in a timely manner and if a meeting is desired, it shall contact the tenant withinten (10) business days of receipt of the request to schedule a meeting.

The Ru ston Housing Authority will grant or denythe transferre questin writing within ten (10) business days of receiving the request or holding the meeting, which ever is later.

If the transferis approved, the family's name will be added to the transfer waiting nglist.

If the transfer is denied, the denial letter will advise the family of the irright to utilize the grievance procedure.

## 16.9 RIGHTOFTHERU STONHOUSINGAUTHORI TYINTRANSFERPOLIC Y

The provisions listed above are to be used as a guide to insure of air and impartial means of assigning units for transfers. It is not intended that this policy will create a property rightor any other type of right for a tenant to transfer or refuse to transfer.

# **17.0 INSPECTIONS**

An authorized representative of the Ruston Housing Authority and an adult family member will inspect the premises prior to commencement of occupancy. A written statement of the condition of the premises will be made, all equipment will be provided, and the statement will be signed by both pa rties with a copy retained in the Ruston Housing Authority file and a copy given to the family member. An authorized Ruston Housing Authority representative will inspect the premises at the time the resident

vacates and will furnish a statement of any char ges to be made provided the resident turns in the proper notice under State law. The resident's security deposit can be used to offset against any Ruston Housing Authority damages to the unit.

#### 17.1 MOVE-ININSPECT IONS

The Ruston Housing Authority and an adult member of the family will inspect the unit prior to signing the lease. Both parties will sign a written statement of the condition of the unit. A copy of the signed inspection will be given to the family and the or iginal will be placed in the tenant file.

#### 17.2 ANNUALINSPECTI ONS

The Ruston Housing Authority will inspecte ach public housing unit annually to ensure that each unit meets the Ruston Housing Authority's housing stand ards. Work orders will be submitted and completed to correct any deficiencies.

#### 17.3 PREVENTATIVEMA INTENANCEINSPECTION S

This is generally conducted along with the annual inspection. This inspection is intended to keepi temsing ood repair. It checks weatherization; checks the condition of the smoke detectors, water heaters, furnaces, automatic thermostats and water temperatures; checks for leaks; and provides an opportunity to change furnace filters and provide othermin or servicing that extends the life of the unit and its equipment.

## 17.4 SPECIALINSPECT IONS

 $\label{eq:special-spectrum} A special inspection may be scheduled to enable HUD or other stoins pectas ample of the housing stock maintained by the Ruston Housing Authority.$ 

#### 17.5 HOUSEKEEPINGINSPECTIONS

Generally, at the time of annual reexamination, or at other times as necessary, the RustonHousingAuthoritywillconductahousekeepinginspectiontoensurethefamily ismaintainingtheunitinasafeandsanitarycondition.

#### 17.6 NOTICE OFINSPECTION

For inspections defined as annual inspections, preventative maintenance inspections, special inspections, and housekeeping inspections the Ruston Housing Authority will give the tenantatle ast two(2) day swritten notice.

#### 17.7 EMERGENCYINSPE CTIONS

 $\label{eq:constraint} If any employee and/or agent of the Ruston Housing Authority & has reason to believe \\ that an emergency exists within the housing unit, the unit can be entered without notic & e.$ 

The person(s) that enters the unit will leave a written notice to the resident that indicates the date and time the unit was entered and the reason why it was necessary to enter the unit.

## 17.8 MOVE-OUTINSPEC TIONS

The Ruston Housing Authority conducts the move -out inspection after the tenant vacates to assess the condition of the unit and determine responsibility for any needed repairs. When possible, the tenant is notified of the inspection and is encouraged to be present. This inspection becomes the basis for any claims that may be assessed against these curity deposit.

# **18.0 PETPOLICY**

#### Exclusions

This policy does not apply to animals that are used to assist persons with disabilities. Animals of assistance are allowed in all public housing facilities with no restrictions other than those imposed on all tenants to maintain their units and associated facilities in a decent, safe, and sanitary manner and to refrain from disturbing their neighbors.

#### **Pets In Public Housing**

The PHA allows for pet ownership in its developments with the written pre-approval of the Housing Authority. Residents are responsible for any damage caused by their pets, including the cost of fumigating or cleaning their units. In exchange for this right, resident assumes full responsibility and liability for the pet and agrees to hold the PHA harmless from any claims caused by an action or inaction of the pet.

## Approval

Residents must have prior written approval of the Housing Authority before moving a pet into their unit. Residents must request approval on the AAuthorization for Pet Ownership Form@

that must be fully completed before the Housing Authority will approve the request. Residents must give the Housing Authority a picture of the pet so it can be identified if it is running loose.

## Types and Number of Pets

The PHA will allow only common household pets. This means only domesticated animals such as a dog, cat, bird, rodent (including a rabbit), fish in aquariums or a turtle will be allowed in units. Common household pets do not include reptiles (except turtles). If this definition conflicts with a state or local law or regulation, the state or local law or regulation shall govern. All dogs and cats must be spayed or neutered before they become six months old. A licensed veterinarian must verify this fact. Only **1** pet per unit will be allowed.

Any animal deemed to be potentially harmful to the health or safety of others, including attack or fight-trained dogs, such as pit bulldogs, rottweiler, etc., will not be allowed.

No animal may exceed 16 pounds in weight or 16 inches in length projected to full adult size.

## Inoculations

In order to be registered, pets must be appropriately inoculated against rabies, distemper and other conditions prescribed by state and/or local ordinances. They must comply with all other state and local public health, animal control, and anticruelty laws including any licensing requirements. A certification signed by a licensed veterinarian or state or local official shall be annually filed with the PHA to attest to the inoculations.

#### Pet Deposit

A pet deposit of **\$100.00** (plus \$10.00 a month for 20 months) is required at the time of registering a pet. The deposit is refundable when the pet or the family vacates the unit, less any amounts owed due to damage beyond normal wear and tear. A separate deposit is required for each pet.

## Financial Obligation of Residents

Any resident who owns or keeps a pet in their dwelling unit will be required to pay for any damages caused by the pet. Also, any pet-related insect infestation in the pet owner=s unit will be the financial responsibility of the pet owner and the PHA reserves the right to exterminate and charge the resident.

#### Nuisance or Threat to Health or Safety

The pet and its living quarters must be maintained in a manner to prevent odors and any other unsanitary conditions in the owner=s unit and surrounding areas.

Repeated substantiated complaints by neighbors or PHA personnel regarding pets disturbing the peace of neighbors through noise, odor, animal waste, or other nuisance may result in the owner having to remove the pet or move himself/herself.

Pets who make noise continuously and/or incessantly for a period of 10 minutes or intermittently for one half hour or ore to the disturbance of any person at any time of day or night shall be considered a nuisance.

# **Designation of Pet Areas**

Pets must be kept in the owner=s apartment or on a leash at all times when outside the unit (no outdoor cages may be constructed). Pets will be allowed only in designated areas on the grounds of the property if the PHA designates a pet area for the particular site. Pet owners must clean up after their pets and are responsible for disposing of pet waste.

With the exception of animals of assistance, no pets shall e allowed in the community room, community room kitchen, laundry rooms, public bathrooms, lobby, hallways, or office in nay of our sites.

To accommodate residents who have medically certified allergic or phobic reaction to dogs, cats, or other pets, those pets may be barred from certain wings (or floors) in our development(s)/building(s). This shall be implemented based on demand for this service.

#### Miscellaneous Rules

Pets may not be left unattended in a dwelling unit for over <u>**24**</u> hours. If the pet is left unattended and no arrangements have been made for its care, the HA will have the right to enter the premises and take the un-cared for pet to be boarded at a local animal care facility at the total expense of the resident.

Pet bedding shall not be washed in any common laundry facilities.

Residents must take appropriate actions to protect their pets from fleas and ticks.

All dogs must wear a tag bearing the resident=s name and phone number and the date of the latest rabies inoculation.

Pets cannot be kept, bred, or used for any commercial purpose.

Residents owning cats shall maintain waterproof litter boxes for cat waste. Refuse from litter boxes shall not accumulate or become unsanitary or unsightly. Litter shall be disposed of in an appropriate manner.

A pet owner shall physically control or confine his/her pet during the times when Housing Authority employees, agents of the Housing Authority or others must enter the pet owner=s apartment to conduct business, provide services, enforce lease terms, etc.

If a pet causes harm to any person, the pet=s owner shall be required to permanently remove the pet from the Housing Authority=s property within 24 hours of written notice from the Housing Authority. The pet owner may also be subject to termination of his/her dwelling lease. A pet owner who violated any other conditions of this policy may be required to remove his/her pet from the development within 10 days of the written notice from the Housing Authority. The pet owner may also be subject to termination of his/her dwelling lease.

The Housing Authority=s grievance procedures shall be applicable to all individual grievances or disputes arising out of violations of this policy.

# Visiting Pets

Pets that meet the size and type criteria outlined above may visit the projects/buildings where pets are allowed for up to two weeks without PHA approval. Tenants who have visiting pets must abide by the conditions of this policy regarding health, sanitation, nuisances, and peaceful enjoyment of others. If visiting pets violate this policy or cause the tenant to violate the lease, the tenant will be required to remove the visiting pet.

## **Removal of Pets**

The PHA, or an appropriate community authority, shall require the removal of any pet from a project if the pet=s conduct or condition is determined to be a nuisance or threat to the health or safety of other occupants of the project or of other persons in the community where the project is located.

In the event of illness or death of pet owner, or in the case of an emergency which would prevent the pet owner from properly caring for the pet, the PHA has permission to call the emergency care giver designated by the resident or the local Pet Law Enforcement Agency to take the pet and care for it until family or friends would claim the pet and assume responsibility for it. Any expenses incurred will be the responsibility of the pet owner.

# **19.0 REPAYMENTAGREE MENTS**

For maintenance charges in excess of \$50, the family must execute a repayment agreement with the housing authority. Formaintenance charges of \$50 or less, the family must pay infull within 60 days.

Minimum rent: payment agreements will be offered to repay minimum rent that was abatedforatemporaryhardshi p.

# **20.0 TERMINATION**

#### 20.1 TERMINATIONBY TENANT

The tenant may terminate the lease at any time upon submitting a 30 -day written notice. If the tenant vacates prior to the end of the thirty (30) days, they will be responsible for rent through the end of the notice period or until the unit is responsible for -rented, which ever occurs first.

#### 20.2 TERMINATIONBY THEHOUSINGAUTHORIT Y

TheRustonHousingAuthorityafter10/1/2000willnotrenewtheleaseofanyfamilythat isnotincompliancewiththecommunityservicer equirementoranapprovedAgreement toCure.Iftheydonotvoluntarilyleavetheproperty, evictionproceedingswillbegin.

The Ruston Housing Authority will terminate the lease for serious or repeated violations of material lease terms. Such violations include but are not limited to the following:

- A. Nonpaymentofrentorothercharges;
- B. Ahistoryoflaterentalpayments;
- C. Failuretoprovidetimelyandaccurateinformationregardingfamilycomposition, incomecircumstances,orotherinformationre latedtoeligibilityorrent;
- D. Failuretoallowinspectionoftheunit;
- E. Failuretomaintaintheunitinasafeandsanitarymanner;
- F. Assignmentorsublettingofthepremises;
- G. Use of the premises for purposes other than as a dwelling unit (oth er than for housingauthorityapprovedresidentbusinesses);
- H. Destructionofproperty;
- I. Actsofdestruction, defacement, or removal of any part of the premises or failure to cause guests to refrain from such acts;
- J. Any criminal activity on the property or drug -related criminal activity on or off the premises. This includes but is not limited to the manufacture of methamphetamineon the premises of the Ruston Housing Authority;
- K. Non-compliancewithNon -CitizenRulerequirements;
- L. Permitting persons not on the lease to reside in the unit more than fourteen (14) days each year without the prior written approval of the Housing Authority; and

M. Othergoodcause.

The Ruston Housing Authority will take immediate action to evict any household that includes an individual whois subject to a lifetime registration requirement under a State sexoffender registration program.

#### 20.3 ABANDONMENT

If property is left on the premises, the Ruston Housing Authority will mail anotice of the intent to sell or is position to the resident and then wait 30 days. At the conclusion of the 30 days, should the Ruston Housing Authority desire to sell said property, then it will proceed in accordance with the Louisiana Code of Civil Procedure Articules governing the att achment or sequestration of property. In any event neither family pictures, keepsakes and personal papers, nor any property can be disposed until 30 days after the Ruston Housing Authority mails the notice asset for the residue to the resid

#### 20.4 RETURNOFSECUR ITY DEPOSIT

After a family moves out, the Ruston Housing Authority will return the security deposit within one month along with an itemized statement of any portion retained by the housing authority accounting for the proceeds that are retained and giving the therefor. The rental unit must be restored to the same conditions as when the family moved in, except for normal wear and tear. Deposits will not be used to cover normal wearandtearordamagethatexisted when the familymoved in.

If State law requires the payment of interest on security deposits, it shall be complied with.

The Ruston Housing Authority will be considered in compliance with the above if the required payment, statement, or both, are deposited in the U.S. mail with first class postagepaid within one month.

#### GLOSSARY

**50058Form:** The HUD form that housing authorities are required to complete for each assisted household in public housing to record information used in the certification and reprocessand, at the option of the housing authority, for interimree xaminations.

**1937 Housing Act:** The United States Housing Act of 1937 (42U.S.C. 1437 et seq.) (24 CFR 5.100)

Adjusted Annual Income: The amount of household income, after deductions for specified allowances, onw hichtenantrentisbased. (24CFR5.611)

Adult: A household member who is 18 years or older or who is the head of the household, or spouse, or co -head.

Allowances: Amounts deducted from the household's annual income in determining adjusted annual income (the income amount used in the rent calculation). Allowances are given for elderlyfamilies,dependents,medicalexpensesforelderlyfamilies,disabilityexpenses,andchild careexpensesforchildrenunder13yearsofage. Otherallowancecanbegivena tthediscretion ofthehousingauthority.

**Annual Contributions Contract (ACC):** The written contract between HUD and a housing authorityunderwhichHUDagreestoprovidefundingforaprogramunderthe1937Act,andthe housingauthorityagreestocomply withHUDrequirementsfortheprogram.(24CFR5.403)

AnnualIncome: Allamounts, monetary or not, that:

- A. Goto(oronbehalfof)thefamilyheadorspouse(eveniftemporarilyabsent)or toanyotherfamilymember;or
- B. Are anticipated to be recei ved from a source outside the family during the 12 monthperiodfollowing admission or annual reexamination effective date; and
- C. Arenotspecificallyexcludedfromannualincome.

AnnualIncomealsoincludesamountsderived(duringthe12 -monthperiod) fromassetstowhich anymemberofthefamilyhasaccess. (1937HousingAct;24CFR5.609 )

**Applicant (applicant family):** A person or family that has applied for admission to a program butisnoty etaparticipant in the program. (24 CFR 5.403)

As-PaidSt ates: States where the welf are agency adjusts the shelter and utility component of the welf are grantinaccordance with actual housing costs. Currently, the four as -paidStates are New Hampshire, New York, Oregon, and Vermont.

**Assets:**Thevalueofequity insavings, checking, IRA and Keoghaccounts, real property, stocks, bonds, and other forms of capital investment. The value of necessary items of personal property suchasfurnitureandautomobilesarenotcountedasassets.(Alsosee"netfamilyassets." )

**Asset Income:** Income received from assets held by family members. If assets total more than \$5,000, income from the assets is "imputed" and the greater of actual asset income and imputed assetincomeiscountedinannualincome.(See"imputedassetinc ome"below.)

CeilingRent: Maximumrentallowedforsomeunitsinpublichousingprojects.

Certification: The examination of a household's income, expenses, and family composition to determine the family's eligibility for program participation and to ca lculatethefamily's share of rent.

**Child:** For purposes of citizenship regulations, a member of the family other than the family headorspousewhoisunder18yearsofage.(24CFR5.504(b))

Child Care Expenses: Amounts anticipated to be paid by the family for the care of children under 13 years of age during the period for which annual income is computed, but only where such care is necessary to enable a family member to actively seek employment, be gainfully employed, or to further his or her educat ion and only to the extent such amounts are not reimbursed. The amount deducted shall reflect reasonable charges for child care. In the case of childcarenecessarytopermitemployment, the amount deducted shall not exceed the amount of employmentincome that is included in annual income. (24 CFR 5.603(d))

CitizenAcitizenornationaloftheUnitedStates.(24CFR5.504(b))

**ConsentForm:** Any consent form approved by HUD to be signed by assistance applicants and participants for the purpose of obtaini ng income information from employers and SWICAs, returninformation from the Social Security Administration, and returninformation for unearned income from the Internal Revenue Service. The consent forms may authorize the collection of other information f rom assistance applicants or participant to determine eligibility or level of benefits.(24CFR5.214)

Housing is decent, safe, and sanitary if it satisfies the applicable **Decent**, Safe, and Sanitary: housingqualitystandards.

**Department:**TheDepartment ofHousingandUrbanDevelopment.(24CFR5.100)

**Dependent:** A member of the family (except foster children and foster adults), other than the familyheadorspouse, who is under 18 years of a georis a person with a disability or is a full -time student.( 24CFR5.603(d))

DependentAllowance: Anamount, equal to \$480 multiplied by the number of dependents, that is deducted from the household's annual income indetermining adjusted annual income.

**Disability Assistance Expenses:** Reasonable expenses that are anticipated, during the period for which annual income is computed, for attendant care and auxiliary apparatus for a disabled family member and that are necessary to enable a family member (including the disabled member) to be employed, provided that the expenses are neither paid to a member of the family norreimbursed by an outside source .(24 CFR 5.603(d))

**DisabilityAssistanceExpenseAllowance:** Indeterminingadjustedannualincome,theamountof disabilityassistanceexpensesdeductedfromannuali ncomeforfamilieswithadisabledhousehold member.

**Disabled Family:** A family whose head, spouse, or sole member is a person with disabilities; two or more persons with disabilities living together; or one or more persons with disabilities living with o neormore live -inaides. (24 CFR 5.403(b)) (Also see "person with disabilities.")

DisabledPerson: See"personwithdisabilities."

 $\label{eq:DisplacedFamily: A family in which each member, or whose sole member, is a person displaced by governmental action (such as urban renewal), or a person whose dwelling has been extensively damaged or destroyed as a result of a disaster declared or otherwise formally recognized pursuant to Federal disaster relie flaws. (24 CFR 5.403(b))$ 

**Displaced Person:** A person displaced by governmental action or a person whose dwelling has been extensively damaged or destroyed as a result of a disaster declared or otherwise formally recognized pursuant to Federal disaster relief laws .[1937Act]

**Drug-Related Criminal Activity** : Drug traffic king or the illegal use, or possession for personal use, of a controlled substance as defined in Section 102 of the Controlled Substances Act (21 U.S.C.802.

**Elderly Family:** A family whose head, spouse, or sole member is a person who is at least 62 yearsofage; twoormore persons who are at least 62 years of a geliving together; or one or more persons who are at least 62 years of a geliving with one or more live -inaides. (24 CFR 5.403)

**Elderly Family Allowance:** For elderly families, an allowance of \$4 00 is deducted from the household'sannualincomeindeterminingadjusted annualincome.

ElderlyPersonApersonwhoisatleast62yearsofage.(1937HousingAct)

**Extremely low -income families:** Those families whose incomes do not exceed 30% of the median income for the area, as determined by the Secretary with adjustments for smaller and largerfamilies.

**Fair Housing Act:** Title VIII of the Civil Rights Act of 1968, as amended by the Fair Housing Amendments Act of 1988 (42U.S.C.3601 et seq.) .(24 CFR 5.100)

Familyincludesbutisnotlimited to :

- A. Afamilywithorwithoutchildren;
- B. Anelderlyfamily;
- C. Anear -elderlyfamily;
- D. Adisabledfamily;
- E. Adisplacedfamily;
- F. Theremainingmemberofatenantfamily;and
- G. A single pers on who is not an elderly or displaced person, a person with disabilities, or the remaining member of a tenant family. (24 CFR 5.403)

**Family Members:** All members of the household other than live -in aides, foster children, and foster adults. All family members are listed on the lease.

**Family Self -Sufficiency Program (FSS Program):** The program established by a housing authoritytopromoteself -sufficiencyamongparticip atingfamilies, including the coordination of supportives ervices. (24CFR984.103(b))

**Flat Rent:** A rent amount the family may choose to pay in lieu of having their rent determined under the formulamethod. The flat rent is established by the housing auth ority set at the lesser of the market value for the unit or the cost to operate the unit. Families selecting the flat rent option have their income evaluated once every three years, rather than annually.

**Formula Method:** A means of calculating a family's r ent based on 10% of their monthly income,30% of their adjusted monthly income, the welfarerent, or the minimum rent. Under the formula method, rents may be capped by aceiling rent. Under this method, the family's income is evaluated at least annually.

**Full-TimeStudent:** Aperson who is carrying a subject load that is considered full -time for day students under the standards and practices of the educational institution attended. An educational institution includes a vocational school with a diploma or ce rtificate program, as well as an institution offering a college degree. (24 CFR 5.603(d))

**Head of Household:** The adult member of the family who is the head of the household for purposes of determining income eligibility and rent. (24 CFR 5.504(b))

**Household Members** : All members of the household including members of the family, live -in aides, foster children, and foster adults. All household members are listed on the lease, and no oneotherthanhousehold members are listed on the lease.

**Housing Assistanc e Plan:** A housing plan that is submitted by a unit of general local governmentandapprovedbyHUDasbeingacceptableunderthestandardsof24CFR570.

**Imputed Income** : For households with net family assets of more than \$5,000, the amount calculatedbym ultiplyingnetfamilyassetsbyaHUD -specifiedpercentage.Ifimputedincomeis more than actual income from assets, the imputed amount is used as income from assets in determiningannualincome.

**In-Kind Payments:** Contributions other than cash made tot he family or to a family member in exchange for services provided or for the general support of the family (e.g., groceries provided on a weekly basis, baby sitting provided on aregular basis).

**Interim(examination):** A reexamination of a family income, expenses, and household composition conducted between the regular annual recertifications when a change in a household'scircumstanceswarrantssuchareexamination.

**Live-In Aide:** A person who resides with one or more elderly persons, near -elderly person s, or persons with disabilities and who:

- A. Isdeterminedtobeessentialtothecareandwell -beingofthepersons;
- B. Isnotobligatedforthesupportofthepersons;and
- C. Would not be living in the unit except to provide the necessary supportiv e services.(24CFR5.403(b))

**Low-IncomeFamilies:** Thosefamilies whose incomes do not exceed 80% of the median income for the area, as determined by the Secretary with adjustments for smaller and larger families, except that the Secretary may establish income ceiling shigher or lower than 80% of the median for the area on the basis of the Secretary's findings that such variations are necessary because of prevailing levels of construction costs or unusually high or low family incomes. (1937 Act)

**Medical Ex penses:** Medical expenses (of all family members of an elderly or disabled family), including medical insurance premiums, that are anticipated during the period for which annual income is computed and that are not covered by insurance. (24 CFR 5.603(d)). These expenses include, but are not limited to, prescription and non -prescription drugs, costs for doctors, dentists, therapists, medical facilities, care for a service animals, transportation for medical purposes.

**Mixed Family:** A family whose members incl ude those with citizenship or eligible immigration status and those without citizenship or eligible immigration status. (24 CFR 5.504(b))

**MonthlyAdjustedIncome:** Onetwelfthofadjustedincome.(24CFR5.603(d))

**MonthlyIncomeO**netwelfthofannualinc ome.(24CFR5.603(d))

 $\label{eq:National:ApersonwhoowespermanentallegiancetotheUnitedStates, for example, as a result of birthinaUnitedStates territory or possession. (24 CFR 5.504(b))$ 

**Near-ElderlyFamily:** Afamilywhosehead, spouse, or sole member is a person who is at least 50 years of age but below the age of 62; two or more persons, who are at least 50 years of age but below the age of 62, living together; or one or more persons who are at least 50 years of age but below the age of 62 living with the neormore persons who are at least 50 years of age but below the age of 62 living with the neormore persons who are at least 50 years of age but below the age of 62 living with the neormore persons who are at least 50 years of age but below the age of 62 living with the neormore persons who are at least 50 years of age but below the age of 62 living with the neormore persons who are at least 50 years of age but below the age of 62 living with the neormore persons who are at least 50 years of age but below the age of 62 living with the neormore persons who are at least 50 years of age but below the age of 62 living with the neormore persons who are at least 50 years of age but below the age of 62 living with the neormore persons who are at least 50 years of age but below the age of 62 living with the neormore persons who are at least 50 years of age but below the age of 62 living with the neormore persons who are at least 50 years of age but below the age of 62 living with the neormore persons who are at least 50 years of age but below the age of 62 living with the neormore persons who are at least 50 years of age but below the age of 62 living with the neormore persons who are at least 50 years of age but below the age of 62 living with the neormore persons who are at least 50 years of age but below the age of 62 living with the neormore persons who are at least 50 years of age but below the age of 62 living with the neormore persons who are at least 50 years of age but below the age of 62 living with the neormore persons who are at least 50 years of age but below the age of 62 living with the neormore persons who are at least 50 years of age but below the age of 62 living with the neormore per

#### **NetFamilyAssets:**

- A. Net cash value after deducting reasonable costs that would be incurred in disposing of real property, savings, stocks, bonds, and other forms of capital investment, excluding interests in Indiantrustland and excluding equity accounts in HUD homeownership programs. The value of necessary items of personal property such as furniture and automobiles shall be excluded.
- B. Incases where a trust fund has been established and the trust is not revocable by, or under the control of, any member of the family or household, the value of the trust fund will not be considered an asset so long as the fund continues to be held in trust. Any income distributed from the trust fund shall be counted whe n determining annual income.
- C. In determining net family assets, housing authorities or owners, as applicable, shall include the value of any business or family assets disposed of by an applicantortenantforlessthanfairmarketvalue(includingadis positionintrust, but not in a foreclosure or bankruptcy sale) during the two years preceding the date of application for the program or reexamination, as applicable, in excess of the consideration received therefor. In the case of a disposition as part o f a separation or divorce settlement, the disposition will not be considered to be for less than fair market value if the applicant or tenant receives important considerationnotmeasurableindollarterms.(24CFR5.603(d))

**Non-Citizen:**A person who is n either a citizen nor national of the United States. (24 CFR 5.504(b))

 $\label{eq:cupancy} {\small \textbf{Standards:}} The standards that a housing authority establishes for determining the appropriate number of bedrooms needed to house families of different sizes or composition .$ 

#### PersonwithDisabilities: Apersonwho:

A. HasadisabilityasdefinedinSection223oftheSocialSecurityAct,whichstates:

"Inabilitytoengageinanysubstantial,gainfulactivitybyreasonofanymedically determinable physical or mental impairment that can be expected to result in death or that has lasted or can be expected to last for a continuous period of not less than 12 months, or

In the case of an individual who attained the age of 55 and is blind and unable by reason of such blindness to engage in substantial, gainful activity requiring skills or ability comparable to those of any gainful activity in which he has previously engaged with some regularity and over a substantial period of time."

- B. Is determined, pursuant to regulations issued by the Secretary, to have a physical, mental, or emotional impairment that:
  - 1. Is expected to be of long continued and indefinite duration;
  - 2. Substantiallyimpedeshisorherabilitytoliveindependently; and
  - 3. Is of such a nature that such abi lity could be improved by more suitable housing conditions, or
- C. HasadevelopmentaldisabilityasdefinedinSection102(7)oftheDevelopmental DisabilitiesAssistanceandBillofRightsAct,whichstates:

"Severechronicdisabilitythat:

- 1. Is att ributable to a mental or physical impairment or combination of mentalandphysicalimpairments;
- 2. Ismanifestedbeforethepersonattainsage22;
- 3. Islikelytocontinueindefinitely;
- 4. Results in substantial functional limitation in three or more of the following areas of major life activity: (1) self care, (2) receptive and responsive language, (3) learning, (4) mobility, (e) self -direction, (6) capacityforindependentliving,and(7)economicself -sufficiency;and
- 5. Reflects the person's need for r a combination and sequence of special, interdisciplinary, or generic care, treatment, or other services that are of lifelong or extended duration and are individually planned and coordinated."

This definition does not exclude persons who have the diseas e of acquired immunodeficiency syndrome or any conditions arising from the etiologic agent foracquiredimmunodeficiency syndrome. (1937Act)

No individual shall be considered to be a person with disabilities for purposes of eligibilitysolelybasedonan ydrugoralcoholdependence.

**Proration of Assistance:** The reduction in a family's housing assistance payment to reflect the proportion of family members in a mixed family who are eligible for assistance. (24 CFR 5.520)

**Public Housing Agency (PHA):** Any S tate, county, municipality, or other governmental entity or public body (or agency or instrumentality thereof) which is authorized to engage in or assist in the development or operation of low - income housing under the 1937 Housing Act. (24 CFR 5.100)

**Recertification:** The annual reexamination of a family's income, expenses, and composition to determine the family's rent.

**Remaining Member of a Tenant Family:** A member of the family listed on the lease who continues to live in the public housing dwelling after r all other family members have left. (Handbook7565.1REV -2,3- 5b.)

**Self-Declaration**: A type of verification statement by the tenant as to the amount and source of income, expenses, or family composition. Self -declaration is acceptable verification only when third-party verification or documentation cannot be obtained.

**Shelter Allowance:** That portion of a welfare benefit (e.g., TANF) that the welfare agency designatestobeusedforrentandutilities.

**Single Person:** Someone living alone or intending to live alone who does not qualify as an elderly family, a person with disabilities, a displaced person, or the remaining member of a tenantfamily.(PublicHousing:Handbook7465.1REV -2,3-5)

**State Wage Information Collection Agency (SWICA):** The State a gency receiving quarterly wage reports from employers in the State or an alternative system that has been determined by the Secretary of Labortobe as effective and timely in providing employment -related income and eligibility information. (24 CFR 5.214)

**Temporary Assistance to Needy Families (TANF):** The program that replaced the Assistance to Families with Dependent Children (AFDC) that provides financial assistance to needy families whomeet programe ligibility criteria. Benefits are limited to aspecific ied time period.

**Tenant:**Thepersonorfamilyrentingoroccupyinganassisteddwellingunit.(24CFR5.504(b))

**Tenant Rent:** The amount payable monthly by the family as rent to the housing authority. Where all utilities (except telephone) and other essen tial housing services are supplied by the housing authority or owner, tenant rent equals total tenant payment. Where some or all utilities (except telephone) and other essen supplied by the housing authority or owner, tenant rent equals total tenant payment. Where some or all utilities (except telephone) and other essen supplied by the housing authority and the cost thereof is not included in the amount paid as rent, tenant rent equals total tenant payment less the utility allowance. (24CFR 5.603(d))

**Third-Party (verification):** Written or oral confirmation of a family's income, expenses, or householdcompositionprovidedby asourceoutsidethehousehold.

#### TotalTenantPayment(TTP):

- A. Total tenant payment for families whose initial lease is effective on or after August1,1982:
  - 1. TotaltenantpaymentistheamountcalculatedunderSection3(a)(1)ofthe 1937Actwh ichisthehigherof:
    - a. 30% of the family's monthly adjusted income;
    - b. 10% of the family's monthly income; or
    - c. If the family is receiving payments for welfare assistance from a public agency and a part of such payments, adjusted in accordance with the family's actual housing costs, is specifically designated by such agency to meet the family's housing costs, the portion of such payments which is so designated.

If the family's welfare assistance is ratably reduced from the standard of need by app lying a percentage, the amount calculated under section 3(a)(1) shall be the amount resulting from one application of the percentage.

- 2. Total tenant payment for families residing in public housing does not include charges for excess utility consumption o r other miscellaneous charges.
- B. Total tenant payment for families residing in public housing whose initial lease waseffective before August 1, 1982: Paragraphs (b) and (c) of 24 CFR 913.107, asitexisted immediately before November 18, 1996), will con tinue togovern the total tenant payment of families, under a public housing program, whose initial lease waseffective before August 1, 1982.

**Utility Allowance:** If the cost of utilities (except telephone) and other housing services for an assisted unit is not included in the tenant rent but is the responsibility of the family occupying the unit, an amount equal to the estimate made by a housing authority of the monthly cost of a reasonable consumption of such utilities and other services for the unit by a n energy - conservative household of modest circumstances consistent with the requirements of a safe, sanitary, and healthfulliving environment. (24 CFR 5.603)

**Utility Reimbursement:** The amount, if any, by which the utility allowance for the unit, if applicable, exceeds the total tenant payment for the family occupying the unit. (24 CFR 5.603)

**Very Low -Income Families:** Low -income families whose incomes do not exceed 50% of the median family income for the area, as determined by the Secretary with adjustmen ts for smaller

and larger families, except that the Secretary may establish income ceiling shigher or lower than 50% of the median for the areas on the basis of the Secretary's findings that such variations are necessary because of unusually high or low family incomes. Such ceilings shall be established in consultation with the Secretary of Agriculture for any rural area, as defined in Section 520 of the Housing Act of 1949, taking into account the subsidy characteristics and types of programs to which such ceilings apply. (1937 Act)

Welfare Assistance: Welfare or other payments to families or individuals, based on need, that are made under programs funded by Federal, State or local governments. (24 CFR 5.603(d))

 $\label{eq:welfare} \textbf{Welfare} \textbf{Rent:} In "as -paid" welfare programs \ , the amount of the welfare benefit designated for shelter and utilities.$ 

#### ACRONYMS

- ACC AnnualContributionsContract
- CFR CodeofFederalRegulations
- FSS FamilySelfSufficiency(program)
- HCDA HousingandCommunityDevelopmentAct
- HQS HousingQuali tyStandards
- HUD DepartmentofHousingandUrbanDevelopment
- INS (U.S.)ImmigrationandNaturalizationService
- NAHA (Cranston-Gonzalez)NationalAffordableHousingAct
- NOFA NoticeofFundingAvailability
- OMB (U.S.)OfficeofManagementandBudget
- PHA PublicHousingAgency
- QHWR QualityHousingandWorkResponsibilityActof1998
- SSA SocialSecurityAdministration
- TTP TotalTenantPayment

#### AppendixI

#### IncomeLimitsandDeconcentrationWorksheet

Development Name	NumberofUnits UnderACC	Number of OccupiedUnits	NumberofUnits Occupied by Very Poor Families	% Occupied by Very Poor Families

### %VeryPoorin

CensusTract

#### TargetNumber

NumberNeededofbelow30%ofmedianareaincome

NumberNeededabove30%ofmedianareaincome

WaitinglistnumberoffamiliesAppendix2

# **CAPITALFUNDPROGRAMTABLESSTARTHERE**

Ann	ualStatement/PerformanceandEvaluat	ionReport			
Cap	${\it ital Fund Program and Capital Fund Prog}$	ramReplacementl	HousingFactor(CF)	P/CFPRHF)PartI:S	ummary
	ame:RUSTONHOUSINGAUTHORITY	GrantTypeandNumber		· · · · · ·	FederalFYofGrant:
		CapitalFundProgramGrant			2000
		ReplacementHousingFactor			
	ginalAnnualStatement ReserveforDisasters/Emerg		alStatement(revisionno:	)	
	formanceandEvaluationReportforPeriodEnding:12/30		nanceandEvaluationRepor		
Line No.	SummarybyDevelopmentAccount	TotalEs	timatedC ost	Total	ActualCost
110.		Original	Revised	Obligated	Expended
1	Totalnon -CFPFunds				
2	1406Operations				
3	1408ManagementImprovements	50,000.00	10,000.00	2,696.07	388.42
4	1410Administration	34,000.00	34,000.00	23,338.09	3,019.73
5	1411Audi t	1,000.00	1,000.00	1,000.00	500.00
6	1415LiquidatedDamages				
7	1430FeesandCosts	1,000.00	0.00	0.00	0.00
8	1440SiteAcquisition				
9	1450SiteImprovement	30,000.00	50,442.44	50,442.44	50,442.44
10	1460DwellingStructures	367,843.00	412,748.51	203,871.35	165,735.93
11	1465.1DwellingEquipment —Nonexpendable	13,000.00	2,145.00	2,145.00	2,145.00
12	1470NondwellingStructures	20,000.00	6,507.05	6,507.05	6,507.05
13	1475NondwellingEquipment	15,000.00	15,000.00	15,000.00	15,000.00
14	1485 Demolition				
15	1490ReplacementReserve				
16	1492MovingtoWorkDemonstration				
17	1495.1RelocationCosts				
18	1499DevelopmentActivities				
19	1501CollaterizationorDebtService				
20	1502Contingency				

Ann	AnnualStatement/PerformanceandEvaluationReport								
Capi	CapitalFundProgramandCapitalFundProgramReplacementHousingFactor(CFP/CFPRHF)PartI:Summary								
PHAN	ame:RUSTONHOUSINGAUTHORITY	GrantTypeandNumber CapitalFundProgramGrar ReplacementHousingFact			FederalFYofGrant: 2000				
	ginalAnnualStatement 🔲 Reservefor Disasters/Emerg		ualStatement(revisionno:	)					
	formanceandEvaluationReportforPeriodEnding:12/30	/01 FinalPerfor	manceandEvaluationReport	1					
Line	SummarybyDevelopmentAccount	TotalE	stimatedC ost	TotalActualCost					
No.									
		Original	Revised	Obligated	Expended				
21	AmountofAnnualGrant: (sumoflines2 -20)	531,843.00	531,843.00	305,000.00	243,738.57				
22	Amountofline21RelatedtoLBPActivities								
23	Amountofline21RelatedtoSection504compliance								
24									
25	AmountofLine 21RelatedtoSecurity – HardCosts								
26	Amount of line 21 Related to Energy Conservation Measures								

# AnnualStatement/PerformanceandEvaluationReport CapitalFundProgramandCapitalFundProgramReplacementHousingFactor(CFP/CFPRHF) PartII :SupportingPages

PHAName:RUSTC	ONHOUSINGAUTHORITY		umber ramGrantNo:LA48 ingFactorGrantNo:			FederalFYofGrant: 2000		
Development Number Name/HA-Wide Activities	GeneralDescriptionofMajorWork Categories	Dev.AcctNo.	Quantity	TotalEstimatedCost		TotalActualCost		Statusof Work
				Original	Revised	Funds Obligated	Funds Expended	
HA-WIDE	ManagementDeficien cies	1408		12,000.00	8,147.00	843.07	388.42	
HA-WIDE	ComputerSoftware&Training	1408		3,000.00	1,853.00	1,853.00	0.00	
HA-WIDE	ModernizationCoordinator	1408		24,000.00	0.00	0.00	0.00	
HA-WIDE	ResidentInitiatives	1408		11,000.00	0.00	0.00	0.00	
HA-WIDE	ContractAdministration	1410		34,000.00	34,000.00	23,338.09	3,019.73	
HA-WIDE	Audit	1411		1,000.00	1,000.00	1,000.00	500.00	
HA-WIDE	FeesandCosts	1430		1,000.00	0.00	0.00	0.00	
LA-54-ALL	DwellingUnits:ForceAcct.Labor& Materials	1460		138,997.00	177,583.33	177,583.33	165,735.93	
LA-54-ALL	Appliances	1465		13,000.00	2,145.00	2,145.00	2,145.00	
LA-54-ALL	SiteWideFacilities	1470		20,000.00	6,507.05	6,507.05	6,507.05	
LA-54-ALL	NondwellingEquipment	1475		15,000.00	15,000.00	15,000.00	15,000.00	
LA-54-1	Site:Landscaping	1450		30,000.00	50,442.44	50,442.44	50,442.44	
LA-54-1	Mechanical&Electrical	1460		5,000.00	0.00	0.00	0.00	
LA-54-1	DwellingUnits:ReplaceSewerLines	1460		25,000.00	0.00	0.00	0.00	
LA-54-2	DwellingUnits:RepairCeramic Tile/RepairCeilings/RefinishKit. Cabs/Reroofing	1460		57,927.00	0.00	0.00	0.00	
LA-54-2	Mechanical&Electrical:HVAC	1460		89,544.00	0.00	0.00	0.00	
LA-54-3	DwellingUnits:Modernize	1460		51,375.00	0.00	0.00	0.00	
LA-54-ALL	HVAC	1460		0.00	235,165.18	26,288.02		

# AnnualStatement/PerformanceandEvaluationReport CapitalFundProgramandCapitalFundProgramReplacementHousingFactor(CFP/CFPRHF) PartII :SupportingPages

PHAName:RUSTONHOUSINGAUTHORITY		GrantTypeandNumber CapitalFundProgramGrantNo:LA48P05450100 ReplacementHousingFactorGrantNo:			FederalFYofGrant: 2000			
Development Number Name/HA-Wide Activities	GeneralDescriptionofMajorWork Categories	Dev.AcctNo.	Quantity	TotalEstimatedCost		TotalAct	Statusof Work	
				Original	Revised	Funds Obligated	Funds Expended	

# AnnualStatement/PerformanceandEvaluationReport CapitalFundProgramandCapitalFundProgramReplacementHousingFactor(CFP/CFPRHF) PartIII:ImplementationSchedule

PHANa me:RUSTONHOU	JSING	Grant	ГурeandNumb				FederalFYofGrant:2000
AUTHORITY		-	•	nNo:LA48P05450100			
		Replace	ementHousingI	FactorNo:			
DevelopmentNumber	All	FundObligated	1	AllFundsExpended			ReasonsforRevisedTargetDates
Name/HA-Wide					uarterEndingDate)		
Activities		-					
		Revised	Actual	Original	Revised	Actual	
ManagementDef.	03/01/01	03/31/02	03/31/02	06/30/02	12/31/02		
ComputerSoft.&Train	03/01/01	03/31/02	03/31/02	06/30/02	12/31/02		
Mod.Coordinator	03/01/01	03/31/02	03/31/02	06/30/02	12/31/02		
Res.Initiatives	03/01/01	03/31/02	03/31/02	06/30/02	12/31/02		
ContractAdm.	03/01/01	03/31/02	03/31/02	06/30/02	12/31/02		
Fees&Cost	03/01/01	03/31/02	03/31/02	06/30/02	12/31/02		

## AnnualStatement/PerformanceandEvaluationReport CapitalFundProgramandCapitalFundProgramReplacementHousingFactor(CFP/CFPRHF) PartIII:ImplementationSchedule

i ai tiii.impiciitei							
PHANa me:RUSTONHOU	JSING		[ypeandNumb				FederalFYofGrant:2000
AUTHORITY				No:LA48P054501	00		
		Replac	ementHousingF	actorNo:			
DevelopmentNumber	DevelopmentNumber AllFundObligated				llFundsExpended		ReasonsforRevisedTargetDates
Name/HA-Wide	(Qua	(QuarterEndingDate)			uarterEndingDate)		
Activities		e	,		ε υ ,		
		Revised	Actual	Original	Revised	Actual	
LA-54-ALLDwelling	03/01/01	03/31/02	03/31/02	06/30/02	12/31/02		
Units:ForceAcct.Labor							
&Material							
Site-WideFacilities	03/01/01	03/31/02	03/31/02	06/30/02	12/31/02		
NondwellingEquipment	03/01/01	03/ 31/02	03/31/02	06/30/02	12/31/02		
DwellingEquipment	03/01/01	03/31/02	03/31/02	06/30/02	12/31/02		
LA-54-1Site:	03/01/01	03/31/02	03/31/02	06/30/02	12/31/02		
Landscaping							
DwellingUnits	03/01/01	03/31/02	03/31/02	06/30/02	12/31/02		
LA-54-2DwellingUnits:	03/01/01	03/31/02	03/31/02	06/30/02	12.31/02		
NondwellingEquipment	03/01/01	03/31/02	03/31/02	06/30/02	12/31/02		
LA-54-3DwellingUnits	03/01/01	03/31/02	03/31/02	06/30/02	12/31/02		

CapitalFundProgramTablesPage 7

### Component3,(6)DeconcentrationandIncomeMixing

a. 🛛 Yes 🗌 No:	DoesthePHAhaveanygeneraloccupancy(family)publichousing developmentscoveredbythedeconcentrationrule?Ifno,this sectioniscomplete.Ify es,continuetothenextquestion.
b. Yes No:	Doanyofthesecovereddevelopmentshaveaverageincomes aboveorbelow85% to115% of the average incomes of all such developments? If no, this section is complete.

If yes, list these developments as follows:

	DeconcentrationPolicyforCoveredDevelopments									
DevelopmentName :	Number ofUnits	Explanation(ifany)[seestep4at ß903.2(c)(1)((iv)]	Deconcentrationpolicy(if noexplanation)[seestep5 at ß903.2(c)(1)(v)]							

# **RESIDENTADVISORYBOARDMEMBERS:2002**

Attachment:la054i02 -RAB

RobbieConn CassandraMahogany AudreyNewton MarilynStrickland

JerriSapp -ResidentInitiativesCoordinator

# **CAPITALFUNDPROGRAMTABLESSTARTHERE**

Ann	ualStatement/PerformanceandEvalua	tionReport			
	italFundProgramandCapitalFundPro	-	ousingFactor(CF	P/CFPRHF)PartI:S	ummarv
	ame:RUSTONHOUSINGAUTHORITY	GrantTypeandNumber		,	FederalFYofGrant:
		CapitalFundProgramGrantNo:	LA48P05450102		2002
		ReplacementHousingFactorGra			
	ginalAnnualStatement ReserveforDisasters/Emer			)	
	formanceandEvaluationReportforPeriodEnding:	FinalPerformanceandEv			
Line	SummarybyDevelopmentAccount	TotalEstim	atedCost	Total	ActualCost
No.		Ortotrol	Destand	Oblige to 1	
1	Totalnon -CFPFunds	Original	Revised	Obligated	Expended
1					
2	1406Operations	50,000.00		0.00	0.00
3	1408ManagementImprovements 1410Administration	,		0.00	
4		34,000.00		0.00	0.00
5	1411Audit	1,000.00		0.00	0.00
6	1415Liquidate dDamages	1.000.00			
7	1430FeesandCosts	1,000.00		0.00	0.00
8	1440SiteAcquisition	1.5.000.00			
9	1450SiteImprovement	15,000.00		0.00	0.00
10	1460DwellingStructures	403,715.00		0.00	0.00
11	1465.1DwellingEquipment —Nonexpendable	13,000.00		0.00	0.00
12	1470NondwellingStructures	10,000.00		0.00	0.00
13	1475NondwellingEquipment	15,000.00		0.00	0.00
14	1485Demolition				
15	1490ReplacementReserve				
16	1492MovingtoWorkDemonstration				
17	1495.1RelocationCosts				
18	1499DevelopmentActivit ies				
19	1501CollaterizationorDebtService				
20	1502Contingency				

Ann	AnnualStatement/PerformanceandEvaluationReport								
Capi	CapitalFundProgramandCapitalFundProgramReplacementHousingFactor(CFP/CFPRHF)PartI:Summary								
PHAN	ame:RUSTONHOUSINGAUTHORITY		GrantTypeandNumberFederCapitalFundProgramGrantNo:LA48P054501022002CapitalFundProgramGrantNo:2002						
	ginalAnnualStatement 🗌 Reservefor Disasters/Emerg		Statement(revisionno:	)					
Per	formanceandEvaluationReportforPeriodEnding:	<b>FinalPerformanceandE</b>	valuationReport						
Line	SummarybyDevelopmentAccount	TotalEstin	natedCost	TotalActualCost					
No.					-				
		Original	Revised	Obligated	Expended				
21	AmountofAnnualGrant:(sumoflines2 –20)	542,715.00		0.00	0.00				
22	Amountofline21RelatedtoLBPActivities								
23	Amountofline21RelatedtoSection504complian ce								
24	Amountofline21RelatedtoSecurity –SoftCosts								
25	AmountofLine21RelatedtoSecurity – HardCosts								
26	Amountofline21RelatedtoEnergyConservationMeasures								

# AnnualStatement/PerformanceandEvaluationReport CapitalFu ndProgramandCapitalFundProgramReplacementHousingFactor(CFP/CFPRHF) PartII:SupportingPages

PHAName:RUSTO	NHOUSINGAUTHORITY	GrantTypeandNu CapitalFundProgra Replacement Hous	amGrantNo:LA48			FederalFYofGrant: 2002		
Development Number Name/HA-Wide Activities	GeneralDescriptionofMajorWork Categories	Dev.AcctNo.	Quantity	TotalEstim	atedCost	TotalActualCost		Statusof Work
				Original	Revised	Funds Obligated	Funds Expended	
HA-WIDE	ManagementDeficiencies	1408		12,000.00		0.00	0.00	
HA-WIDE	ComputerSoftware&Training	1408		3,000.00		0.00	0.00	
HA-WIDE	ModernizationCoordinator	1408		24,000.00		0.00	0.00	
HA-WIDE	ResidentInitiatives	1408		11,000.00		0.00	0.00	
HA-WIDE	ContractAdministration	1410		34,000.00		0.00	0.00	
HA-WIDE	Audit	1411		1,000.00		0.00	0.00	
HA-WIDE	FeesandCosts	1430		1,000.00		0.00	0.00	
LA-54-ALL	DwellingUnits:ForceAcc t.Labor& Materials	1460		147,997.00		0.00	0.00	
LA-54-ALL	Appliances	1465		13,000.00		0.00	0.00	
LA-54-ALL	SiteWideFacilities	1470		10,000.00		0.00	0.00	
LA-54-ALL	NondwellingEquipment	1475		15,000.00		0.00	0.00	
LA-54-1	Site:Landscaping	1450		15,000.00		0.00	0.00	
LA-54-ALL	HVAC	1460		152,343.00		0.00	0.00	
LA-54-1	DwellingUnits:	1460		25,000.00		0.00	0.00	
LA-54-2	DwellingUnits:	1460		27,000.00		0.00	0.00	
LA-54-3	DwellingUnits:Modernize	1460		51,375.00		0.00	0.00	

# AnnualStatement/PerformanceandEvaluationReport CapitalFu ndProgramandCapitalFundProgramReplacementHousingFactor(CFP/CFPRHF) PartII:SupportingPages

PHAName:RUSTONHOUSINGAUTHORITY		GrantTypeandN CapitalFundProg	ramGrantNo:LA48P	FederalFYofGrant: 2002				
Development Number Name/HA-Wide Activities	GeneralDescriptionofMajorWork Categories			TotalActualCost		Statusof Work		
				Original	Revised	Funds Obligated	Funds Expended	

# AnnualStatement/PerformanceandEvaluationReport CapitalFundProgramandCapitalFundProgramReplacementHousingFactor(CFP/CFPRHF) PartII I:ImplementationSchedule

PHAName:RUSTONHOUSING AUTHORITY		Capita	GrantTypeandNumber CapitalFundProgramNo:LA48P05450102 ReplacementHousingFactorNo:				FederalFYofGrant:2002
-		FundObligated rterEndingDat	•		ReasonsforRevisedTargetDates		
Re		Revised	Actual	Original	Revised	Actual	
ManagementDef. 03/01/04				06/30/05			

## AnnualStatement/PerformanceandEvaluationReport CapitalFundProgramandCapitalFundProgramReplacementHousingFactor(CFP/CFPRHF) PartII I:ImplementationSchedule

PHAName:RUSTONHOU AUTHORITY	Capita	GrantTypeandNumber CapitalFundProgramNo:LA48P05450102 ReplacementHousingFactorNo:				FederalFYofGrant:2002		
DevelopmentNumber Name/HA-Wide Activities	AllFundObligated (QuarterEndingDate)			AllFundsExpended (QuarterEndingDate)			ReasonsforRevisedTargetDates	
		Revised	Actual	Original	Revised	Actual		
ComputerSoft.&Train	03/01/04			06/30/05				
Mod.Coordinator	03/01/04			06/30/05				
Res.Initiatives	03/01/04			06/30/05				
ContractAdm.	03/01/04			06/30/05				
Fees&Cost	03/01/04			06/30/05				
LA-54-ALLDwelling Units:ForceAcct.Labor &Material	03/01/04			06/30/05				
Site-WideFacilities	03/01/04			06/30/05				
NondwellingEquipment	03/01/04			06/30/05				
DwellingEquipment	03/01/04			06/30/05				
LA-54-1Site: Landscaping	03/01/04			06/30/05				
DwellingUnits	03/01/04			06/30/05				
LA-54-2DwellingUnits:	03/01/04			06/30/05				
NondwellingEquipment	03/01/04			06/30/05				
LA-54-3DwellingUnits	03/01/04			06/30/05				

# CapitalFundProgramFive -YearActionPlan PartI:Summary

PHANameRUSTONHOUSING AUTHORITY				Original5 -YearPlan	
Development	Year1	WorkStatementforYear2	WorkStatementforYear3	WorkStatementforYear4	WorkStatementforYear5
Number/Name/HA-		FFYGrant:2002	FFYGrant:2003	FFYGrant:2004	FFYGrant:2005
Wide		PHAFY:2002	PHAFY:2003	PHAFY:2004	PHAFY:2005
	Annual Statement				
LA-54-1		5,000	50,000	52,000	100,000
LA-54-2		85,000	40,000		30,000
LA54-3		225,291	214,715		60,000
HA-WIDE		141,424	152,000	404715	266,715
CFPFundsListedfor 5-yearplanning		456,715	456,715	456,715	456,715
ReplacementHousing					
FactorFunds					

Activitiesfor		ActivitiesforYear:_2						
Year1		FFYGrant:2003		ActivitiesforYear:_3 FFYGrant:2004				
		PHAFY:2003		PHAFY :2004				
	Development	MajorWork	EstimatedCost	Development	MajorWork	EstimatedCost		
	Name/Number	Categories		Name/Number	Categories			
See	HA-WIDE	FORCEACCOUNT	108,424	HA-WIDE	FORCEACCOUNT	129,000		
Annual		APPLIANCES	13,000		APPLIANCES	13,000		
Statement		MAINT.SHOP	5,000		MAINT.SHOP	5,000		
		TRUCK	15,000		LAWNEQUIPMENT	5,000		
	LA-54-1	LANDSCAPING	5,000	LA-54-1	FOUNDATIONS	50,000		
	LA-54-2	LANDSCAPING	5,000	LA-54-2	SOFFITS	40,000		
	LA-54-2	KITCHENCABINETS	80,000					
	LA-54-3	MOD.UNITS	41,375	LA-54-3	MOD.UNITS	51,375		
	LA-54-3	HVAC	183,916	LA-54-3	HVAC	163,340		
		TotalCFPEstimatedCost	\$456,715			\$456,715		

# CapitalFundProgramFive -YearActionPlan PartII:SupportingPages ó WorkActivities

## CapitalFundProgramFive -YearActionPlan Part II:SupportingPages ó WorkActivities

	ActivitiesforYear:_4 FFYGrant:2005 PHAFY:2005		ActivitiesforYear:_5 FFYGrant:2006 PHAFY:2006					
Development Name/Number	MajorWork Categories	EstimatedCost	Development Name/Number	MajorWork Categories	EstimatedCost			
HA-WIDE	FORCEACCOUNT	126,715	HA-WIDE	FORCEACCOUNT	126,715			
	APPLIANCES	13,000		APPLIANCES	13,000			
	COMMUNITY CENTER	250,000		SITEWIDEFAC.	15,000			
	TRUCK	15,000		LAWNEQUIPMENT	12,000			
LA-54-1	MOD.UNITS	52,000	LA-54-1	INSULATION	100,000			
			LA-54-2	MOD.UNITS	30,000			
			LA-54-3	MOD.UNITS	60,000			
			HA-WIDE	MOD.USEDDEVEL.	100,000			
	TotalCFPEstimatedCost	\$456,715			456,715			

CapitalFundProgramTablesPage 10