

U.S. Department of Housing and Urban Development
Office of Public and Indian Housing

PHA Plans

5 Year Plan for Fiscal Years 2000 - 2004
Annual Plan for Fiscal Year 2002

**NOTE: THIS PHA PLANS TEMPLATE (HUD 50075) IS TO BE COMPLETED IN
ACCORDANCE WITH INSTRUCTIONS LOCATED IN APPLICABLE PIH NOTICES**

**PHA Plan
Agency Identification**

PHA Name: The Housing Authority of the City of Newport, Rhode Island

PHA Number: RI005

PHA Fiscal Year Beginning: 04/2002

Public Access to Information

Information regarding any activities outlined in this plan can be obtained by contacting: (select all that apply)

- Main administrative office of the PHA
- PHA development management offices
- PHA local offices

Display Locations For PHA Plans and Supporting Documents

The PHA Plans (including attachments) are available for public inspection at: (select all that apply)

- Main administrative office of the PHA
- PHA development management offices
- PHA local offices
- Main administrative office of the local government
- Main administrative office of the County government
- Main administrative office of the State government
- Public library
- PHA website
- Other (list below) Newport Resident Council Administration Office

PHA Plan Supporting Documents are available for inspection at: (select all that apply)

- Main business office of the PHA
- PHA development management offices
- Other (list below)

Annual PHA Plan
PHA Fiscal Year 2002
[24 CFR Part 903.7]

i. Annual Plan Type:

Select which type of Annual Plan the PHA will submit.

Standard Plan

Streamlined Plan:

- High Performing PHA**
- Small Agency (<250 Public Housing Units)**
- Administering Section 8 Only**

Troubled Agency Plan

ii. Executive Summary of the Annual PHA Plan

[24 CFR Part 903.7 9 (r)]

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

The Annual Plan for FY 2002 targets three broad areas of focus that are the same as in FY 2001.

1. Addressing critical problems related to the physical condition of its aging, obsolete housing stock and implementing sound asset management principals to control the HACN's real property inventory
2. Work to realize a resident population that is stable and supported in its desires to gain economic self-sufficiency
3. Continue the review and revision to administrative, operating and management policies begun in FY 2000 to reflect current conditions and to ensure conformance with QHWRA and other pertinent federal, state and local regulations.

The above objectives will be addressed in specific areas of activity in addition to the HACN's ongoing operation:

1. The Authority has pending an application to Rhode Island Housing for a combination of 4% and 9% tax credits, RIH target loan and home loans. These funds would be used to demolish 68 units of obsolete public housing and replace them with 81 affordable rental units. This plan is part of an overall strategy to replace 275 units in Tonomy Hill with a mixed-income community should the Authority be unsuccessful in its HOPE VI application.
2. The Authority will continue a comprehensive review of its administrative, operating and management policies in FY 2003. The Authority will convene a series of workshops involving Commissioners, residents and staff to look at such issues as site-based waiting list and community service.

iii. Annual Plan Table of Contents

[24 CFR Part 903.7 9 (r)]

Provide a table of contents for the Annual Plan, including attachments, and a list of supporting documents available for public inspection.

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Attachments

Indicate which attachments are provided by selecting all that apply. Provide the attachment's name (A, B, etc.) in the space to the left of the name of the attachment. Note: If the attachment is provided as a **SEPARATE** file submission from the PHA Plans file, provide the file name in parentheses in the space to the right of the title.

Required Attachments:

- Attachment A - Deconcentration and Income Mixing (ri005a02)
- Attachment B - FY 1999 CFP Annual Statement/Performance & Evaluation Reports (ri005b02)
- Attachment C - FY 2000 CFP Annual Statement/Performance & Evaluation Reports (ri005c02)
- Attachment D - FY 2001 CFP Annual Statement/Performance & Evaluation Reports (ri005d02)
- Attachment E - FY 2002 CFP Annual Statement (ri005e02)
- Attachment F - Pet Policy (ri005f02)
- Attachment G - Progress in Meeting the Mission and Goals Outlined in Current

- Attachment H - 5-Year Plan (ri005g02)
- Attachment I - Resident Members of the PHA Governing Board (ri005h02)
- Attachment J - Membership of the Resident Advisory Board (ri005i02)
- Attachment K - Project-Based Voucher Program (ri005j02)
- Attachment K - Voluntary Conversion Initial Assessment (ri005k02)

Optional Attachments:

- Attachment L - PHA Management Organizational Chart (ri005l02)
- Attachment M - Public Housing Drug Elimination Program (PHDEP) Plan (ri005m02)
- Attachment N - Comments of Resident Advisory Board or Boards (ri005n02)
- Attachment O - FY 2002 Capital Fund Program 5 Year Action Plan (ri005o02)
- Other (List below, providing each attachment name)

Supporting Documents Available for Review

Indicate which documents are available for public review by placing a mark in the “Applicable & On Display” column in the appropriate rows. All listed documents must be on display if applicable to the program activities conducted by the PHA.

List of Supporting Documents Available for Review		
Applicable & On Display	Supporting Document	Applicable Plan Component
HACN 1 York St Newport RI	PHA Plan Certifications of Compliance with the PHA Plans and Related Regulations	5 Year and Annual Plans
HACN 1 York St Newport RI	State/Local Government Certification of Consistency with the Consolidated Plan	5 Year and Annual Plans
HACN 1 York St Newport RI	Fair Housing Documentation: Records reflecting that the PHA has examined its programs or proposed programs, identified any impediments to fair housing choice in those programs, addressed or is addressing those impediments in a reasonable fashion in view of the resources available, and worked or is working with local jurisdictions to implement any of the jurisdictions’ initiatives to affirmatively further fair housing that require the PHA’s involvement.	5 Year and Annual Plans
HACN 1 York St Newport RI	Consolidated Plan for the jurisdiction/s in which the PHA is located (which includes the Analysis of Impediments to Fair Housing Choice (AI)) and any additional backup data to support statement of housing needs in the jurisdiction	Annual Plan: Housing Needs
HACN 1 York St Newport RI	Most recent board-approved operating budget for the public housing program	Annual Plan: Financial Resources;

HACN 1 York St Newport RI	Public Housing Admissions and (Continued) Occupancy Policy (A&O), which includes the Tenant Selection and Assignment Plan [TSAP]	Annual Plan: Eligibility, Selection, and Admissions Policies
HACN 1 York St Newport RI	Section 8 Administrative Plan	Annual Plan: Eligibility, Selection, and Admissions Policies
HACN 1 York St Newport RI	Public Housing Deconcentration and Income Mixing Documentation: 1. PHA board certifications of compliance with deconcentration requirements (section 16(a) of the US Housing Act of 1937, as implemented in the 2/18/99 <i>Quality Housing and Work Responsibility Act Initial Guidance; Notice</i> and any further HUD guidance) and 2. Documentation of the required deconcentration and income mixing analysis	Annual Plan: Eligibility, Selection, and Admissions Policies
HACN 1 York St Newport RI	Public housing rent determination policies, including the methodology for setting public housing flat rents <input checked="" type="checkbox"/> check here if included in the public housing A & O Policy	Annual Plan: Rent Determination
HACN 1 York St Newport RI	Schedule of flat rents offered at each public housing development <input checked="" type="checkbox"/> check here if included in the public housing A & O Policy	Annual Plan: Rent Determination
HACN 1 York St Newport RI	Section 8 rent determination (payment standard) policies <input checked="" type="checkbox"/> check here if included in Section 8 Administrative Plan	Annual Plan: Rent Determination
HACN 1 York St Newport RI	Public housing management and maintenance policy documents, including policies for the prevention or eradication of pest infestation (including cockroach infestation)	Annual Plan: Operations and Maintenance
HACN 1 York St Newport RI	Public housing grievance procedures <input checked="" type="checkbox"/> check here if included in the public housing A & O Policy	Annual Plan: Grievance Procedures
HACN 1 York St Newport RI	Section 8 informal review and hearing procedures <input checked="" type="checkbox"/> check here if included in Section 8 Administrative Plan	Annual Plan: Grievance Procedures
HACN 1 York St Newport RI	The HUD-approved Capital Fund/Comprehensive Grant Program Annual Statement (HUD 52837) for the active grant year	Annual Plan: Capital Needs
	Most recent CIAP Budget/Progress Report (HUD 52825) for any active CIAP grant	Annual Plan: Capital Needs
HACN 1 York St Newport RI	Most recent, approved 5 Year Action Plan for the Capital Fund/Comprehensive Grant Program, if not included as an attachment (provided at PHA option)	Annual Plan: Capital Needs
HACN 1 York St Newport RI	Approved HOPE VI applications or, if more recent, approved or submitted HOPE VI Revitalization Plans or any other approved proposal for development of public housing	Annual Plan: Capital Needs

	Approved or submitted applications for demolition and/or disposition of public housing	Annual Plan: Demolition and Disposition
	Approved or submitted applications for designation of public housing (Designated Housing Plans)	Annual Plan: Designation of Public Housing
	Approved or submitted assessments of reasonable revitalization of public housing and approved or submitted conversion plans prepared pursuant to section 202 of the 1996 HUD Appropriations Act	Annual Plan: Conversion of Public Housing
	Approved or submitted public housing homeownership programs/plans	Annual Plan: Homeownership
	Policies governing any Section 8 Homeownership program <input type="checkbox"/> check here if included in the Section 8 Administrative Plan	Annual Plan: Homeownership
	Any cooperative agreement between the PHA and the TANF agency	Annual Plan: Community Service & Self-Sufficiency
	FSS Action Plan/s for public housing and/or Section 8	Annual Plan: Community Service & Self-Sufficiency
	Most recent self-sufficiency (ED/SS, TOP or ROSS or other resident services grant) grant program reports	Annual Plan: Community Service & Self-Sufficiency
HACN 1 York St Newport RI	The most recent Public Housing Drug Elimination Program (PHDEP) semi-annual performance report for any open grant and most recently submitted PHDEP application (PHDEP Plan)	Annual Plan: Safety and Crime Prevention
HACN 1 York St Newport RI	The most recent fiscal year audit of the PHA conducted under section 5(h)(2) of the U.S. Housing Act of 1937 (42 U.S.C. 1437c(h)), the results of that audit and the PHA's response to any findings	Annual Plan: Annual Audit
	Troubled PHAs: MOA/Recovery Plan	Troubled PHAs
	Other supporting documents (optional) (list individually; use as many lines as necessary)	(specify as needed)
HACN 1 York St Newport RI	Pet Policy	Attachment F
HACN 1 York St Newport RI	Statement of Progress in Meeting Mission and Goals in Current 5-Year Plan	Attachment G

1. Statement of Housing Needs

[24 CFR Part 903.7 9 (a)]

A. Housing Needs of Families in the Jurisdiction/s Served by the PHA

Based upon the information contained in the Consolidated Plan/s applicable to the jurisdiction, and/or other data available to the PHA, provide a statement of the housing needs in the jurisdiction by completing the following table. In the “Overall” Needs column, provide the estimated number of renter families that have housing needs. For the remaining characteristics, rate the impact of that factor on the housing needs for each family type, from 1 to 5, with 1 being “no impact” and 5 being “severe impact.” Use N/A to indicate that no information is available upon which the PHA can make this assessment.

Housing Needs of Families in the Jurisdiction by Family Type							
Family Type	Overall	Afford-ability	Supply	Quality	Access-ibility	Size	Loca-tion
Income <= 30% of AMI	1691	5	5	5	5	5	5
Income >30% but <=50% of AMI	1212	3	3	3	3	3	3
Income >50% but <80% of AMI	1691	3	3	3	3	3	3
Elderly	2734	5	5	5	5	4	4
Families with Disabilities	342	5	5	5	5	5	5
African American	989	5	5	5	5	5	5
Hispanic	420	5	5	5	5	5	5
American Indian	95	5	5	5	5	5	5
Asian	188	5	5	5	5	5	5

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.)

- Consolidated Plan of the Jurisdiction/s
Indicate year:
- U.S. Census data: the Comprehensive Housing Affordability Strategy (“CHAS”) dataset
- American Housing Survey data
Indicate year:
- Other housing market study
Indicate year:
- Other sources: (list and indicate year of information)

B. Housing Needs of Families on the Public Housing and Section 8 Tenant-Based Assistance Waiting Lists

State the housing needs of the families on the PHA's waiting list/s. **Complete one table for each type of PHA-wide waiting list administered by the PHA.** PHAs may provide separate tables for site-based or sub-jurisdictional public housing waiting lists at their option.

Housing Needs of Families on the Waiting List			
Waiting list type: (select one)			
<input type="checkbox"/> Section 8 tenant-based assistance			
<input checked="" type="checkbox"/> Public Housing			
<input type="checkbox"/> Combined Section 8 and Public Housing			
<input type="checkbox"/> Public Housing Site-Based or sub-jurisdictional waiting list (optional)			
If used, identify which development/subjurisdiction:			
	# of families	% of total families	Annual Turnover
Waiting list total	316		
Extremely low income <=30% AMI	292	92	
Very low income (>30% but <=50% AMI)	23	7	
Low income (>50% but <80% AMI)	1	1	
Families with children	177	56	
Elderly families	19	6	
Families with Disabilities	54	17	
White	167	53	
African American	137	43	
American Indian	11	3	
Asian	1	1	

Characteristics by Bedroom Size (Public Housing Only)			
1BR	139	44	
2 BR	103	33	
3 BR	58	18	
4 BR	12	4	
5 BR	4	1	
5+ BR	0	0	
Is the waiting list closed (select one)? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
If yes:			
How long has it been closed (# of months)?			
Does the PHA expect to reopen the list in the PHA Plan year? <input type="checkbox"/> No <input type="checkbox"/> Yes			
Does the PHA permit specific categories of families onto the waiting list, even if generally closed? <input type="checkbox"/> No <input type="checkbox"/> Yes			

Housing Needs of Families on the Waiting List			
Waiting list type: (select one)			
<input checked="" type="checkbox"/> Section 8 tenant-based assistance			
<input type="checkbox"/> Public Housing			
<input type="checkbox"/> Combined Section 8 and Public Housing			
<input type="checkbox"/> Public Housing Site-Based or sub-jurisdictional waiting list (optional)			
If used, identify which development/subjurisdiction:			
	# of families	% of total families	Annual Turnover
Waiting list total	126		
Extremely low income <=30% AMI	105	84	
Very low income (>30% but <=50% AMI)	21	16	
Low income (>50% but <80% AMI)	0	0	
Families with children	110	88	
Elderly families	0	0	

Families with Disabilities	16	13	
White	64	51	
African American	62	49	
American Indian	0	0	
Asian	0	0	
Characteristics by Bedroom Size (Public Housing Only)			
1BR			
2 BR			
3 BR			
4 BR			
5 BR			
5+ BR			
Is the waiting list closed (select one)? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes			
If yes:			
How long has it been closed (# of months)? 9			
Does the PHA expect to reopen the list in the PHA Plan year? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
Does the PHA permit specific categories of families onto the waiting list, even if generally closed? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			

C. Strategy for Addressing Needs

Provide a brief description of the PHA's strategy for addressing the housing needs of families in the jurisdiction and on the waiting list **IN THE UPCOMING YEAR**, and the Agency's reasons for choosing this strategy.

(1) Strategies

Need: Shortage of affordable housing for all eligible populations

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

Select all that apply

- Employ effective maintenance and management policies to minimize the number of public housing units off-line
- Reduce turnover time for vacated public housing units
- Reduce time to renovate public housing units
- Seek replacement of public housing units lost to the inventory through mixed finance development

- Seek replacement of public housing units lost to the inventory through section 8 replacement housing resources
- Maintain or increase section 8 lease-up rates by establishing payment standards that will enable families to rent throughout the jurisdiction
- Undertake measures to ensure access to affordable housing among families assisted by the PHA, regardless of unit size required
- Maintain or increase section 8 lease-up rates by marketing the program to owners, particularly those outside of areas of minority and poverty concentration
- Maintain or increase section 8 lease-up rates by effectively screening Section 8 applicants to increase owner acceptance of program
- Participate in the Consolidated Plan development process to ensure coordination with broader community strategies
- Other (list below)

Strategy 2: Increase the number of affordable housing units by:

Select all that apply

- Apply for additional section 8 units should they become available
- Leverage affordable housing resources in the community through the creation of mixed - finance housing
- Pursue housing resources other than public housing or Section 8 tenant-based assistance.
- Other: (list below)

Need: Specific Family Types: Families at or below 30% of median

Strategy 1: Target available assistance to families at or below 30 % of AMI

Select all that apply

- Exceed HUD federal targeting requirements for families at or below 30% of AMI in public housing
- Exceed HUD federal targeting requirements for families at or below 30% of AMI in tenant-based section 8 assistance
- Employ admissions preferences aimed at families with economic hardships
- Adopt rent policies to support and encourage work
- Other: (list below)

Need: Specific Family Types: Families at or below 50% of median

Strategy 1: Target available assistance to families at or below 50% of AMI

Select all that apply

- Employ admissions preferences aimed at families who are working
- Adopt rent policies to support and encourage work
- Other: (list below)

Need: Specific Family Types: The Elderly

Strategy 1: Target available assistance to the elderly:

Select all that apply

- Seek designation of public housing for the elderly
- Apply for special-purpose vouchers targeted to the elderly, should they become available
- Other: (list below)

Need: Specific Family Types: Families with Disabilities

Strategy 1: Target available assistance to Families with Disabilities:

Select all that apply

- Seek designation of public housing for families with disabilities
- Carry out the modifications needed in public housing based on the section 504 Needs Assessment for Public Housing
- Apply for special-purpose vouchers targeted to families with disabilities, should they become available
- Affirmatively market to local non-profit agencies that assist families with disabilities
- Other: (list below)

Need: Specific Family Types: Races or ethnicities with disproportionate housing needs

Strategy 1: Increase awareness of PHA resources among families of races and ethnicities with disproportionate needs:

Select if applicable

- Affirmatively market to races/ethnicities shown to have disproportionate housing needs
- Other: (list below)

Strategy 2: Conduct activities to affirmatively further fair housing

Select all that apply

- Counsel section 8 tenants as to location of units outside of areas of poverty or minority concentration and assist them to locate those units

- Market the section 8 program to owners outside of areas of poverty /minority concentrations
- Other: (list below)

Other Housing Needs & Strategies: (list needs and strategies below)

(2) Reasons for Selecting Strategies

Of the factors listed below, select all that influenced the PHA’s selection of the strategies it will pursue:

- Funding constraints
- Staffing constraints
- Limited availability of sites for assisted housing
- Extent to which particular housing needs are met by other organizations in the community
- Evidence of housing needs as demonstrated in the Consolidated Plan and other information available to the PHA
- Influence of the housing market on PHA programs
- Community priorities regarding housing assistance
- Results of consultation with local or state government
- Results of consultation with residents and the Resident Advisory Board
- Results of consultation with advocacy groups
- Other: Review of Administrative Policies to occur during the year

2. Statement of Financial Resources

[24 CFR Part 903.7 9 (b)]

List the financial resources that are anticipated to be available to the PHA for the support of Federal public housing and tenant-based Section 8 assistance programs administered by the PHA during the Plan year. Note: the table assumes that Federal public housing or tenant based Section 8 assistance grant funds are expended on eligible purposes; therefore, uses of these funds need not be stated. For other funds, indicate the use for those funds as one of the following categories: public housing operations, public housing capital improvements, public housing safety/security, public housing supportive services, Section 8 tenant-based assistance, Section 8 supportive services or other.

Financial Resources: Planned Sources and Uses		
Sources	Planned \$	Planned Uses
1. Federal Grants (FY 2002 grants)		
a) Public Housing Operating Fund	3,209,860	
b) Public Housing Capital Fund	2,642,337	
c) HOPE VI Revitalization	0	
d) HOPE VI Demolition	0	
e) Annual Contributions for Section 8 Tenant-Based Assistance	837,365	
f) Public Housing Drug Elimination Program (including any Technical Assistance funds)	269,278	
g) Resident Opportunity and Self-Sufficiency Grants	0	
h) Community Development Block Grant	0	
i) HOME	0	
Other Federal Grants (list below)		
Elderly Services Coordinator	31,212	Supportive Services
2. Prior Year Federal Grants (unobligated funds only) (list below)		
Public Housing Capital Fund (FY2000)	2,177,434	Phase I Redevelopment Project
3. Public Housing Dwelling Rental Income		
Transitional Housing Program	18,000	Operations
4. Other income (list below)		
Interest Income	100,000	Operations
Non-dwelling rentals	4,350	Operations
4. Non-federal sources (list below)		
State grant	24,674	Elderly Security Services
Social Services grant	14,250	Staff for resident services
City of Newport	3,000	Resident services
Total resources	9,331,760	

3. PHA Policies Governing Eligibility, Selection, and Admissions

[24 CFR Part 903.7 9 (c)]

A. Public Housing

Exemptions: PHAs that do not administer public housing are not required to complete subcomponent 3A.

(1) Eligibility

a. When does the PHA verify eligibility for admission to public housing? (select all that apply)

- When families are within a certain number of being offered a unit: (state number)
- When families are within a certain time of being offered a unit: (state time)
- Other: (describe) When families apply for housing, all necessary credit reviews, interviews and reference checks are initiated promptly. Determination is made upon receipt of information, typically within 15 days of application.

b. Which non-income (screening) factors does the PHA use to establish eligibility for admission to public housing (select all that apply)?

- Criminal or Drug-related activity
- Rental history
- Housekeeping
- Other (describe)

c. Yes No: Does the PHA request criminal records from local law enforcement agencies for screening purposes?

d. Yes No: Does the PHA request criminal records from State law enforcement agencies for screening purposes?

e. Yes No: Does the PHA access FBI criminal records from the FBI for screening purposes? (either directly or through an NCIC-authorized source)

(2) Waiting List Organization

a. Which methods does the PHA plan to use to organize its public housing waiting list (select all that apply)

- Community-wide list
- Sub-jurisdictional lists
- Site-based waiting lists
- Other (describe)

b. Where may interested persons apply for admission to public housing?

- PHA main administrative office
- PHA development site management office
- Other (list below)

c. If the PHA plans to operate one or more site-based waiting lists in the coming year, answer each of the following questions; if not, skip to subsection **(3) Assignment**

1. How many site-based waiting lists will the PHA operate in the coming year?

2. Yes No: Are any or all of the PHA's site-based waiting lists new for the upcoming year (that is, they are not part of a previously-HUD-approved site based waiting list plan)?
If yes, how many lists?

3. Yes No: May families be on more than one list simultaneously
If yes, 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)?

- PHA main administrative office
- All PHA development management offices
- Management offices at developments with site-based waiting lists
- At the development to which they would like to apply
- Other (list below)

(3) Assignment

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

- One
- Two
- Three or More

b. Yes No: Is this policy consistent across all waiting list types?

c. If answer to b is no, list variations for any other than the primary public housing waiting list/s for the PHA:

(4) Admissions Preferences

a. Income targeting:

Yes No: Does the PHA plan to exceed the federal targeting requirements by targeting more than 40% of all new admissions to public housing to families at or below 30% of median area income?

b. Transfer policies:

In what circumstances will transfers take precedence over new admissions? (list below)

- Emergencies
 - Overhoused
 - Underhoused
 - Medical justification
 - Administrative reasons determined by the PHA (e.g., to permit modernization work)
 - Resident choice: (state circumstances below)
 - Other: (list below)
- Resident Choice: documented hardships; give first preference to long-term residents to limit resident turnover.

c. Preferences

1. Yes No: Has the PHA established preferences for admission to public housing (other than date and time of application)? (If “no” is selected, skip to subsection **(5) Occupancy**)

2. Which of the following admission preferences does the PHA plan to employ in the coming year? (select all that apply from either former Federal preferences or other preferences)

Former Federal preferences:

- Involuntary Displacement (Disaster, Government Action, Action of Housing Owner, Inaccessibility, Property Disposition)
- Victims of domestic violence
- Substandard housing
- Homelessness
- High rent burden (rent is > 50 percent of income)

Other preferences: (select below)

- Working families and those unable to work because of age or disability
- Veterans and veterans’ families
- Residents who live and/or work in the jurisdiction
- Those enrolled currently in educational, training, or upward mobility programs
- Households that contribute to meeting income goals (broad range of incomes)
- Households that contribute to meeting income requirements (targeting)
- Those previously enrolled in educational, training, or upward mobility programs
- Victims of reprisals or hate crimes
- Other preference(s) (list below)

3. If the PHA will employ admissions preferences, please prioritize by placing a “1” in the space that represents your first priority, a “2” in the box representing your second priority, and so on. If you give equal weight to one or more of these choices (either through an absolute hierarchy or through a point system), place the same number next to each. That means you can use “1” more than once, “2” more than once, etc.

Date and Time

Former Federal preferences:

- Involuntary Displacement (Disaster, Government Action, Action of Housing Owner, Inaccessibility, Property Disposition)
- Victims of domestic violence
- Substandard housing
- Homelessness
- High rent burden

Other preferences (select all that apply)

- Working families and those unable to work because of age or disability
- Veterans and veterans’ families
- Residents who live and/or work in the jurisdiction
- Those enrolled currently in educational, training, or upward mobility programs
- Households that contribute to meeting income goals (broad range of incomes)
- Households that contribute to meeting income requirements (targeting)
- Those previously enrolled in educational, training, or upward mobility programs
- Victims of reprisals or hate crimes
- Other preference(s) (list below)

4. Relationship of preferences to income targeting requirements:

- The PHA applies preferences within income tiers
- Not applicable: the pool of applicant families ensures that the PHA will meet income targeting requirements

(5) Occupancy

a. What reference materials can applicants and residents use to obtain information about the rules of occupancy of public housing (select all that apply)

- The PHA-resident lease
- The PHA’s Admissions and (Continued) Occupancy policy
- PHA briefing seminars or written materials (provided at time of application and upon admission)
- Other source (list)

b. How often must residents notify the PHA of changes in family composition? (select all that apply)

- At an annual reexamination and lease renewal
- Any time family composition changes
- At family request for revision
- Other (list)

(6) Deconcentration and Income Mixing See Attachment A (ri005a02)

a. Yes No: Did the PHA's analysis of its family (general occupancy) developments to determine concentrations of poverty indicate the need for measures to promote deconcentration of poverty or income mixing?

b. Yes No: Did the PHA adopt any changes to its **admissions policies** based on the results of the required analysis of the need to promote deconcentration of poverty or to assure income mixing?

c. If the answer to b was yes, what changes were adopted? (select all that apply)

- Adoption of site-based waiting lists
If selected, list targeted developments below:
- Employing waiting list "skipping" to achieve deconcentration of poverty or income mixing goals at targeted developments
If selected, list targeted developments below:
- Employing new admission preferences at targeted developments
If selected, list targeted developments below:
- Other (list policies and developments targeted below)

d. Yes No: Did the PHA adopt any changes to **other** policies based on the results of the required analysis of the need for deconcentration of poverty and income mixing?

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

- Additional affirmative marketing
- Actions to improve the marketability of certain developments
- Adoption or adjustment of ceiling rents for certain developments
- Adoption of rent incentives to encourage deconcentration of poverty and income-mixing
- Other (list below)

f. Based on the results of the required analysis, in which developments will the PHA make special efforts to attract or retain higher-income families? (select all that apply)

- Not applicable: results of analysis did not indicate a need for such efforts
- List (any applicable) developments below:

g. Based on the results of the required analysis, in which developments will the PHA make special efforts to assure access for lower-income families? (select all that apply)

- Not applicable: results of analysis did not indicate a need for such efforts
- List (any applicable) developments below:

B. Section 8

Exemptions: PHAs that do not administer section 8 are not required to complete sub-component 3B.

Unless otherwise specified, all questions in this section apply only to the tenant-based section 8 assistance program (vouchers, and until completely merged into the voucher program, certificates).

(1) Eligibility

a. What is the extent of screening conducted by the PHA? (select all that apply)

- Criminal or drug-related activity only to the extent required by law or regulation
- Criminal and drug-related activity, more extensively than required by law or regulation
- More general screening than criminal and drug-related activity (list factors below)
- Other (list below) Provision of Social Security identification, citizenship or immigration status. One-Strike Policy, outstanding debt owed to Newport Housing Authority, any other PHA or Section 8 program.

b. Yes No: Does the PHA request criminal records from local law enforcement agencies for screening purposes?

c. Yes No: Does the PHA request criminal records from State law enforcement agencies for screening purposes?

d. Yes No: Does the PHA access FBI criminal records from the FBI for screening purposes? (either directly or through an NCIC-authorized source)

e. Indicate what kinds of information you share with prospective landlords? (select all that apply)

- Criminal or drug-related activity
- Other (describe below) Previous address, changes in tenant rent, rental payment history with tenant approval, HQS inspection, forwarding address.

(2) Waiting List Organization

a. With which of the following program waiting lists is the section 8 tenant-based assistance waiting list merged? (select all that apply)

- None
- Federal public housing
- Federal moderate rehabilitation
- Federal project-based certificate program
- Other federal or local program (list below)

b. Where may interested persons apply for admission to section 8 tenant-based assistance? (select all that apply)

- PHA main administrative office
- Other (list below)

(3) Search Time

a. Yes No: Does the PHA give extensions on standard 60-day period to search for a unit?

If yes, state circumstances below: With documentation of housing search as we have a shortage of private market rentals.

(4) Admissions Preferences

a. Income targeting

- Yes No: Does the PHA plan to exceed the federal targeting requirements by targeting more than 75% of all new admissions to the section 8 program to families at or below 30% of median area income?

b. Preferences

1. Yes No: Has the PHA established preferences for admission to section 8 tenant-based assistance? (other than date and time of application) (if no, skip to subcomponent **(5) Special purpose section 8 assistance programs**)

2. Which of the following admission preferences does the PHA plan to employ in the coming year? (select all that apply from either former Federal preferences or other preferences)

Former Federal preferences

- Involuntary Displacement (Disaster, Government Action, Action of Housing Owner, Inaccessibility, Property Disposition)
- Victims of domestic violence
- Substandard housing

- Homelessness
- High rent burden (rent is > 50 percent of income)

Other preferences (select all that apply)

- Working families and those unable to work because of age or disability
- Veterans and veterans' families
- Residents who live and/or work in your jurisdiction
- Those enrolled currently in educational, training, or upward mobility programs
- Households that contribute to meeting income goals (broad range of incomes)
- Households that contribute to meeting income requirements (targeting)
- Those previously enrolled in educational, training, or upward mobility programs
- Victims of reprisals or hate crimes
- Other preference(s) (list below)

3. If the PHA will employ admissions preferences, please prioritize by placing a "1" in the space that represents your first priority, a "2" in the box representing your second priority, and so on. If you give equal weight to one or more of these choices (either through an absolute hierarchy or through a point system), place the same number next to each. That means you can use "1" more than once, "2" more than once, etc.

Date and Time

Former Federal preferences

- Involuntary Displacement (Disaster, Government Action, Action of Housing Owner, Inaccessibility, Property Disposition)
- Victims of domestic violence
- Substandard housing
- Homelessness
- High rent burden

Other preferences (select all that apply)

- Working families and those unable to work because of age or disability
- Veterans and veterans' families
- Residents who live and/or work in your jurisdiction
- Those enrolled currently in educational, training, or upward mobility programs
- Households that contribute to meeting income goals (broad range of incomes)
- Households that contribute to meeting income requirements (targeting)
- Those previously enrolled in educational, training, or upward mobility programs
- Victims of reprisals or hate crimes
- Other preference(s) (list below)

4. Among applicants on the waiting list with equal preference status, how are applicants selected? (select one)

- Date and time of application
- Drawing (lottery) or other random choice technique

5. If the PHA plans to employ preferences for “residents who live and/or work in the jurisdiction” (select one)

- This preference has previously been reviewed and approved by HUD
- The PHA requests approval for this preference through this PHA Plan

6. Relationship of preferences to income targeting requirements: (select one)

- The PHA applies preferences within income tiers
- Not applicable: the pool of applicant families ensures that the PHA will meet income targeting requirements

(5) Special Purpose Section 8 Assistance Programs

a. In which documents or other reference materials are the policies governing eligibility, selection, and admissions to any special-purpose section 8 program administered by the PHA contained? (select all that apply)

- The Section 8 Administrative Plan
- Briefing sessions and written materials
- Other (list below)

b. How does the PHA announce the availability of any special-purpose section 8 programs to the public?

- Through published notices
- Other (list below)

4. PHA Rent Determination Policies

[24 CFR Part 903.7 9 (d)]

A. Public Housing

Exemptions: PHAs that do not administer public housing are not required to complete sub-component 4A.

(1) Income Based Rent Policies

Describe the PHA’s income based rent setting policy/ies for public housing using, including discretionary (that is, not required by statute or regulation) income disregards and exclusions, in the appropriate spaces below.

a. Use of discretionary policies: (select one)

- The PHA will not employ any discretionary rent-setting policies for income based rent in public housing. Income-based rents are set at the higher of 30% of adjusted monthly

income, 10% of unadjusted monthly income, the welfare rent, or minimum rent (less HUD mandatory deductions and exclusions). (If selected, skip to sub-component (2))

---or---

- The PHA employs discretionary policies for determining income based rent (If selected, continue to question b.)

b. Minimum Rent

1. What amount best reflects the PHA's minimum rent? (select one)

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

2. Yes No: Has the PHA adopted any discretionary minimum rent hardship exemption policies?

3. If yes to question 2, list these policies below:

c. Rents set at less than 30% than adjusted income

1. Yes No: Does the PHA plan to charge rents at a fixed amount or percentage less than 30% of adjusted income?

2. If yes to above, list the amounts or percentages charged and the circumstances under which these will be used below:

Resident will be offered an annual choice of paying rent based on 30% adjusted income or the following flat rent which is based on a market rent study:

0 bedroom - \$350	3 bedroom - \$600	5 bedroom - \$800
1 bedroom - \$400	4 bedroom - \$750	6 bedroom - \$900
2 bedroom - \$500		

d. Which of the discretionary (optional) deductions and/or exclusions policies does the PHA plan to employ (select all that apply)

- For the earned income of a previously unemployed household member
 For increases in earned income
 Fixed amount (other than general rent-setting policy)
If yes, state amount/s and circumstances below:

- Fixed percentage (other than general rent-setting policy)
If yes, state percentage/s and circumstances below:

- For household heads
- For other family members
- For transportation expenses
- For the non-reimbursed medical expenses of non-disabled or non-elderly families
- Other (describe below) Court ordered child support

e. Ceiling rents

1. Do you have ceiling rents? (rents set at a level lower than 30% of adjusted income) (select one)

- Yes for all developments
- Yes but only for some developments
- No

2. For which kinds of developments are ceiling rents in place? (select all that apply)

- For all developments
- For all general occupancy developments (not elderly or disabled or elderly only)
- For specified general occupancy developments
- For certain parts of developments; e.g., the high-rise portion
- For certain size units; e.g., larger bedroom sizes
- Other (list below)

3. Select the space or spaces that best describe how you arrive at ceiling rents (select all that apply)

- Market comparability study
- Fair market rents (FMR)
- 95th percentile rents
- 75 percent of operating costs
- 100 percent of operating costs for general occupancy (family) developments
- Operating costs plus debt service
- The "rental value" of the unit
- Other (list below)

f. Rent re-determinations:

1. Between income reexaminations, how often must tenants 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
- At family option
- Any time the family experiences an income increase
- Any time a family experiences an income increase above a threshold amount or percentage: (if selected, specify threshold)_____
- Other (list below)

g. Yes No: Does the PHA plan to implement individual savings accounts for residents (ISAs) as an alternative to the required 12 month disallowance of earned income and phasing in of rent increases in the next year?

(2) Flat Rents

1. In setting the market-based flat rents, what sources of information did the PHA use to establish comparability? (select all that apply.)

- The section 8 rent reasonableness study of comparable housing
- Survey of rents listed in local newspaper
- Survey of similar unassisted units in the neighborhood
- Other (list/describe below) Market Rent Study performed by local real estate appraisal company

B. Section 8 Tenant-Based Assistance

Exemptions: PHAs that do not administer Section 8 tenant-based assistance are not required to complete sub-component 4B. **Unless otherwise specified, all questions in this section apply only to the tenant-based section 8 assistance program (vouchers, and until completely merged into the voucher program, certificates).**

(1) Payment Standards

Describe the voucher payment standards and policies.

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

- At or above 90% but below 100% of FMR
- 100% of FMR
- Above 100% but at or below 110% of FMR
- Above 110% of FMR (if HUD approved; describe circumstances below)

b. If the payment standard is lower than FMR, why has the PHA selected this standard? (select all that apply)

- FMRs are adequate to ensure success among assisted families in the PHA's segment of the FMR area
- The PHA has chosen to serve additional families by lowering the payment standard
- Reflects market or submarket
- Other (list below)

c. If the payment standard is higher than FMR, why has the PHA chosen this level? (select all that apply)

- FMRs are not adequate to ensure success among assisted families in the PHA's segment of the FMR area
- Reflects market or submarket
- To increase housing options for families
- Other (list below) Tight housing market

d. How often are payment standards reevaluated for adequacy? (select one)

- Annually
- Other (list below)

e. What factors will the PHA consider in its assessment of the adequacy of its payment standard? (select all that apply)

- Success rates of assisted families
- Rent burdens of assisted families
- Other (list below)

(2) Minimum Rent

a. What amount best reflects the PHA's minimum rent? (select one)

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

b. Yes No: Has the PHA adopted any discretionary minimum rent hardship exemption policies? (if yes, list below)

5. Operations and Management

[24 CFR Part 903.7 9 (e)]

Exemptions from Component 5: High performing and small PHAs are not required to complete this section. Section 8 only PHAs must complete parts A, B, and C(2)

A. PHA Management Structure

Describe the PHA's management structure and organization.

(select one)

- An organization chart showing the PHA's management structure and organization is attached. Attachment L (ri005101)
- A brief description of the management structure and organization of the PHA follows:

B. HUD Programs Under PHA Management

List Federal programs administered by the PHA, number of families served at the beginning of the upcoming fiscal year, and expected turnover in each. (Use "NA" to indicate that the PHA does not operate any of the programs listed below.)

Program Name	Units or Families Served at Year Beginning	Expected Turnover
Public Housing	1088	
Section 8 Vouchers	100	
Section 8 Certificates		
Section 8 Mod Rehab		
Special Purpose Section 8 Certificates/Vouchers (list individually)		
Public Housing Drug Elimination Program (PHDEP)	760	
Other Federal Programs(list individually)		
Elderly Services Coordinator	346	

C. Management and Maintenance Policies

List the PHA's public housing management and maintenance policy documents, manuals and handbooks that contain the Agency's rules, standards, and policies that govern maintenance and management of public housing, including a description of any measures necessary for the prevention or eradication of pest infestation (which includes cockroach infestation) and the policies governing Section 8 management.

- (1) Public Housing Maintenance and Management: (list below)
 - Warehouse and Inventory Control Operating Procedures for Newport Housing Authority Maintenance Operations, Admissions and Continued Occupancy
- (2) Section 8 Management: (list below)

6. PHA Grievance Procedures

[24 CFR Part 903.7 9 (f)]

Exemptions from component 6: High performing PHAs are not required to complete component 6. Section 8-Only PHAs are exempt from sub-component 6A.

A. Public Housing

1. Yes No: Has the PHA established any written grievance procedures in addition to federal requirements found at 24 CFR Part 966, Subpart B, for residents of public housing?

If yes, list additions to federal requirements below:

Procedures conform to requirements of state law. Policy reviewed in a recent workshop meeting between Commissioners, staff and members of the Board of Tenant Affairs. Issues include Board of Tenant Affairs training, timeliness of notices and prompt rendering of decisions.

2. Which PHA office should residents or applicants to public housing contact to initiate the PHA grievance process? (select all that apply)
- PHA main administrative office
 - PHA development management offices
 - Other (list below) Public Housing cases heard by state-mandated Board of Tenant Affairs

B. Section 8 Tenant-Based Assistance

1. Yes No: Has the PHA established informal review procedures for applicants to the Section 8 tenant-based assistance program and informal hearing procedures for families assisted by the Section 8 tenant-based assistance program in addition to federal requirements found at 24 CFR 982?

If yes, list additions to federal requirements below:

Cases are heard by Newport Housing Authority staff hearing officer. Any appeals would be through court procedures.

2. Which PHA office should applicants or assisted families contact to initiate the informal review and informal hearing processes? (select all that apply)
- PHA main administrative office
 - Other (list below)

NOTE: Above policies governing Grievance Procedures are to be included in comprehensive review scheduled for FY 2001.

7. Capital Improvement Needs

[24 CFR Part 903.7 9 (g)]

Exemptions from Component 7: Section 8 only PHAs are not required to complete this component and may skip to Component 8.

A. Capital Fund Activities

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

(1) Capital Fund Program Annual Statement

Using parts I, II, and III of the Annual Statement for the Capital Fund Program (CFP), identify capital activities the PHA is proposing for the upcoming year to ensure long-term physical and social viability of its public housing developments. This statement can be completed by using the CFP Annual Statement tables provided in the table library at the end of the PHA Plan template **OR**, at the PHA's option, by completing and attaching a properly updated HUD-52837.

Select one:

The Capital Fund Program Annual Statements/Performance and Evaluation Reports are provided as attachments to the PHA Plan at Attachment B (ri005b02) ; Attachment C (ri005c02) ; Attachment D (ri005d02) and Attachment E (ri005e02).

-or-

The Capital Fund Program Annual Statement is provided below: (if selected, copy the CFP Annual Statement from the Table Library and insert here)

(2) Optional 5-Year Action Plan

Agencies are encouraged to include a 5-Year Action Plan covering capital work items. This statement can be completed by using the 5 Year Action Plan table provided in the table library at the end of the PHA Plan template **OR** by completing and attaching a properly updated HUD-52834.

a. Yes No: Is the PHA providing an optional 5-Year Action Plan for the Capital Fund?
(if no, skip to sub-component 7B)

b. If yes to question a, select one:

The Capital Fund Program 5-Year Action Plan is provided as an attachment to the PHA Plan at Attachment O (ri005o02)

-or-

The Capital Fund Program 5-Year Action Plan is provided below: (if selected, copy the CFP optional 5 Year Action Plan from the Table Library and insert here)

B. HOPE VI and Public Housing Development and Replacement Activities (~~No~~Capital Fund)

Applicability of sub-component 7B: All PHAs administering public housing. Identify any approved HOPE VI and/or public housing development or replacement activities not described in the Capital Fund Program Annual Statement.

- Yes No: a) Has the PHA received a HOPE VI revitalization grant? (if no, skip to question c; if yes, provide responses to question b for each grant, copying and completing as many times as necessary)
b) Status of HOPE VI revitalization grant (complete one set of questions for each grant)

1. Development name:

2. Development (project) number:

3. Status of grant: (select the statement that best describes the current status)

- Revitalization Plan under development
 Revitalization Plan submitted, pending approval
 Revitalization Plan approved
 Activities pursuant to an approved Revitalization Plan underway

- Yes No: c) Does the PHA plan to apply for a HOPE VI Revitalization grant in the Plan year?

If yes, list development name/s below:

Tonomy Hill

- Yes No: d) Will the PHA be engaging in any mixed-finance development activities for public housing in the Plan year?

If yes, list developments or activities below:

Tonomy Hill

- Yes No: e) Will the PHA be conducting any other public housing development or replacement activities not discussed in the Capital Fund Program Annual Statement?

If yes, list developments or activities below:

Tonomy Hill Phase I Redevelopment

8. Demolition and Disposition

[24 CFR Part 903.7 9 (h)]

Applicability of component 8: Section 8 only PHAs are not required to complete this section.

1. Yes No: Does the PHA plan to conduct any demolition or disposition activities (pursuant to section 18 of the U.S. Housing Act of 1937 (42 U.S.C. 1437p)) in the plan Fiscal Year? (If “No”, skip to component 9; if “yes”, complete one activity description for each development.)

2. Activity Description

- Yes No: Has the PHA provided the activities description information in the **optional** Public Housing Asset Management Table? (If “yes”, skip to component 9. If “No”, complete the Activity Description table below.)

Demolition/Disposition Activity Description	
1a. Development name:	Tonomy Hill
1b. Development (project) number:	RI 5-3
2. Activity type:	Demolition <input checked="" type="checkbox"/> Disposition <input type="checkbox"/>
3. Application status(select one)	Approved <input type="checkbox"/> Submitted, pending approval <input type="checkbox"/> Planned application <input checked="" type="checkbox"/>
4. Date application approved, submitted, or planned for submission:	<u>(DD/MM/YY)</u>
5. Number of units affected:	498 NOTE: Only 68 units are planned to be demolished
6. Coverage of action (select one)	in FY2002 pending approval of the Authority's Tax Credit Application or possible HOPE VI application.
	<input type="checkbox"/> Part of the development <input checked="" type="checkbox"/> Total development
7. Timeline for activity:	
a. Actual or projected start date of activity:	9/2001
b. Projected end date of activity:	9/2002

9. Designation of Public Housing for Occupancy by Elderly Families or Families with Disabilities or Elderly Families and Families with Disabilities

[24 CFR Part 903.7 9 (i)]

Exemptions from Component 9; Section 8 only PHAs are not required to complete this section.

1. Yes No: Has the PHA designated or applied for approval to designate or does the PHA plan to apply to designate any public housing for occupancy only by the elderly families or only by families with disabilities, or by elderly families and families with disabilities or will apply for designation for occupancy by only elderly families or only families with disabilities, or by elderly families and families with disabilities as provided by section 7 of the U.S. Housing Act of 1937 (42 U.S.C. 1437e) in the upcoming fiscal year? (If “No”, skip to component 10. If “yes”, complete one activity description for each development, unless the PHA is eligible to complete a streamlined submission; PHAs completing streamlined submissions may skip to component 10.)

2. Activity Description

Yes No: Has the PHA provided all required activity description information for this component in the **optional** Public Housing Asset Management Table? If “yes”, skip to component 10. If “No”, complete the Activity Description table below.

Designation of Public Housing Activity Description	
1a. Development name: Donovan Manor	
1b. Development (project) number: RI 5-5	
2. Designation type: Occupancy by only the elderly <input checked="" type="checkbox"/> Occupancy by families with disabilities <input type="checkbox"/> Occupancy by only elderly families and families with disabilities <input type="checkbox"/>	
3. Application status (select one) Approved; included in the PHA’s Designation Plan <input checked="" type="checkbox"/> Submitted, pending approval <input type="checkbox"/> Planned application <input type="checkbox"/>	
4. Date this designation approved, submitted, or planned for submission: <u>(16/01/98)</u>	
5. If approved, will this designation constitute a (select one) <input checked="" type="checkbox"/> New Designation Plan <input type="checkbox"/> Revision of a previously-approved Designation Plan?	
6. Number of units affected: 110	Note: Of the 3 elderly developments, only Donovan Manor is affected by the change. The 54 disabled households at Donovan Manor either have been, or will be relocated to other 1-bedroom public housing units, including other elderly developments.
7. Coverage of action (select one) <input checked="" type="checkbox"/> Part of the development <input type="checkbox"/> Total development	

10. Conversion of Public Housing to Tenant-Based Assistance

[24 CFR Part 903.7 9 (j)]

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

A. Assessments of Reasonable Revitalization Pursuant to section 202 of the HUD FY 1996 HUD Appropriations Act

1. Yes No: Have any of the PHA's developments or portions of developments been identified by HUD or the PHA as covered under section 202 of the HUD FY 1996 HUD Appropriations Act? (If "No", skip to component 11; if "yes", complete one activity description for each identified development, unless eligible to complete a streamlined submission. PHAs completing streamlined submissions may skip to component 11.)

2. Activity Description

- Yes No: Has the PHA provided all required activity description information for this component in the **optional** Public Housing Asset Management Table? If "yes", skip to component 11. If "No", complete the Activity Description table below.

Conversion of Public Housing Activity Description	
1a. Development name:	
1b. Development (project) number:	
2. What is the status of the required assessment?	<input type="checkbox"/> Assessment underway <input type="checkbox"/> Assessment results submitted to HUD <input type="checkbox"/> Assessment results approved by HUD (if marked, proceed to next question) <input type="checkbox"/> Other (explain below)
3. <input type="checkbox"/> Yes <input type="checkbox"/> No: Is a Conversion Plan required? (If yes, go to block 4; if no, go to block 5.)	
4. Status of Conversion Plan (select the statement that best describes the current status)	<input type="checkbox"/> Conversion Plan in development <input type="checkbox"/> Conversion Plan submitted to HUD on: (DD/MM/YYYY) <input type="checkbox"/> Conversion Plan approved by HUD on: (DD/MM/YYYY) <input type="checkbox"/> Activities pursuant to HUD-approved Conversion Plan underway

5. Description of how requirements of Section 202 are being satisfied by means other than conversion (select one)

- Units addressed in a pending or approved demolition application (date submitted or approved: _____)
- Units addressed in a pending or approved HOPE VI demolition application (date submitted or approved: _____)
- Units addressed in a pending or approved HOPE VI Revitalization Plan (date submitted or approved: _____)
- Requirements no longer applicable: vacancy rates are less than 10 percent
- Requirements no longer applicable: site now has less than 300 units
- Other: (describe below)

B. Reserved for Conversions pursuant to Section 22 of the U.S. Housing Act of 1937

C. Reserved for Conversions pursuant to Section 33 of the U.S. Housing Act of 1937

11. Homeownership Programs Administered by the PHA

[24 CFR Part 903.7 9 (k)]

A. Public Housing

Exemptions from Component 11A: Section 8 only PHAs are not required to complete 11A.

1. Yes No: Does the PHA administer any homeownership programs administered by the PHA under an approved section 5(h) homeownership program (42 U.S.C. 1437c(h)), or an approved HOPE I program (42 U.S.C. 1437aaa) or has the PHA applied or plan to apply to administer any homeownership programs under section 5(h), the HOPE I program, or section 32 of the U.S. Housing Act of 1937 (42 U.S.C. 1437z-4). (If “No”, skip to component 11B; if “yes”, complete one activity description for each applicable program/plan, unless eligible to complete a streamlined submission due to **small PHA** or **high performing PHA** status. PHAs completing streamlined submissions may skip to component 11B.)

2. Activity Description

- Yes No: Has the PHA provided all required activity description information for this component in the **optional** Public Housing Asset Management Table? (If “yes”, skip to component 12. If “No”, complete the Activity Description table below.)

Public Housing Homeownership Activity Description (Complete one for each development affected)	
1a. Development name:	
1b. Development (project) number:	
2. Federal Program authority:	<input type="checkbox"/> HOPE I <input type="checkbox"/> 5(h) <input type="checkbox"/> Turnkey III <input type="checkbox"/> Section 32 of the USHA of 1937 (effective 10/1/99)
3. Application status: (select one)	<input type="checkbox"/> Approved; included in the PHA's Homeownership Plan/Program <input type="checkbox"/> Submitted, pending approval <input type="checkbox"/> Planned application
4. Date Homeownership Plan/Program approved, submitted, or planned for submission: (DD/MM/YYYY)	
5. Number of units affected:	
6. Coverage of action: (select one)	<input type="checkbox"/> Part of the development <input type="checkbox"/> Total development

B. Section 8 Tenant Based Assistance

1. Yes No: Does the PHA plan to administer a Section 8 Homeownership program pursuant to Section 8(y) of the U.S.H.A. of 1937, as implemented by 24 CFR part 982 ? (If "No", skip to component 12; if "yes", describe each program using the table below (copy and complete questions for each program identified), unless the PHA is eligible to complete a streamlined submission due to high performer status. **High performing PHAs** may skip to component 12.)

2. Program Description:

a. Size of Program

- Yes No: Will the PHA limit the number of families participating in the section 8 homeownership option?

If the answer to the question above was yes, which statement best describes the number of participants? (select one)

- 25 or fewer participants
 26 - 50 participants
 51 to 100 participants
 more than 100 participants

b. PHA-established eligibility criteria

- Yes No: Will the PHA's program have eligibility criteria for participation in its Section 8 Homeownership Option program in addition to HUD criteria?
If yes, list criteria below:

12. PHA Community Service and Self-sufficiency Programs

[24 CFR Part 903.7 9 (l)]

Exemptions from Component 12: High performing and small PHAs are not required to complete this component. Section 8-Only PHAs are not required to complete sub-component C.

A. PHA Coordination with the Welfare (TANF) Agency

1. Cooperative agreements:

- Yes No: Has the PHA has entered into a cooperative agreement with the TANF Agency, to share information and/or target supportive services (as contemplated by section 12(d)(7) of the Housing Act of 1937)?
Note: Department of Human Services provides assistance to all Housing Authorities with individual welfare agencies.

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

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

- Client referrals
 Information sharing regarding mutual clients (for rent determinations and otherwise)
 Coordinate the provision of specific social and self-sufficiency services and programs to eligible families
 Jointly administer programs
 Partner to administer a HUD Welfare-to-Work voucher program
 Joint administration of other demonstration program
 Other (describe) Even Start Program

B. Services and programs offered to residents and participants

(1) General

a. Self-Sufficiency Policies

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)

- Public housing rent determination policies
 Public housing admissions policies
 Section 8 admissions policies
 Preference in admission to section 8 for certain public housing families

- Preferences for families working or engaging in training or education programs for non-housing programs operated or coordinated by the PHA
- Preference/eligibility for public housing homeownership option participation
- Preference/eligibility for section 8 homeownership option participation
- Other policies (list below)

b. Economic and Social self-sufficiency programs

- Yes No: Does the PHA coordinate, promote or provide any programs to enhance the economic and social self-sufficiency of residents? (If “yes”, complete the following table; if “no” skip to sub-component 2, Family Self Sufficiency Programs. The position of the table may be altered to facilitate its use.)

Services and Programs				
Program Name & Description (including location, if appropriate)	Estimated Size	Allocation Method (waiting list/random selection/specific criteria/other)	Access (development office / PHA main office / other provider name)	Eligibility (public housing or section 8 participants or both)
Elderly Social Serv. Coordinator	358	Occupancy	Donovan Manor	Public Housing
ESL	25	Program Eligible	Sullivan School/FMG	PH
GED	25	" "	" " "	PH
CODAC III	25	Referrals	FMG Center	PH
Head Start/Child Care	45	" "	" "	PH
Boys & Girls Club	110	Program Eligible	" "	PH
PHA basketball league	40	" "	" "	PH
Park Holm Senior Center	30	" "	Park Holm Senior Ctr.	PH
Resident Council				PH

(2) Family Self Sufficiency program/s

a. Participation Description

Family Self Sufficiency (FSS) Participation		
Program	Required Number of Participants (start of FY 2000 Estimate)	Actual Number of Participants (As of: DD/MM/YY)
Public Housing		
Section 8		

- b. Yes No: If the PHA is not maintaining the minimum program size required by HUD, does the most recent FSS Action Plan address the steps the PHA plans to take to achieve at least the minimum program size? If no, list steps the PHA will take below:

C. Welfare Benefit Reductions

1. The PHA is complying with the statutory requirements of section 12(d) of the U.S. Housing Act of 1937 (relating to the treatment of income changes resulting from welfare program requirements) by: (select all that apply)

- Adopting appropriate changes to the PHA's public housing rent determination policies and train staff to carry out those policies
- Informing residents of new policy on admission and reexamination
- Actively notifying residents of new policy at times in addition to admission and reexamination.
- Establishing or pursuing a cooperative agreement with all appropriate TANF agencies regarding the exchange of information and coordination of services
- Establishing a protocol for exchange of information with all appropriate TANF agencies
- Other: (list below)

D. Reserved for Community Service Requirement pursuant to section 12(c) of the U.S. Housing Act of 1937
--

13. PHA Safety and Crime Prevention Measures

[24 CFR Part 903.7 9 (m)]

Exemptions from Component 13: High performing and small PHAs not participating in PHDEP and Section 8 Only PHAs may skip to component 15. High Performing and small PHAs that are participating in PHDEP and are submitting a PHDEP Plan with this PHA Plan may skip to sub-component D.

A. Need for measures to ensure the safety of public housing residents

1. Describe the need for measures to ensure the safety of public housing residents (select all that apply)

- High incidence of violent and/or drug-related crime in some or all of the PHA's developments
- High incidence of violent and/or drug-related crime in the areas surrounding or adjacent to the PHA's developments
- Residents fearful for their safety and/or the safety of their children
- Observed lower-level crime, vandalism and/or graffiti
- People on waiting list unwilling to move into one or more developments due to perceived and/or actual levels of violent and/or drug-related crime
- Other (describe below)

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).

- Safety and security survey of residents

- Analysis of crime statistics over time for crimes committed “in and around” public housing authority
- Analysis of cost trends over time for repair of vandalism and removal of graffiti
- Resident reports
- PHA employee reports
- Police reports
- Demonstrable, quantifiable success with previous or ongoing anticrime/anti drug programs
- Other (describe below) Security questions were included as part of separate survey. Similar questions are routinely included in other surveys.

3. Which developments are most affected? (list below) Park Holm, Chapel Terrace, Tonomy Hill

B. Crime and Drug Prevention activities the PHA has undertaken or plans to undertake in the next PHA fiscal year

1. List the crime prevention activities the PHA has undertaken or plans to undertake: (select all that apply)

- Contracting with outside and/or resident organizations for the provision of crime- and/or drug-prevention activities
- Crime Prevention Through Environmental Design
- Activities targeted to at-risk youth, adults, or seniors
- Volunteer Resident Patrol/Block Watchers Program
- Other (describe below) Community Oriented Policing

2. Which developments are most affected? (list below)
Park Holm, Chapel Terrace, Tonomy Hill

C. Coordination between PHA and the police

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

- Police involvement in development, implementation, and/or ongoing evaluation of drug-elimination plan
- Police provide crime data to housing authority staff for analysis and action
- Police have established a physical presence on housing authority property (e.g., community policing office, officer in residence)
- Police regularly testify in and otherwise support eviction cases
- Police regularly meet with the PHA management and residents
- Agreement between PHA and local law enforcement agency for provision of above-baseline law enforcement services
- Other activities (list below) At Resident Advisory Board suggestion, Newport

Housing Authority will approach court system to have those convicted of drug and serious crime banned from Newport Housing Authority property as a condition of probation at sentencing.

2. Which developments are most affected? (list below) Park Holm, Chapel Terrace, Tonomy Hill

D. Additional information as required by PHDEP/PHDEP Plan

PHAs eligible for FY 2000 PHDEP funds must provide a PHDEP Plan meeting specified requirements prior to receipt of PHDEP funds.

- Yes No: Is the PHA eligible to participate in the PHDEP in the fiscal year covered by this PHA Plan?
- Yes No: Has the PHA included the PHDEP Plan for FY 2002 in this PHA Plan?
- Yes No: This PHDEP Plan is an Attachment M (ri005m02)

14. RESERVED FOR PET POLICY

[24 CFR Part 903.7 9 (n)]

15. Civil Rights Certifications

[24 CFR Part 903.7 9 (o)]

Civil rights certifications are included in the PHA Plan Certifications of Compliance with the PHA Plans and Related Regulations.

16. Fiscal Audit

[24 CFR Part 903.7 9 (p)]

- 1. Yes No: Is the PHA required to have an audit conducted under section 5(h)(2) of the U.S. Housing Act of 1937 (42 U.S.C. 1437c(h))?
(If no, skip to component 17.)
- 2. Yes No: Was the most recent fiscal audit submitted to HUD?
- 3. Yes No: Were there any findings as the result of that audit?
- 4. Yes No: If there were any findings, do any remain unresolved?
If yes, how many unresolved findings remain? _____
- 5. Yes No: Have responses to any unresolved findings been submitted to HUD?
If not, when are they due (state below)?

17. PHA Asset Management

[24 CFR Part 903.7 9 (q)]

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 the PHA engaging in any activities that will contribute to the long-term asset management of its public housing stock , including how the Agency will plan for long-term operating, capital investment, rehabilitation, modernization, disposition, and other needs that have **not** been addressed elsewhere in this PHA Plan?
2. What types of asset management activities will the PHA undertake? (select all that apply)
- Not applicable
 - Private management
 - Development-based accounting
 - Comprehensive stock assessment
 - Other: (list below)
3. Yes No: Has the PHA included descriptions of asset management activities in the **optional** Public Housing Asset Management Table?

18. Other Information

[24 CFR Part 903.7 9 (r)]

A. Resident Advisory Board Recommendations

1. Yes No: Did the PHA receive any comments on the PHA Plan from the Resident Advisory Board/s?
2. If yes, the comments are: (if comments were received, the PHA **MUST** select one)
- Attached at Attachment N (ri005n02)
 - Provided below:
3. In what manner did the PHA address those comments? (select all that apply)
- Considered comments, but determined that no changes to the PHA Plan were necessary.
 - The PHA changed portions of the PHA Plan in response to comments
List changes below: Demolition/Disposition Activity
 - Other: (list below)

B. Description of Election process for Residents on the PHA Board

- 1. Yes No: Does the PHA meet the exemption criteria provided section 2(b)(2) of the U.S. Housing Act of 1937? (If no, continue to question 2; if yes, skip to sub-component C.)

- 2. Yes No: Was the resident who serves on the PHA Board elected by the residents? (If yes, continue to question 3; if no, skip to sub-component C.)

3. Description of Resident Election Process

a. Nomination of candidates for place on the ballot: (select all that apply)

- Candidates were nominated by resident and assisted family organizations
- Candidates could be nominated by any adult recipient of PHA assistance
- Self-nomination: Candidates registered with the PHA and requested a place on ballot
- Other: (describe)

b. Eligible candidates: (select one)

- Any recipient of PHA assistance
- Any head of household receiving PHA assistance
- Any adult recipient of PHA assistance
- Any adult member of a resident or assisted family organization
- Other (list)

c. Eligible voters: (select all that apply)

- All adult recipients of PHA assistance (public housing and section 8 tenant-based assistance)
- Representatives of all PHA resident and assisted family organizations
- Other (list)

C. Statement of Consistency with the Consolidated Plan

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

- 1. Consolidated Plan jurisdiction: (provide name here)

- 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)
 - The PHA has based its statement of needs of families in the jurisdiction on the needs expressed in the Consolidated Plan/s.
 - The PHA has participated in any consultation process organized and offered by the Consolidated Plan agency in the development of the Consolidated Plan.

- The PHA has consulted with the Consolidated Plan agency during the development of this PHA Plan.
- Activities to be undertaken by the PHA in the coming year are consistent with the initiatives contained in the Consolidated Plan. (list below)
- Other: (list below)

4. The Consolidated Plan of the jurisdiction supports the PHA Plan with the following actions and commitments: (describe below)

D. Other Information Required by HUD

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

Most recently issued PHAS score of the Newport Housing Authority is 84.0, Advisory.

Attachments

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

- Attachment A - Deconcentration and Income Mixing
- Attachment B - FY 1999 CFP Annual Statement/Performance & Evaluation Report
- Attachment C - FY 2000 CFP Annual Statement/Performance & Evaluation Report
- Attachment D - FY 2001 CFP Annual Statement/Performance & Evaluation Report
- Attachment E - FY 2002 CFP Annual Statement
- Attachment F - Pet Policy Narrative
- Attachment G - Statement of Progress in Meeting the Mission and Goals Outlined in Current 5-Year Plan
- Attachment H - Resident Members of the PHA Governing Board
- Attachment I - Membership of the Resident Advisory Board
- Attachment J - Project-Based Voucher Program
- Attachment K - Voluntary Conversion Initial Assessment

- Attachment L - PHA Management Organization Chart
- Attachment M - Public Housing Drug Elimination Program Plan (PHDEP)
- Attachment N - Comments of Resident Advisory Board
- Attachment O - Five-Year Action Plan for Capital Fund

ATTACHMENT B (ri005b02)
CAPITAL FUND PROGRAM TABLES START HERE

Annual Statement/Performance and Evaluation Report					
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part I: Summary					
PHA Name: The Housing Authority of the City of Newport, Rhode Island		Grant Type and Number Capital Fund Program Grant No: RI43P00570899 Replacement Housing Factor Grant No:			Federal FY of Grant: 1999
<input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/ Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:)					
<input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 9/30/2001 <input type="checkbox"/> Final Performance and Evaluation Report					
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations				
3	1408 Management Improvements	245,424	391,221	391,221	391,221
4	1410 Administration	222,700	277,000	277,000	277,000
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	110,000	121,473	121,473	117,121
8	1440 Site Acquisition				
9	1450 Site Improvement	200,000	183,000	183,000	6,552
10	1460 Dwelling Structures	1,906,205	1,679,932	1,679,932	1,299,548
11	1465.1 Dwelling Equipment—Nonexpendable	33,600	60,268	60,268	60,268
12	1470 Nondwelling Structures				
13	1475 Nondwelling Equipment	55,135	60,170	60,170	60,170
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs				
18	1499 Development Activities				
19	1501 Collateralization or Debt Service				
20	1502 Contingency				
21	Amount of Annual Grant: (sum of lines 2 – 20)	2,773,064	2,773,064	2,773,064	2,211,880
22	Amount of line 21 Related to LBP Activities				
23	Amount of line 21 Related to Section 504 compliance				
24	Amount of line 21 Related to Security – Soft Costs	136,839	113,868	113,868	113,868
25	Amount of Line 21 Related to Security – Hard Costs				
26	Amount of line 21 Related to Energy Conservation Measures	360,000	421,203	421,203	389,732

Annual Statement/Performance and Evaluation Report

Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)

Part II: Supporting Pages

PHA Name: The Housing Authority of the City of Newport, Rhode Island		Grant Type and Number Capital Fund Program Grant No: RI43P00570899 Replacement Housing Factor Grant No:			Federal FY of Grant: 1999			
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised	Funds Obligated	Funds Expended	
RI 5-1	A. Replace bathroom windows	1460		0	0	0	0	underway
Park Holm	B. Trash enclosures	1460		153,000	153,000	153,000	6,552	
	Sub total:			153,000	153,000	153,000	6,552	
RI 5-2	A. Trash enclosures	1450		20,000	20,000	20,000	0	contracted
Chapel Terrace	Sub total:			20,000	20,000	20,000	0	
RI 5-3	A. Unit preparation	1460		177,649	177,649	177,649	119,846	underway
Tonomy Hill	Sub total:			177,649	177,649	177,649	119,846	
RI 5-4	A. Replace appliances	1465		59,280	60,268	60,268	60,268	complete
Pond/Edgar	B. Replace heating boilers	1460		269,704	269,704	269,704	238,233	underway
	C. Renovate kitchens	1460		410,867	410,894	410,894	410,894	complete
	D. Trash enclosures	1450		10,000	10,000	10,000	0	contracted
	Sub total:			749,851	750,866	750,866	709,395	

Annual Statement/Performance and Evaluation Report
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)
Part II: Supporting Pages

PHA Name: The Housing Authority of the City of Newport, Rhode Island		Grant Type and Number Capital Fund Program Grant No: RI43P00570899 Replacement Housing Factor Grant No:			Federal FY of Grant: 1999			
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised	Funds Obligated	Funds Expended	
RI 5-5A	A. Exterior sealants	1460		29,000	37,261	37,261	37,261	complete
Donovan Manor	B. Convert efficiency apartments	1460		32,500	32,500	32,500	32,500	complete
	Sub total:			61,500	69,761	69,761	69,761	
RI 5-5B	A. Replace heat system	1460		114,238	114,238	114,238	114,238	complete
Chapel/	B. Renovate kitchens	1460		350,000	350,000	350,000	289,576	underway
Coddington	C. Renovate bathrooms	1460		208,186	208,186	208,186	0	contracted
	Sub total:			672,424	672,424	672,424	403,814	
RI 5-8	A. Replace roof, gutters, downspouts	1460		75,000	79,500	79,500	57,000	underway
Earl Avenue	Sub total:			75,000	79,500	79,500	57,000	
HA-Wide	A. Additional security patrols	1408		122,043	113,869	113,869	113,869	complete
Management	B. Resident employment	1408		271,475	263,428	263,428	263,428	complete
Improvements	C. Resident Council operations	1408		13,924	13,924	13,924	13,924	complete
	Sub total:			407,442	391,221	391,221	391,221	

Annual Statement/Performance and Evaluation Report

Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)

Part II: Supporting Pages

PHA Name: The Housing Authority of the City of Newport, Rhode Island		Grant Type and Number Capital Fund Program Grant No: RI43P00570899 Replacement Housing Factor Grant No:			Federal FY of Grant: 1999			
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised	Funds Obligated	Funds Expended	
HA-Wide	A. Salary and benefit allocation for	1410		277,000	277,000	277,000	277,000	complete
Admin. Costs	Administrative employees			277,000	277,000	277,000	277,000	
	Sub total:							
Fees & Costs	A. A/E fees 1999 CGP	1430		105,992	106,920	106,920	102,568	ongoing
	B. Clerk of the Works	1430		5,000	6,517	6,517	6,517	complete
	C. Phase I Plan/Five Year Plan	1430		8,036	8,036	8,036	8,036	complete
	Sub total:			119,028	121,473	121,473	117,121	
Non-Dwelling Equipment	A. Computer replacements	1475		11,254	11,254	11,254	11,254	complete
	B. Pickup truck	1475		12,245	12,245	12,245	12,245	complete
	C. Service van	1475		21,890	21,890	21,890	21,890	complete
	D. Lawn tractor	1475		14,781	14,781	14,781	14,781	complete
	Sub total:			60,170	60,170	60,170	60,170	
	Grand Total CGP 708			2,773,064	2,773,064	2,773,064	2,211,880	

Annual Statement/Performance and Evaluation Report
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)
Part III: Implementation Schedule

PHA Name: The Housing Authority of the City of Newport, Rhode Island	Grant Type and Number Capital Fund Program No: RI43P00570899 Replacement Housing Factor No:	Federal FY of Grant: 1999
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Development Number Name/HA-Wide Activities	All Fund Obligated (Quarter Ending Date)			All Funds Expended (Quarter Ending Date)			Reasons for Revised Target Dates
	Original	Revised	Actual	Original	Revised	Actual	
RI 5-1 Park Holm	3/31/01		3/31/01	9/30/02			
RI 5-3 Tonomy Hill	3/31/01		3/31/01	9/30/02			
RI 5-4 Pond/Edgar	3/31/01		3/31/01	9/30/02			
RI 5-5A Donovan Manor	3/31/01		3/31/01	9/30/02			
RI 5-5B Chapel/Coddington	3/31/01		3/31/01	9/30/02			
RI 5-8 Earl Avenue	3/31/01		3/31/01	9/30/02			

CAPITAL FUND PROGRAM TABLES START HERE

Annual Statement/Performance and Evaluation Report					
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part I: Summary					
PHA Name: The Housing Authority of the City of Newport, Rhode Island		Grant Type and Number Capital Fund Program Grant No: RI43P00550100 Replacement Housing Factor Grant No:			Federal FY of Grant: 2000
<input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/ Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:)					
<input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 9/30/2001 <input type="checkbox"/> Final Performance and Evaluation Report					
Lin e No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations				
3	1408 Management Improvements	355,500	235,700	219,700	70,342
4	1410 Administration	222,700	222,700	222,700	24,360
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	94,000	94,000	0	0
8	1440 Site Acquisition				
9	1450 Site Improvement	179,100	265,000	0	0
10	1460 Dwelling Structures	1,701,037	1,750,000	0	0
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Nondwelling Structures				
13	1475 Nondwelling Equipment	72,000	56,937	22,503	22,503
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs				
18	1499 Development Activities				
19	1501 Collateralization or Debt Service				
20	1502 Contingency				
21	Amount of Annual Grant: (sum of lines 2 – 20)	2,624,337	2,624,337	464,903	117,205
22	Amount of line 21 Related to LBP Activities				
23	Amount of line 21 Related to Section 504 compliance				
24	Amount of line 21 Related to Security – Soft Costs	136,839	45,000	39,000	15,142
25	Amount of Line 21 Related to Security – Hard Costs				
26	Amount of line 21 Related to Energy Conservation Measures	360,000	103,000	0	0

Annual Statement/Performance and Evaluation Report
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)
Part II: Supporting Pages

PHA Name: The Housing Authority of the City of Newport, Rhode Island		Grant Type and Number Capital Fund Program Grant No: RI43P00550100 Replacement Housing Factor Grant No:			Federal FY of Grant: 2000			
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised	Funds Obligated	Funds Expended	
RI 5-1	A. Trash enclosures	1450		80,000	0			
Park Holm	B. Replace entrance stairs	1460		165,666	0			
	C. Repair building envelope	1460		0	500,000			
	D. Replace heat systems	1460		24,000	28,000			
	Sub total:			269,666	528,000			
RI 5-2	A. Trash enclosures	1450		10,000	0			
Chapel Terrace	B. Repair basements	1460		0	140,000			
	C. Landscaping	1450		0	40,000			
	Sub total:			10,000	180,000			
RI 5-3	A. Renovate kitchens	1460		677,346	0			
Tonomy Hill	B. Renovate bathrooms	1460		652,025	0			
	Sub total:			1,329,371	0			
RI 5-4	A. Trash enclosures	1450		10,000	0			
Pond/Edgar	B. Sidewalks/site work	1450		36,400	100,000			
	Sub total:			46,400	100,000			

**Annual Statement/Performance and Evaluation Report
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)
Part II: Supporting Pages**

PHA Name: The Housing Authority of the City of Newport, Rhode Island		Grant Type and Number Capital Fund Program Grant No: RI43P00550100 Replacement Housing Factor Grant No:			Federal FY of Grant: 2000			
Development Number Name/HA- Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised	Funds Obligated	Funds Expended	
RI 5-5A	A. Replace sidewalks/site work	1450		35,200	100,000			
Donovan Manor	B. Night buzzer	1460		2,000	0			
	C. Sprinkler system	1460		0	1,000,000			
	D. Generator	1460		0	82,000			
	Sub total:			37,200	1,182,000			
RI 5-5B	A. Renovate kitchens	1460		180,000	0			
Chapel/ Coddington	Sub total:			180,000	0			
RI 5-8	A. Sidewalk/site work	1450		7,500	25,000			
Earl Avenue	Sub total:			7,500	25,000			
HA-Wide Management Improvements	A. Additional security patrols	1408		90,000	45,000	39,000	15,142	ongoing
	B. Resident employment	1408		125,500	125,500	125,500	0	starting
	C. Resident Council operations	1408		124,000	49,200	49,200	49,200	ongoing
	D. Software upgrades	1408		10,000	10,000	0	0	
	E. Staff training	1408		6,000	6,000	6,000	6,000	complete
	Sub total:			355,500	235,700	219,700	70,342	

Annual Statement/Performance and Evaluation Report
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)
Part II: Supporting Pages

PHA Name: The Housing Authority of the City of Newport, Rhode Island		Grant Type and Number Capital Fund Program Grant No: RI43P00550100 Replacement Housing Factor Grant No:			Federal FY of Grant: 2000			
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised	Funds Obligated	Funds Expended	
HA-Wide	A. Salary allocation	1410		222,700	222,700	222,700	24,360	ongoing
Admin. Costs	Sub total:			222,700	222,700	222,700	24,360	
Fees & Costs	A. Clerk of the Works	1430		26,100	26,100			
	B. A & E fees	1430		67,900	67,900			
	Sub total:			94,000	94,000			
Non-Dwelling Equipment	A. Computer replacements	1475		22,000	7,000	1,439	1,439	underway
	B. Pickup truck	1475		15,000	19,914	0	0	
	C. Service van	1475		20,000	21,064	21,064	21,064	complete
	D. Equipment	1475		15,000	8,959	0	0	
	Sub total:			72,000	56,937	22,503	22,503	
	Grand Total CGP 709			2,624,337	2,624,337	464,903	117,205	

Annual Statement/Performance and Evaluation Report
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)
Part III: Implementation Schedule

PHA Name: The Housing Authority of the City of Newport, Rhode Island	Grant Type and Number Capital Fund Program No: RI43P00550100 Replacement Housing Factor No:	Federal FY of Grant: 2000
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Development Number Name/HA-Wide Activities	All Fund Obligated (Quarter Ending Date)			All Funds Expended (Quarter Ending Date)			Reasons for Revised Target Dates
	Original	Revised	Actual	Original	Revised	Actual	
RI 5-1 Park Holm	3/31/02			9/30/03			
RI 5-3 Tonomy Hill	3/31/02			9/30/03			
RI 5-4 Pond/Edgar	3/31/02			9/30/03			
RI 5-5A Donovan Manor	3/31/02			9/30/03			
RI 5-5B Chapel/Coddington	3/31/02			9/30/03			
RI 5-8 Earl Avenue	3/31/02			9/30/03			

ATTACHMENT D (ri005d02)

CAPITAL FUND PROGRAM TABLES START HERE

Annual Statement/Performance and Evaluation Report

Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part I: Summary

PHA Name: The Housing Authority of the City of Newport, Rhode Island	Grant Type and Number Capital Fund Program Grant No: RI43P00550101 Replacement Housing Factor Grant No:	Federal FY of Grant: 2001
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Original Annual Statement Reserve for Disasters/ Emergencies Revised Annual Statement (revision no:)
 Performance and Evaluation Report for Period Ending: 9/30/01 Final Performance and Evaluation Report

Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations				
3	1408 Management Improvements	355,500			
4	1410 Administration	222,700			
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	94,000			
8	1440 Site Acquisition				
9	1450 Site Improvement	23,500			
10	1460 Dwelling Structures	1,628,681			
11	1465.1 Dwelling Equipment—Nonexpendable	302,266			
12	1470 Nondwelling Structures	0			
13	1475 Nondwelling Equipment	57,000			
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs				
18	1499 Development Activities				
19	1501 Collateralization or Debt Service				
20	1502 Contingency				
21	Amount of Annual Grant: (sum of lines 2 – 20)	2,683,647			
22	Amount of line 21 Related to LBP Activities				
23	Amount of line 21 Related to Section 504 compliance				
24	Amount of line 21 Related to Security – Soft Costs	90,000			
25	Amount of Line 21 Related to Security – Hard Costs				
26	Amount of line 21 Related to Energy Conservation Measures				

Annual Statement/Performance and Evaluation Report
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)
Part II: Supporting Pages

PHA Name: The Housing Authority of the City of Newport, Rhode Island		Grant Type and Number Capital Fund Program Grant No: RI43P00550101 Replacement Housing Factor Grant No:			Federal FY of Grant: 2001			
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status Work
				Original	Revised	Funds Obligated	Funds Expended	
RI 5-1	A. Replace appliances	1465	262	226,266				
Park Holm	Sub total:			226,266				
RI 5-3	A. Renovate kitchens	1460	166	679,685				
Tonomy Hill	B. Renovate bathrooms	1460	166	679,686				
	Sub total:			1,359,371				
RI 5-4	A. Replace appliances	1465	76	76,000				
Pond/Edgar	Sub total:			76,000				
RI 5-5A	A. Install sprinkler system	1450		169,310				
Donovan Manor	Sub total:			169,310				
RI 5-8	A. Site improvements	1450		23,000				
Earl Avenue	Sub total:			23,000				

Annual Statement/Performance and Evaluation Report
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)
Part II: Supporting Pages

PHA Name: The Housing Authority of the City of Newport, Rhode Island		Grant Type and Number Capital Fund Program Grant No: RI43P00550101 Replacement Housing Factor Grant No:			Federal FY of Grant: 2001			
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status Work
				Original	Revised	Funds Obligated	Funds Expended	
Non Dwelling	A. Computers	1475		7,000				
Equipment	B. Service van	1475	1	20,000				
	C. Replace hand-held radios	1475	20	30,000				
	Sub total:			57,000				
HA-Wide	A. Security program	1408		90,000				
Management	B. Resident employment	1408		125,500				
Improvements	C. Resident Council operations	1408		124,000				
	D. Software upgrades	1408		10,000				
	E. Staff training	1408		6,000				
	Sub total:			355,500				
HA-Wide	A. Unit turnaround	1460		100,000				
	Sub total:			100,000				

Annual Statement/Performance and Evaluation Report
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)
Part III: Implementation Schedule

PHA Name: The Housing Authority of the City of Newport, Rhode Island		Grant Type and Number Capital Fund Program No: RI43P00550101 Replacement Housing Factor No:					Federal FY of Grant: 2001	
Development Number Name/HA-Wide Activities	All Fund Obligated (Quarter Ending Date)			All Funds Expended (Quarter Ending Date)			Reasons for Revised Target Dates	
	Original	Revised	Actual	Original	Revised	Actual		
RI 5-1 Park Holm	3/31/03			9/30/04				
RI 5-3 Tonomy Hill	3/31/03			3/31/04				
RI 5-4 Pond/Edgar	3/31/03			3/31/04				
RI 5-5A Donovan Manor	3/31/03			3/31/04				
RI 5-8 Earl Avenue	3/31/03			3/31/04				

ATTACHMENT E (ri005e02)
CAPITAL FUND PROGRAM TABLES START HERE

Annual Statement/Performance and Evaluation Report					
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part I: Summary					
PHA Name: The Housing Authority of the City of Newport, Rhode Island		Grant Type and Number Capital Fund Program Grant No: RI43P0050102 Replacement Housing Factor Grant No:			Federal FY of Grant: 2002
<input checked="" type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/ Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:) <input type="checkbox"/> Performance and Evaluation Report for Period Ending: <input type="checkbox"/> Final Performance and Evaluation Report					
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations	524,867			
3	1408 Management Improvements	355,500			
4	1410 Administration	222,700			
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	15,000			
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures	1,565,580			
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Nondwelling Structures				
13	1475 Nondwelling Equipment				
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs				
18	1499 Development Activities				
19	1501 Collateralization or Debt Service				
20	1502 Contingency				
21	Amount of Annual Grant: (sum of lines 2 – 20)	2,683,647			
22	Amount of line 21 Related to LBP Activities				
23	Amount of line 21 Related to Section 504 compliance				
24	Amount of line 21 Related to Security – Soft Costs				
25	Amount of Line 21 Related to Security – Hard Costs				
26	Amount of line 21 Related to Energy Conservation Measures				

Annual Statement/Performance and Evaluation Report
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)
Part II: Supporting Pages

PHA Name: The Housing Authority of the City of Newport, Rhode Island		Grant Type and Number Capital Fund Program Grant No: RI43P0050102 Replacement Housing Factor Grant No:			Federal FY of Grant: 2002			
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised	Funds Obligated	Funds Expended	
RI 5-5A	A. Install sprinkler system	1460		1,366,580				
Donovan Manor	B. Replace emergency generator	1460		65,000				
	C. Replace stand pump	1460		60,000				
	Sub total:			1,485,580				
RI 5-5B	A. Repoint & seal brick	1460	15	80,000				
Chapel/Coddington	Sub total:			80,000				
HA-Wide Management Improvements	A. Security program	1408		90,000				
	B. Resident employment	1408		125,500				
	C. Resident Council operations	1408		124,000				
	D. Software upgrades	1408		10,000				
	E. Staff training	1408		6,000				
	Sub total:			355,500				

Annual Statement/Performance and Evaluation Report
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)
Part II: Supporting Pages

PHA Name: The Housing Authority of the City of Newport, Rhode Island		Grant Type and Number Capital Fund Program Grant No: RI43P0050102 Replacement Housing Factor Grant No:			Federal FY of Grant: 2002			
Development Number Name/HA- Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised	Funds Obligated	Funds Expended	
HA-Wide	A. Salary of Administration employees	1410		222,700				
Admin. Costs	Sub total:			222,700				
Fees & Costs	A. Clerk of Works	1430		15,000				
	Sub total:			15,000				
Operations	A. Professional services	1406		524,867				
	Sub total:			524,867				

Annual Statement/Performance and Evaluation Report
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)
Part III: Implementation Schedule

PHA Name: The Housing Authority of the City of Newport, Rhode Island	Grant Type and Number Capital Fund Program No: RI43P0050102 Replacement Housing Factor No:	Federal FY of Grant: 2002
---	--	----------------------------------

Development Number Name/HA-Wide Activities	All Fund Obligated (Quarter Ending Date)			All Funds Expended (Quarter Ending Date)			Reasons for Revised Target Dates
	Original	Revised	Actual	Original	Revised	Actual	
RI 5-1 Park Holm	12/31/03			6/30/05			
RI 5-3 Tonomy Hill	12/31/03			6/30/05			
RI 5-4 Pond/Edgar	12/31/03			6/30/05			
RI 5-5A Donovan Manor	13/31/03			6/30/05			
RI 5-5B Chapel/Coddington	12/31/03			6/30/05			
RI 5-8 Earl Avenue	12/31/03			6/30/05			

ATTACHMENT F (ri005f02)

PET POLICY

Pet will be approved in writing by the Housing Authority of the City of Newport, Rhode Island, prior to moving upon Authority grounds. Certificate of annual licensing by the City of Newport will be provided to the Authority prior to the approval of the pet. Resident agrees to abide by all city regulations regarding care and custody of animals.

Resident agrees to have pet neutered or spayed and will provide written veterinary certificate of such to the Authority prior to bringing the animal onto the premises. If the animal is too young, resident agrees to have it neutered or spayed when it reaches a suitable age. Resident will provide written proof of yearly distemper boosters and rabies boosters.

Resident agrees to pay \$75.00 pet deposit. This deposit shall be paid in advance. Pet deposit will be used toward repairs, cleaning treatment for flea infestation, or replacement of any part of resident's apartment or premises damaged by the pet. This deposit is refundable if no damage is done as verified by the Authority after either the pet or the resident vacates the premises.

Cats and dogs will be kept inside the apartment and not allowed to roam freely. They must be walked on a leash at all times and away from the apartment grounds. Pets shall not use common areas inside of building except for the purpose of passing to the outside of the buildings (except for seeing eye dogs).

For cats, resident will provide a litter box which is to be kept sanitary and maintained by the resident. Fecal droppings outside of building shall be picked up and disposed of immediately by pet owner in an area designated by the Authority. Adequate precautions are to be taken to prevent pets from disturbing neighbors (e.g. barking, howling, loud meowing, scratching, biting, etc.).

Resident agrees not to alter the apartment, patio or any other portion of the premises to create an enclosure for an animal.

The types of animals allowed as pets shall be limited as follows: One dog not exceeding 25 lbs. in weight or 15 inches in height, at maturity; or one cat. One pet per resident at any one time. No more than four small, caged birds, i.e. canary, parakeet, finch, etc. Birds must be confined to a cage at all times.

Aquariums may be no larger than 40 gallons and must be sealed against leakage. No gerbils or hamsters. No birds of prey or other dangerous species may be kept.

Visitors or guests are prohibited from bringing any unauthorized pet onto the grounds or into a unit.

In case of emergency or illness, resident will designate someone who will remove the pet from their apartment and be responsible for its care.

If the Authority determines that a pet is a nuisance or threat to the safety or security of person or property, it may request the removal of the pet from the premises. A copy of the Authority's Grievance Procedure will be made available to the resident upon request.

Residents who violate these rules are subject to being required to remove the pet within 30 days of notice by the Authority, and/or eviction.

ATTACHMENT G (ri005g02)

STATEMENT OF PROGRESS IN MEETING THE MISSION AND GOALS OUTLINED IN THE CURRENT 5-YEAR PLAN

The Authority continues to pursue its mission to provide decent, safe, sanitary and affordable housing and to promote homeownership, economic development, economic self-sufficiency for public housing residents and a living environment free from discrimination and crime.

In an attempt to expand the supply of public housing, the HACN will apply for additional rental vouchers to augment our existing mainstream program. We are now above 90% rent-up and should be eligible for additional Section 8 vouchers. We were, however, able to maintain vacancies in our public housing at 62 from October 31, 2000 to October 31, 2001. Twenty efficiency units that were difficult to rent were converted to 10 one-bedroom units which are rented.

The HACN recently published PHAS score is 84%.

Many of the HACN goals were tied to a successful HOPE VI effort. The HACN application to HUD for \$32 million to replace 498 units of existing, functionally obsolete units in Tonomy Hill with 425 mixed income/mixed use rental and homeownership opportunities has not been acted upon by HUD. This program also included an off-site replacement program with a goal of no loss of affordable housing units. Equally important was a provision of the program to expand opportunities for economic independence through the Community and Supportive Services program.

The Board of Commissioners of the HACN has voted to apply to the State Housing Agency for funds to renovate Tonomy Hill should the HOPE VI application be denied.

Based on comments received from the Resident Advisory Board, the Authority hired one additional property manager for Tonomy Hill and dumpster pads have been installed and fenced in.

ATTACHMENT H (ri005h02)

RESIDENT MEMBERS OF THE PHA GOVERNING BOARD

1. Mr. Robert H. Douglas
elected
Term of Appointment: June 3, 1998 - June 3, 2002

2. Ms. Elizabeth Fuerte
elected
Term of Appointment: June 3, 1998 - June 3, 2002

ATTACHMENT I (ri005i02)

MEMBERS OF THE RESIDENT ADVISORY BOARD

Batey, Frances
Breed, Melissa
Cochrane, John
Davis, Lisa
Gray, Jean
Haig, C. Raymond
Hall, Jade

Harris, Yvette
Islam, Joyce
Long, Susan
Mulligan, Sylvia
Santiago, Benjamin
Virgadamo, Yvonne

ATTACHMENT J (ri005j02)

PROJECT-BASED VOUCHER PROGRAM

HUD has approved project-basing up to 20 Section 8 vouchers. The Newport Housing Authority has obligated 8 of these 20 vouchers to be used in the Harbor House development located within the City of Newport, Rhode Island. Project basing these units is consistent with the Authority's PHA plan to increase the number of available and affordable housing units in areas other than the north end of the city where the majority of affordable housing units are concentrated.

ATTACHMENT K (ri005k02)

Component 10 (B) Voluntary Conversion Initial Assessments

- a. How many of the PHA's developments are subject to the Required Initial Assessments? 2

- b. How many of the PHA's developments are not subject to the Required Initial Assessments based on exemptions (e.g., elderly and/or disabled developments not general occupancy projects)? 4

- c. How many Assessments were conducted for the PHA's covered developments?
 1

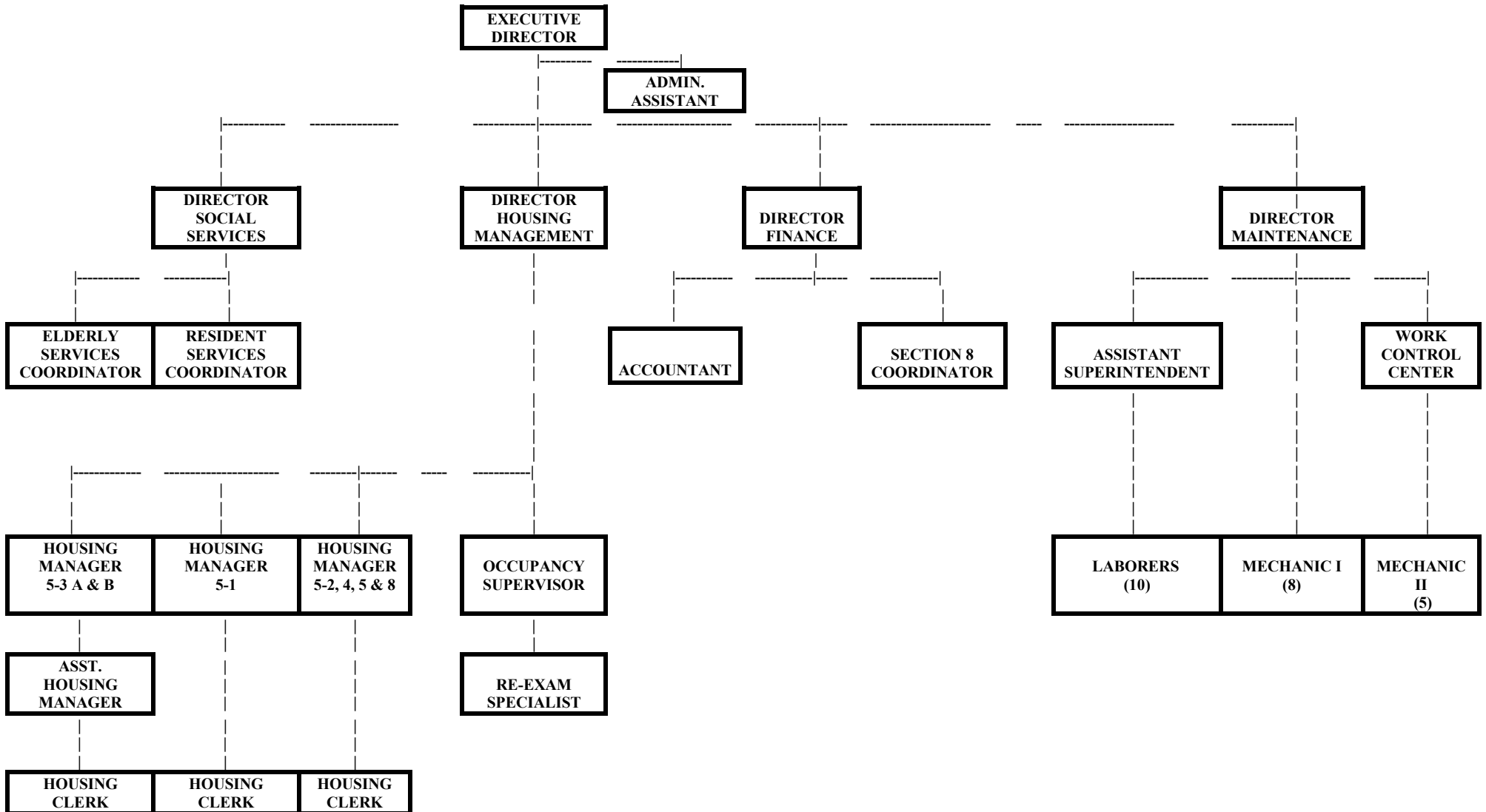
- d. Identify PHA developments that may be appropriate for conversion based on the Required Initial Assessments:

Development Name	Number of Units

- e. If the PHA has not completed the Required Initial Assessments, describe the status of these assessments:

THE HOUSING AUTHORITY OF THE CITY OF NEWPORT, RHODE ISLAND

ATTACHMENT L (ri005102) ORGANIZATION CHART



Public Housing Drug Elimination Program Plan

Note: THIS PHDEP Plan template (HUD 50075-PHDEP Plan) is to be completed in accordance with Instructions located in applicable PIH Notices.

Annual PHDEP Plan Table of Contents:

1. General Information/History
2. PHDEP Plan Goals/Budget
3. Milestones
4. Certifications

Section 1: General Information/History

A. Amount of PHDEP Grant \$

B. Eligibility type (Indicate with an "x") N1 _____ N2 _____ R X _____

C. FFY in which funding is requested 2002

D. Executive Summary of Annual PHDEP Plan

In the space below, provide a brief overview of the PHDEP Plan, including highlights of major initiatives or activities undertaken. It may include a description of the expected outcomes. The summary must not be more than five (5) sentences long

E. Target Areas

Complete the following table by indicating each PHDEP Target Area (development or site where activities will be conducted), the total number of units in each PHDEP Target Area, and the total number of individuals expected to participate in PHDEP sponsored activities in each Target Area.

PHDEP Target Areas (Name of development(s) or site)	Total # of Units within the PHDEP Target Area(s)	Total Population to be Served within the PHDEP Target Area(s)
RI 5-1 Park Holm	262	560
RI 5-2 Chapel Terrace	76	197
RI 5-3 Tonomy Hill	498	1115

F. Duration of Program

Indicate the duration (number of months funds will be required) of the PHDEP Program proposed under this Plan (place an "x" to indicate the length of program by # of months. For "Other", identify the # of months).

6 Months _____ **12 Months** X _____ **18 Months** _____ **24 Months** _____ **Other** _____

G. PHDEP Program History

Indicate each FY that funding has been received under the PHDEP Program (place an “x” by each applicable Year) and provide amount of funding received. If previously funded programs have not been closed out at the time of this submission, indicate the fund balance and anticipated completion date. For grant extensions received, place “GE” in column or “W” for waivers.

Fiscal Year of Funding	PHDEP Funding Received	Grant #	Fund Balance as of Date of this Submission	Grant Extensions or Waivers	Anticipated Completion Date
FY 1996	330,600	RI43DEP0050196	0		
FY 1997	330,600	RI43DEP0050197	0		
FY 1998	327,300	RI43DEP0050198	0		6/2000
FY 1999	241,055	RI43DEP0050199	0		2/2001
FY 2000	251,228	RI43DEP0050200	95,000		2/2002
FY 2001	269,278	RI43DEP0050201	269,278		3/2003

Section 2: PHDEP Plan Goals and Budget

A. PHDEP Plan Summary

In the space below, summarize the PHDEP strategy to address the needs of the target population/target area(s). Your summary should briefly identify: the broad goals and objectives, the role of plan partners, and your system or process for monitoring and evaluating PHDEP-funded activities. This summary should not exceed 5-10 sentences.

B. PHDEP Budget Summary

Enter the total amount of PHDEP funding allocated to each line item.

FY 2002 PHDEP Budget Summary	
Budget Line Item	Total Funding
9110 - Reimbursement of Law Enforcement	94,278
9120 - Security Personnel	
9130 - Employment of Investigators	
9140 - Voluntary Tenant Patrol	
9150 - Physical Improvements	
9160 - Drug Prevention	102,000
9170 - Drug Intervention	25,000
9180 - Drug Treatment	48,000
9190 - Other Program Costs	
TOTAL PHDEP FUNDING	269,278

C. PHDEP Plan Goals and Activities

In the tables below, provide information on the PHDEP strategy summarized above by budget line item. Each goal and objective should be numbered sequentially for each budget line item (where applicable). Use as many rows as necessary to list proposed activities (additional rows may be inserted in 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 line items in which the PHA has no planned goals or activities may be deleted.

9110 - Reimbursement of Law Enforcement					Total PHDEP Funding: \$94,278		
Goal(s)	To decrease crime and crime-related activities						
Objectives							
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHDEP Funding	Other Funding (Amount/Source)	Performance Indicators
1. Patrols			3/2003	2/2004	94,278	60,000	Decrease in reported crime
2.							
3.							

9120 - Security Personnel					Total PHDEP Funding: \$		
Goal(s)							
Objectives							
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHDEP Funding	Other Funding (Amount/Source)	Performance Indicators
1.							
2.							
3.							

9130 - Employment of Investigators					Total PHDEP Funding: \$		
Goal(s)							
Objectives							
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHDEP Funding	Other Funding (Amount/Source)	Performance Indicators
1.							
2.							
3.							

9140 - Voluntary Tenant Patrol					Total PHDEP Funding: \$		
Goal(s)							
Objectives							
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHEDEP Funding	Other Funding (Amount /Source)	Performance Indicators
1.							
2.							
3.							

9150 - Physical Improvements					Total PHDEP Funding: \$		
Goal(s)							
Objectives							
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHEDEP Funding	Other Funding (Amount /Source)	Performance Indicators
1.							
2.							
3.							

9160 - Drug Prevention					Total PHDEP Funding: \$102,000		
Goal(s)							
Reduce drug usage among residents							
Objectives							
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHEDEP Funding	Other Funding (Amount /Source)	Performance Indicators
1. Summer Camp	100	1000	6/2003	8/2003	30,000	10,000	
2. Education	275	1000	2/2003	2/2004	12,000	5,000	
3. Boys & Girls Club	275	1000	2/2003	2/2004	60,000	25,000	

9170 - Drug Intervention					Total PHDEP Funding: \$25,000		
Goal(s)							
Reduce drug usage among residents							
Objectives							
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHEDEP Funding	Other Funding (Amount /Source)	Performance Indicators
1. various activities	100	1000	2/2003	2/2004	25,000	7,500	
2.							
3.							

9180 - Drug Treatment					Total PHDEP Funding: \$48,000		
Goal(s)	Reduce drug usage among residents						
Objectives							
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHEDEP Funding	Other Funding (Amount /Source)	Performance Indicators
1. CODAC/Counseling	80	1872	2/2003	2/2004	48,000	10,000	Successfully treat 15%
2.							
3.							

9190 - Other Program Costs					Total PHDEP Funds: \$		
Goal(s)	Improve performance measurements						
Objectives	to have all grantees provide useful data						
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHEDEP Funding	Other Funding (Amount /Source)	Performance Indicators
1.							
2.							
3.							

Section 3: Expenditure/Obligation Milestones

Indicate by Budget Line Item and the Proposed Activity (based on the information contained in Section 2 PHDEP Plan Budget and Goals), the % of funds that will be expended (at least 25% of the total grant award) and obligated (at least 50% of the total grant award) within 12 months of grant execution.

Budget Line Item #	25% Expenditure of Total Grant Funds By Activity #	Total PHDEP Funding Expended (sum of the activities)	50% Obligation of Total Grant Funds by Activity #	Total PHDEP Funding Obligated (sum of the activities)
<i>e.g Budget Line Item # 9120</i>	<i>Activities 1, 3</i>		<i>Activity 2</i>	
9110	All activities	94,278	All activities	94,278
9120				
9130				
9140				
9150				
9160	All activities	102,000	All activities	102,000
9170	All activities	25,000	All activities	25,000
9180	All activities	48,000	All activities	48,000
9190				
TOTAL		269,278		269,278

Section 4: Certifications

A comprehensive certification of compliance with respect to the PHDEP Plan submission is included in the “PHA Certifications of Compliance with the PHA Plan and Related Regulations.”

Public Housing Drug Elimination Program Plan

Note: THIS PHDEP Plan template (HUD 50075-PHDEP Plan) is to be completed in accordance with Instructions located in applicable PIH Notices.

Annual PHDEP Plan Table of Contents:

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D. Executive Summary of Annual PHDEP Plan

In the space below, provide a brief overview of the PHDEP Plan, including highlights of major initiatives or activities undertaken. It may include a description of the expected outcomes. The summary must not be more than five (5) sentences long

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RI 5-1 Park Holm	262	560
RI 5-2 Chapel Terrace	76	197
RI 5-3 Tonomy Hill	498	1115

F. Duration of Program

Indicate the duration (number of months funds will be required) of the PHDEP Program proposed under this Plan (place an "x" to indicate the length of program by # of months. For "Other", identify the # of months).

6 Months _____ **12 Months** X _____ **18 Months** _____ **24 Months** _____ **Other** _____

G. PHDEP Program History

Indicate each FY that funding has been received under the PHDEP Program (place an “x” by each applicable Year) and provide amount of funding received. If previously funded programs have not been closed out at the time of this submission, indicate the fund balance and anticipated completion date. For grant extensions received, place “GE” in column or “W” for waivers.

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FY 1996	330,600	RI43DEP0050196	0		
FY 1997	330,600	RI43DEP0050197	0		
FY 1998	327,300	RI43DEP0050198	0		6/2000
FY 1999	241,055	RI43DEP0050199	0		2/2001
FY 2000	251,228	RI43DEP0050200	95,000		2/2002
FY 2001	269,278	RI43DEP0050201	269,278		3/2003

Section 2: PHDEP Plan Goals and Budget

A. PHDEP Plan Summary

In the space below, summarize the PHDEP strategy to address the needs of the target population/target area(s). Your summary should briefly identify: the broad goals and objectives, the role of plan partners, and your system or process for monitoring and evaluating PHDEP-funded activities. This summary should not exceed 5-10 sentences.

B. PHDEP Budget Summary

Enter the total amount of PHDEP funding allocated to each line item.

FY 2002 PHDEP Budget Summary	
Budget Line Item	Total Funding
9110 - Reimbursement of Law Enforcement	94,278
9120 - Security Personnel	
9130 - Employment of Investigators	
9140 - Voluntary Tenant Patrol	
9150 - Physical Improvements	
9160 - Drug Prevention	102,000
9170 - Drug Intervention	25,000
9180 - Drug Treatment	48,000
9190 - Other Program Costs	
TOTAL PHDEP FUNDING	269,278

C. PHDEP Plan Goals and Activities

In the tables below, provide information on the PHDEP strategy summarized above by budget line item. Each goal and objective should be numbered sequentially for each budget line item (where applicable). Use as many rows as necessary to list proposed activities (additional rows may be inserted in 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 line items in which the PHA has no planned goals or activities may be deleted.

9110 - Reimbursement of Law Enforcement					Total PHDEP Funding: \$94,278		
Goal(s)	To decrease crime and crime-related activities						
Objectives							
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHDEP Funding	Other Funding (Amount/Source)	Performance Indicators
1. Patrols			3/2003	2/2004	94,278	60,000	Decrease in reported crime
2.							
3.							

9120 - Security Personnel					Total PHDEP Funding: \$		
Goal(s)							
Objectives							
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHDEP Funding	Other Funding (Amount/Source)	Performance Indicators
1.							
2.							
3.							

9130 - Employment of Investigators					Total PHDEP Funding: \$		
Goal(s)							
Objectives							
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHDEP Funding	Other Funding (Amount/Source)	Performance Indicators
1.							
2.							
3.							

9140 - Voluntary Tenant Patrol					Total PHDEP Funding: \$		
Goal(s)							
Objectives							
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHEDEP Funding	Other Funding (Amount /Source)	Performance Indicators
1.							
2.							
3.							

9150 - Physical Improvements					Total PHDEP Funding: \$		
Goal(s)							
Objectives							
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHEDEP Funding	Other Funding (Amount /Source)	Performance Indicators
1.							
2.							
3.							

9160 - Drug Prevention					Total PHDEP Funding: \$102,000		
Goal(s)							
Reduce drug usage among residents							
Objectives							
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHEDEP Funding	Other Funding (Amount /Source)	Performance Indicators
1. Summer Camp	100	1000	6/2003	8/2003	30,000	10,000	
2. Education	275	1000	2/2003	2/2004	12,000	5,000	
3. Boys & Girls Club	275	1000	2/2003	2/2004	60,000	25,000	

9170 - Drug Intervention					Total PHDEP Funding: \$25,000		
Goal(s)							
Reduce drug usage among residents							
Objectives							
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHEDEP Funding	Other Funding (Amount /Source)	Performance Indicators
1. various activities	100	1000	2/2003	2/2004	25,000	7,500	
2.							
3.							

9180 - Drug Treatment					Total PHDEP Funding: \$48,000		
Goal(s)	Reduce drug usage among residents						
Objectives							
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHEDEP Funding	Other Funding (Amount /Source)	Performance Indicators
1. CODAC/Counseling	80	1872	2/2003	2/2004	48,000	10,000	Successfully treat 15%
2.							
3.							

9190 - Other Program Costs					Total PHDEP Funds: \$		
Goal(s)	Improve performance measurements						
Objectives	to have all grantees provide useful data						
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHEDEP Funding	Other Funding (Amount /Source)	Performance Indicators
1.							
2.							
3.							

Section 3: Expenditure/Obligation Milestones

Indicate by Budget Line Item and the Proposed Activity (based on the information contained in Section 2 PHDEP Plan Budget and Goals), the % of funds that will be expended (at least 25% of the total grant award) and obligated (at least 50% of the total grant award) within 12 months of grant execution.

Budget Line Item #	25% Expenditure of Total Grant Funds By Activity #	Total PHDEP Funding Expended (sum of the activities)	50% Obligation of Total Grant Funds by Activity #	Total PHDEP Funding Obligated (sum of the activities)
<i>e.g Budget Line Item # 9120</i>	<i>Activities 1, 3</i>		<i>Activity 2</i>	
9110	All activities	94,278	All activities	94,278
9120				
9130				
9140				
9150				
9160	All activities	102,000	All activities	102,000
9170	All activities	25,000	All activities	25,000
9180	All activities	48,000	All activities	48,000
9190				
TOTAL		269,278		269,278

Section 4: Certifications

A comprehensive certification of compliance with respect to the PHDEP Plan submission is included in the “PHA Certifications of Compliance with the PHA Plan and Related Regulations.”

ATTACHMENT N (ri005n02)

NEWPORT RESIDENT COUNCIL (RAB) COMMENTS

To: Housing Authority of the City of Newport (HACN)
and the Commissioners

From: Newport Residents Council (NRC)

Re: Proposals/Comments regarding the 2002 Annual Plan

Date: 1/15/02

On behalf of the Newport Residents' Council, we would like to thank Mr. Marvelle for taking the time to listen to and respond to the concerns expressed by the residents at the public meeting held on January 3, 2002 at the Florence Gray Center, in regard to the PHA 5- Year Plan.

The Newport Residents' Council concurs with the following notes taken by Timothy Barrow at that meeting that addressed our questions and concerns.

- Kitchens and baths won't get done in non-Phase I Tonomy Hill units which will be bad for those residents.
- Will money run out after Phase I so there won't be a Phase II to completely renew all of Tonomy Hill?
- That the demolition grant will only be for the 17 buildings in Phase I-A.
- If the 5-Year Plan calls for no more than a 10% loss of affordable housing and the Annual Plan has an amount greater than 10%, isn't this inconsistent?
- Housing should provide transportation to meetings such as Rhode Island Housing meetings.
- NHA should make sure Resident Council is assisted in becoming more effective and receives funding to that end.
- That there be funding in the Tax Credit Application to fund a CSS program.
- Are we spending HUD designated Resident Service funds of \$25 per unit as required?
- Can rent be determined on net income instead of gross income?
- NHA should provide counseling to tenants with rent arrearages.
- Can NHA take out the Community Service requirement?
- Several opposed demolition and privatization of NHA management.

At this time we have nothing further to add to what was voiced at that meeting and to some extent was reiterated at the HACN Board of Commissioners meeting of January 10, 2002.

We look forward to our continuing association with the HACN and appreciate that our input is considered and desired.

ATTACHMENT O (ri005o02)

Capital Fund Program Five-Year Action Plan

Part I: Summary

PHA Name Newport Housing Authority		Newport, Newport County, Rhode Island		<input checked="" type="checkbox"/> Original 5-Year Plan <input type="checkbox"/> Revision No:	
Development Number/Name/HA-Wide	Year 1	Work Statement for Year 2 FFY Grant: 2003 PHA FY: 2003	Work Statement for Year 3 FFY Grant: 2004 PHA FY: 2004	Work Statement for Year 4 FFY Grant: 2005 PHA FY: 2005	Work Statement for Year 5 FFY Grant: 2006 PHA FY: 2006
	Annual Statement				
RI 5-1 Park Holm		0	77,000	0	1,169,200
RI 5-2 Chapel Terr.		0	0	0	225,200
RI 5-3 Tonomy Hill		2,039,847	1,894,447	2,107,447	0
RI 5-4 Pond/Edgar		0	0	0	170,000
RI 5-5A Donovan Manor		67,600	121,000	0	50,000
RI 5-5B Chapel/Coddington		0	0	0	0
RI 5-8 Earl Avenue		0	0	0	185,000
CFP Funds Listed for 5-year planning					
Replacement Housing Factor Funds					

Capital Fund Program Five-Year Action Plan
Part II: Supporting Pages—Work Activities

Activities for Year : 4
 FFY Grant: 2005
 PHA FY: 2005

Activities for Year: 5
 FFY Grant: 2006
 PHA FY: 2006

Development Name/Number	Major Work Categories	Estimated Cost	Development Name/Number	Major Work Categories	Estimated Cost
Management Improvements	A. Security program	90,000	Management Improvements	A. Security program	90,000
	B. Resident employment	125,500		B. Resident employment	125,500
	C. Resident Council Operations	124,000		C. Resident Council Operations	124,000
	D. Software upgrades	10,000		D. Software upgrades	10,000
	E. Staff training	6,000		E. Staff training	6,000
	Sub total:	355,500		Sub total:	355,500
Administration	A. Salary allocation of Admin. employees	220,700	Administration	A. Salary allocation of Admin. employees	220,700
	Sub total:	220,700		Sub total:	220,700
			Fees & Costs	Clerk of Works	15,000
				A/E	50,000
				Sub total:	65,000
			Operations	Services	243,247
				Sub total:	243,247
Total CFP Estimated Cost		\$2,683,647			\$2,683,647